

# 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  
Wawa, Inc. Political Action Committee

ADDRESS (number and street) c/o Elko & Associates, Ltd  
2 W. Baltimore Avenue, Suite 210  
 Check if different than previously reported. (ACC)  
Media PA 19063

2. **FEC IDENTIFICATION NUMBER** C00148510  
**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 2009 through 06 30 2009

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 Mr. Leonard Vincent Santivasi

Signature of Treasurer Electronically Filed by Mr. Leonard Vincent Santivasi Date 07 01 2009

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

Office Use Only **FEC FORM 3X** (Rev. 12/2004)

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Wawa, Inc. Political Action Committee

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><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>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		25253.03
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period .....	25253.03									
(c) Total Receipts (from Line 19) .....	9287.05	9287.05								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	34540.08	34540.08								
7. Total Disbursements (from Line 31) .....	14001.33	14001.33								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	20538.75	20538.75								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Wawa, Inc. Political Action Committee

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	1926.56	1926.56
(ii) Unitemized .....	7343.97	7343.97
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	9270.53	9270.53
(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) .....	9270.53	9270.53
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.) .....	16.52	16.52
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)) .....	9287.05	9287.05
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	9287.05	9287.05

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<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.....	426.33	426.33
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	426.33	426.33
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	500.00	500.00
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.....	13075.00	13075.00
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))..	14001.33	14001.33
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	14001.33	14001.33

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 19

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) .....	9270.53	9270.53
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	9270.53	9270.53
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	426.33	426.33
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	426.33	426.33

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 19
	<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)  
Wawa, Inc. Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) James Bluebello	Date of Receipt MM / DD / YYYY 04 / 08 / 2009
	Mailing Address 260 West Baltimore Pike	<b>Transaction ID:</b> SA11AI.14727
	City Wawa State PA Zip Code 19063	Amount of Each Receipt this Period 62.50
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Withholding
	Name of Employer Wawa, Inc. Occupation Vice President of Supply Chain Receipt For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00

<b>B.</b>	Full Name (Last, First, Middle Initial) James Bluebello	Date of Receipt MM / DD / YYYY 05 / 11 / 2009
	Mailing Address 260 West Baltimore Pike	<b>Transaction ID:</b> SA11AI.14800
	City Wawa State PA Zip Code 19063	Amount of Each Receipt this Period 62.50
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Withholding
	Name of Employer Wawa, Inc. Occupation Vice President of Supply Chain Receipt For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 312.50

<b>C.</b>	Full Name (Last, First, Middle Initial) James Bluebello	Date of Receipt MM / DD / YYYY 06 / 09 / 2009
	Mailing Address 260 West Baltimore Pike	<b>Transaction ID:</b> SA11AI.14873
	City Wawa State PA Zip Code 19063	Amount of Each Receipt this Period 62.50
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Withholding
	Name of Employer Wawa, Inc. Occupation Vice President of Supply Chain Receipt For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>187.50</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 19
	<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)  
Wawa, Inc. Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Jeffrey Haller		Date of Receipt MM / DD / YYYY 06 / 09 / 2009		
	Mailing Address 260 West Baltimore Pike		<b>Transaction ID:</b> SA11AI.14902		
	City Wawa	State PA	Zip Code 19063	Amount of Each Receipt this Period 30.80	
	FEC ID number of contributing federal political committee. C		Payroll Withholding		
	Name of Employer Wawa, Inc.	Occupation Area Manager	Receipt For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
		Aggregate Year-to-Date ▼		200.20	

<b>B.</b>	Full Name (Last, First, Middle Initial) Alexander Krowzow		Date of Receipt MM / DD / YYYY 05 / 11 / 2009		
	Mailing Address 260 West Baltimore Pike		<b>Transaction ID:</b> SA11AI.14835		
	City Wawa	State PA	Zip Code 19063	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C		Payroll Withholding		
	Name of Employer Wawa, Inc.	Occupation Senior Real Estate Manager	Receipt For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
		Aggregate Year-to-Date ▼		220.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Alexander Krowzow		Date of Receipt MM / DD / YYYY 06 / 09 / 2009		
	Mailing Address 260 West Baltimore Pike		<b>Transaction ID:</b> SA11AI.14908		
	City Wawa	State PA	Zip Code 19063	Amount of Each Receipt this Period 40.00	
	FEC ID number of contributing federal political committee. C		Payroll Withholding		
	Name of Employer Wawa, Inc.	Occupation Senior Real Estate Manager	Receipt For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
		Aggregate Year-to-Date ▼		260.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	120.80
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 19
	<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)  
Wawa, Inc. Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Richard Ressler		Date of Receipt MM / DD / YYYY 04 / 08 / 2009		
	Mailing Address 260 West Baltimore Pike		<b>Transaction ID:</b> SA11AI.14778		
	City Wawa	State PA	Zip Code 19063	Amount of Each Receipt this Period 57.68	
	FEC ID number of contributing federal political committee. C		Payroll Withholding		
	Name of Employer Wawa, Inc.		Occupation DelMarva Divisional Safety Man		
Receipt For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 245.14			

<b>B.</b>	Full Name (Last, First, Middle Initial) Richard Ressler		Date of Receipt MM / DD / YYYY 05 / 11 / 2009		
	Mailing Address 260 West Baltimore Pike		<b>Transaction ID:</b> SA11AI.14851		
	City Wawa	State PA	Zip Code 19063	Amount of Each Receipt this Period 72.10	
	FEC ID number of contributing federal political committee. C		Payroll Withholding		
	Name of Employer Wawa, Inc.		Occupation DelMarva Divisional Safety Man		
Receipt For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 317.24			

<b>C.</b>	Full Name (Last, First, Middle Initial) Richard Ressler		Date of Receipt MM / DD / YYYY 06 / 09 / 2009		
	Mailing Address 260 West Baltimore Pike		<b>Transaction ID:</b> SA11AI.14924		
	City Wawa	State PA	Zip Code 19063	Amount of Each Receipt this Period 57.68	
	FEC ID number of contributing federal political committee. C		Payroll Withholding		
	Name of Employer Wawa, Inc.		Occupation DