

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 EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC

ADDRESS (number and street) 520 S. GRAND AVE., STE. 700 Check if different than previously reported. (ACC) LOS ANGELES CA 90071

2. FEC IDENTIFICATION NUMBER C00088591 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 02 01 2006 through 02 28 2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer CARY DAVIDSON

Signature of Treasurer Electronically Filed by CARY DAVIDSON Date 03 20 2006

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC

Report Covering the Period: From: 

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		147914.28
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	199003.39									
(c) Total Receipts (from Line 19) .....	39012.49	90101.60								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	238015.88	238015.88								
7. Total Disbursements (from Line 31) .....	63750.00	63750.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	174265.88	174265.88								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

CA

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  
EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC

Report Covering the Period: From: 

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	2946.62	4192.52
(i) Itemized (use Schedule A) .....	31565.87	63409.08
(ii) Unitemized .....	34512.49	67601.60
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	34512.49	67601.60
12. Transfers From Affiliated/Other Party Committees .....	4500.00	21500.00
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	1000.00
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)) .....	39012.49	90101.60
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	39012.49	90101.60

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	57500.00	57500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	6250.00	6250.00
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))..	63750.00	63750.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	63750.00	63750.00

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	34512.49	67601.60
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	34512.49	67601.60
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 20
	<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)  
**EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC**

Full Name (Last, First, Middle Initial) <b>A. CHARLES J BRINKMAN</b>		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 6	
Mailing Address <b>725 BREEZY LAKE WAY</b>		<b>Transaction ID: INC:A:314856</b>	
City <b>SYKESVILLE</b>	State <b>MD</b>	Amount of Each Receipt this Period 150.00	
Zip Code <b>21784</b>			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>NORTHROP GRUMMAN CORPORAT- ION</b>	Occupation <b>VP SURVEILLANCE &amp; REMOTE SENSING</b>		
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>B. Wesley Bush</b>		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 8 / 2 0 0 6	
Mailing Address <b>808 Duncan Place</b>		<b>Transaction ID: INC:A:316830</b>	
City <b>Manhattan Beach</b>	State <b>CA</b>	Amount of Each Receipt this Period 380.00	
Zip Code <b>90266</b>			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>Northrop Grumman Corporat- ion</b>	Occupation <b>Corporate VP and CFO</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 665.00		

Full Name (Last, First, Middle Initial) <b>C. Sandra Evers Manly</b>		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 8 / 2 0 0 6	
Mailing Address <b>1253 Longwood Ave</b>		<b>Transaction ID: INC:A:316862</b>	
City <b>Los Angeles</b>	State <b>CA</b>	Amount of Each Receipt this Period 384.60	
Zip Code <b>90019-1759</b>			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>Northrop Grumman</b>	Occupation <b>VP Ethics and Diversity</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 673.05		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	914.60
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 20
	<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)  
EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC

Full Name (Last, First, Middle Initial) <b>A. OTTO J GUENTHER</b>		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 8 / 2 0 0 6
Mailing Address 8611 CROSS OAKS LN		Transaction ID: INC:A:317286
City State Zip Code FAIRFAX STATION VA 22039	Amount of Each Receipt this Period 105.76	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer NORTHROP GRUMMAN	Occupation SECTOR VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 211.52	

Full Name (Last, First, Middle Initial) <b>B. JON M KELLEY</b>		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 6
Mailing Address PO BOX 37		Transaction ID: INC:A:314786
City State Zip Code PASADENA MD 21123	Amount of Each Receipt this Period 101.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer NORTHROP GRUMMAN CORPORAT- ION	Occupation MANAGER, MARKET PLANNING	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 202.00	

Full Name (Last, First, Middle Initial) <b>C. TAYLOR W LAWRENCE</b>		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 6
Mailing Address 1100 BOUCHER AVE		Transaction ID: INC:A:315429
City State Zip Code ANNAPOLIS MD 21403	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer NORTHROP GRUMMAN CORPORAT- ION	Occupation SECTOR VP & GM C4ISR SYSTEMS DIVISION	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	356.76
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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)  
EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC

**A.** Full Name (Last, First, Middle Initial)  
JOHN R MARTIN

Mailing Address 2824 DANA COURT

City State Zip Code  
ELLICOTT CITY MD 21042

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

Name of Employer Occupation  
NORTHROP GRUMMAN CORPORAT- MANAGER, BUSINESS DEVELOPMENT MGMT  
ION

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
216.66

Date of Receipt  
M M / D D / Y Y Y Y  
0 2 / 2 8 / 2 0 0 6

Transaction ID: INC:A:315049

Amount of Each Receipt this Period  
108.33

**B.** Full Name (Last, First, Middle Initial)  
MATTHEW M MCGUIRE

Mailing Address 6208 RAMBLEWOOD TRAIL

City State Zip Code  
MANASSAS VA 20112-3023

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

Name of Employer Occupation  
NORTHROP GRUMMAN DIRECTOR OPS

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 2 / 1 8 / 2 0 0 6

Transaction ID: INC:A:317283

Amount of Each Receipt this Period  
130.00

**C.** Full Name (Last, First, Middle Initial)  
Paul Meyer

Mailing Address 301 Paseo de Gracia

City State Zip Code  
Redondo Beach CA 90277

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

Name of Employer Occupation  
Northrop Grumman Corporat- Sector VP, Adv. Capabilities  
ion

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 2 / 1 8 / 2 0 0 6

Transaction ID: INC:A:315885

Amount of Each Receipt this Period  
120.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>358.33</b>
<b>TOTAL</b> This Period (last page this line number only) .....	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 20
	<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)  
EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC

Full Name (Last, First, Middle Initial) <b>A. Frederick L. Ricker</b>		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 8 / 2 0 0 6	
Mailing Address 1730 10th Street		<b>Transaction ID: INC:A:317248</b>	
City State Zip Code Manhattan Beach CA 90266	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer NORTHROP GRUMMAN	Occupation VP FINANCE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>B. James Sanford</b>		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 8 / 2 0 0 6	
Mailing Address 12451 Interior Cir		<b>Transaction ID: INC:A:316815</b>	
City State Zip Code Los Alamitos CA 90720-5106	Amount of Each Receipt this Period 120.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Northrop Grumman	Occupation Corp VP & Treasurer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

Full Name (Last, First, Middle Initial) <b>C. CRAIG STARESINICH</b>		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 8 / 2 0 0 6	
Mailing Address 3711 CENTER WAY		<b>Transaction ID: INC:A:317271</b>	
City State Zip Code FAIRFAX VA 22033	Amount of Each Receipt this Period 384.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer NORTHROP GRUMMAN	Occupation SECTOR VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 768.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	704.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 20
	<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)  
**EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC**

<b>A.</b> Full Name (Last, First, Middle Initial) Ronald Sugar		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 8 / 2 0 0 6	
Mailing Address 228 Copa de Oro Road		<b>Transaction ID:</b> INC:A:316879	
City State Zip Code Los Angeles CA 90077	Amount of Each Receipt this Period 384.60		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Northrop Grumman	Occupation COB, CEO & President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 673.05		

<b>B.</b> Full Name (Last, First, Middle Initial) William Terry		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 8 / 2 0 0 6	
Mailing Address 18440 Coastline Drive		<b>Transaction ID:</b> INC:A:316860	
City State Zip Code Malibu CA 90265	Amount of Each Receipt this Period 120.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Northrop Grumman	Occupation Corp VP & General Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

<b>C.</b> Full Name (Last, First, Middle Initial) IVORY E TUCKER		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 6	
Mailing Address 566 LAUREL ROAD		<b>Transaction ID:</b> INC:A:314813	
City State Zip Code RIVA MD 21140	Amount of Each Receipt this Period 108.33		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer NORTHROP GRUMMAN CORPORAT- ION	Occupation VP MATERIAL OPERATIONS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 216.66		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	612.93
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	2946.62

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 / 20
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" 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)  
EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC

**A.** Full Name (Last, First, Middle Initial)  
NEWPORT NEWS SHIPBUILDING PAC

Mailing Address 801 PENNSYLVANIA AVE., NW, STE. 35

City State Zip Code  
WASHINGTON DC 20004

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
21500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 2 / 2 8 / 2 0 0 6

Transaction ID: INC:A:312423

Amount of Each Receipt this Period  
4500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	4500.00

**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 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

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)  
EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC

Full Name (Last, First, Middle Initial) <b>A. A LOT OF PEOPLE FOR DAVE OBEY</b>		Transaction ID: EXP:B:312292
Mailing Address P.O. BOX 1322		Date of Disbursement MM / DD / YYYY 02 / 16 / 2006
City WAUSAU	State WI	Zip Code 54402
Purpose of Disbursement	Amount of Each Disbursement this Period 2500.00	
Candidate Name DAVE OBEY	011 Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: WI District: 7		

Full Name (Last, First, Middle Initial) <b>B. BOBBY SCOTT FOR CONGRESS</b>		Transaction ID: EXP:B:312299
Mailing Address P.O. BOX 251		Date of Disbursement MM / DD / YYYY 02 / 16 / 2006
City NEWPORT NEWS	State VA	Zip Code 23607
Purpose of Disbursement	Amount of Each Disbursement this Period 3000.00	
Candidate Name ROBERT SCOTT	011 Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: VA District: 3		

Full Name (Last, First, Middle Initial) <b>C. BOBBY SCOTT FOR CONGRESS</b>		Transaction ID: EXP:B:312298
Mailing Address P.O. BOX 251		Date of Disbursement MM / DD / YYYY 02 / 16 / 2006
City NEWPORT NEWS	State VA	Zip Code 23607
Purpose of Disbursement	Amount of Each Disbursement this Period 2000.00	
Candidate Name ROBERT SCOTT	011 Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: VA District: 3		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	7500.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 13 / 20

<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

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)  
EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC

Full Name (Last, First, Middle Initial) <b>A. BOSWELL FOR CONGRESS</b>		Transaction ID: EXP:B:312285 Date of Disbursement																					
Mailing Address P.O. BOX 6220		<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>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	6		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	2		1	6		2	0	0	6														
City DES MOINES	State IA	Zip Code 50309	Amount of Each Disbursement this Period																				
Purpose of Disbursement		011	1000.00																				
Candidate Name LEONARD BOSWELL		Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: IA	District: 03																						

Full Name (Last, First, Middle Initial) <b>B. CHARLIE MELANCON CAMPAIGN COMMITTEE INC.</b>		Transaction ID: EXP:B:312290 Date of Disbursement																					
Mailing Address P.O. BOX 549		<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>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	6		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	2		1	6		2	0	0	6														
City NAPOLEONVILLE	State LA	Zip Code 70390	Amount of Each Disbursement this Period																				
Purpose of Disbursement		011	1000.00																				
Candidate Name CHARLIE MELANCON		Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: LA	District: 3																						

Full Name (Last, First, Middle Initial) <b>C. DEMOCRATIC SENATORIAL CAMPAIGN COMMITTEE</b>		Transaction ID: EXP:B:312295 Date of Disbursement																					
Mailing Address 120 MARYLAND AVE., NE		<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>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	6		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	2		1	6		2	0	0	6														
City WASHINGTON	State DC	Zip Code 20002	Amount of Each Disbursement this Period																				
Purpose of Disbursement		011	15000.00																				
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:																						

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	17000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 14 / 20

<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

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)  
EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC

Full Name (Last, First, Middle Initial) <b>A. FORWARD TOGETHER PAC</b>		Transaction ID: EXP:B:312327 Date of Disbursement																				
Mailing Address 201 N. UNION ST., STE. 350		<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>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	6		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		1	6		2	0	0	6													
City ALEXANDRIA	State VA	Zip Code 22314																				
Purpose of Disbursement	<table border="1"><tr><td>011</td></tr></table> Category/Type		011																			
011																						
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:																						

Amount of Each Disbursement this Period  

1000.00
---------

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF THE BIG SKY PAC</b>		Transaction ID: EXP:B:312296 Date of Disbursement																				
Mailing Address P.O. BOX 1497		<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>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	6		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		1	6		2	0	0	6													
City HELENA	State MT	Zip Code 59624																				
Purpose of Disbursement	<table border="1"><tr><td>011</td></tr></table> Category/Type		011																			
011																						
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:																						

Amount of Each Disbursement this Period  

4000.00
---------

Full Name (Last, First, Middle Initial) <b>C. PETE KING FOR CONGRESS COMMITTEE</b>		Transaction ID: EXP:B:312328 Date of Disbursement																				
Mailing Address P.O. BOX 1428		<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>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	6		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		1	6		2	0	0	6													
City SEAFORD	State NY	Zip Code 11783																				
Purpose of Disbursement	<table border="1"><tr><td>011</td></tr></table> Category/Type		011																			
011																						
Candidate Name PETE KING																						
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: NY District: 3																						

Amount of Each Disbursement this Period  

4000.00
---------

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>9000.00</td></tr></table>	9000.00
9000.00		
<b>TOTAL</b> 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)

PAGE 15 / 20

<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

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)  
EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC

Full Name (Last, First, Middle Initial) <b>A. PETE KING FOR CONGRESS COMMITTEE</b>		Transaction ID: EXP:B:312329 Date of Disbursement																				
Mailing Address P.O. BOX 1428		<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>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	6		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		1	6		2	0	0	6													
City SEAFORD	State NY	Zip Code 11783																				
Purpose of Disbursement		Amount of Each Disbursement this Period																				
		<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																			
1000.00																						
Candidate Name PETE KING		<table border="1"><tr><td>011</td></tr></table> Category/ Type	011																			
011																						
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: NY District: 3																						

Full Name (Last, First, Middle Initial) <b>B. PICKERING FOR CONGRESS</b>		Transaction ID: EXP:B:312286 Date of Disbursement																				
Mailing Address P.O. BOX 4297		<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>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	6		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		1	6		2	0	0	6													
City BRANDON	State MS	Zip Code 39047																				
Purpose of Disbursement		Amount of Each Disbursement this Period																				
		<table border="1"><tr><td>4000.00</td></tr></table>	4000.00																			
4000.00																						
Candidate Name CHIP PICKERING		<table border="1"><tr><td>011</td></tr></table> Category/ Type	011																			
011																						
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: MS District: 03																						

Full Name (Last, First, Middle Initial) <b>C. REED COMMITTEE</b>		Transaction ID: EXP:B:312287 Date of Disbursement																				
Mailing Address P.O. BOX 8628		<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>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	6		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		1	6		2	0	0	6													
City CRANSTON	State RI	Zip Code 02920																				
Purpose of Disbursement		Amount of Each Disbursement this Period																				
		<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																			
1000.00																						
Candidate Name JACK REED		<table border="1"><tr><td>011</td></tr></table> Category/ Type	011																			
011																						
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: RI District:																						

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>6000.00</td></tr></table>	6000.00
6000.00		
<b>TOTAL</b> 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)

PAGE 16 / 20

<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

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)  
EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC

Full Name (Last, First, Middle Initial) <b>A. ROB BISHOP FOR CONGRESS</b>		Transaction ID: EXP:B:312293 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 6 / 2 0 0 6
Mailing Address P.O. BOX 2004		Amount of Each Disbursement this Period 4000.00
City BRIGHAM CITY State UT Zip Code 84302	011 Category/ Type	
Purpose of Disbursement		
Candidate Name ROB BISHOP		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: UT District: 01	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. ROB BISHOP FOR CONGRESS</b>		Transaction ID: EXP:B:312294 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 6 / 2 0 0 6
Mailing Address P.O. BOX 2004		Amount of Each Disbursement this Period 1000.00
City BRIGHAM CITY State UT Zip Code 84302	011 Category/ Type	
Purpose of Disbursement		
Candidate Name ROB BISHOP		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: UT District: 01	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. SNOWPAC</b>		Transaction ID: EXP:B:312291 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 6 / 2 0 0 6
Mailing Address 175 SOUTH W. TEMPLE, #650		Amount of Each Disbursement this Period 5000.00
City SALT LAKE CITY State UT Zip Code 84101	011 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

10000.00

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



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 17 / 20

<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

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)  
EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC

Full Name (Last, First, Middle Initial) <b>A. TOM DELAY CONGRESSIONAL COMMITTEE</b>		Transaction ID: EXP:B:312288 Date of Disbursement
Mailing Address 7002 RIVERBROOK DR., #200		<input type="text" value="02"/> <input type="text" value="16"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City SUGAR LAND State TX Zip Code 77479	Purpose of Disbursement	Amount of Each Disbursement this Period
Candidate Name TOM DELAY	<input type="text" value="011"/> Category/ Type	<input type="text" value="4000.00"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 22	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. TOM DELAY CONGRESSIONAL COMMITTEE</b>		Transaction ID: EXP:B:312289 Date of Disbursement
Mailing Address 7002 RIVERBROOK DR., #200		<input type="text" value="02"/> <input type="text" value="16"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City SUGAR LAND State TX Zip Code 77479	Purpose of Disbursement	Amount of Each Disbursement this Period
Candidate Name TOM DELAY	<input type="text" value="011"/> Category/ Type	<input type="text" value="1000.00"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 22	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. WESTERN ACTION PAC</b>		Transaction ID: EXP:B:312297 Date of Disbursement
Mailing Address 2780 OLIVE DRIVE		<input type="text" value="02"/> <input type="text" value="16"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City CHEYENNE State WY Zip Code 82001	Purpose of Disbursement	Amount of Each Disbursement this Period
Candidate Name	<input type="text" value="011"/> Category/ Type	<input type="text" value="3000.00"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="8000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="57500.00"/>

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 18 / 20

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

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

NAME OF COMMITTEE (In Full)  
EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC

Full Name (Last, First, Middle Initial) <b>A. DAWNNA DUKES CAMPAIGN</b>		Transaction ID: EXP:B:312331 Date of Disbursement																					
Mailing Address 327 CONGRESS AVE., 2ND FLOOR		<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>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	6		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	2		1	6		2	0	0	6														
City AUSTIN	State TX	Zip Code 78701	Amount of Each Disbursement this Period																				
Purpose of Disbursement STATE REPRESENTATIVE		011	250.00																				
Candidate Name DAWNNA DUKES		Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: TX	District: 46																						

Full Name (Last, First, Middle Initial) <b>B. ROBERT DUNCAN COMMITTEE</b>		Transaction ID: EXP:B:312284 Date of Disbursement																					
Mailing Address P.O. BOX 2309		<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>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	6		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	2		1	6		2	0	0	6														
City LUBBOCK	State TX	Zip Code 79408	Amount of Each Disbursement this Period																				
Purpose of Disbursement STATE SENATOR		011	5000.00																				
Candidate Name ROBERT DUNCAN		Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: TX	District: 28																						

Full Name (Last, First, Middle Initial) <b>C. TOM CRADDICK CAMPAIGN</b>		Transaction ID: EXP:B:312330 Date of Disbursement																					
Mailing Address 3108 STANOLIND AVE.		<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>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	6		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	2		1	6		2	0	0	6														
City MIDLAND	State TX	Zip Code 79705	Amount of Each Disbursement this Period																				
Purpose of Disbursement STATE REPRESENTATIVE		011	1000.00																				
Candidate Name TOM CRADDICK		Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: TX	District: 82																						

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>6250.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>6250.00</b>

**Image# 26920034011**

Form/Schedule: **SB29**      NON-FEDERAL CONTRIBUTION  
Transaction ID: **EXP:B:312330**

Form/Schedule: **SB29**      NON-FEDERAL CONTRIBUTION  
Transaction ID: **EXP:B:312284**

\*\*\*\*\*

**Image# 26920034012**

Form/Schedule: **SB29**      NON-FEDERAL CONTRIBUTION  
Transaction ID: **EXP:B:312331**

\*\*\*\*\*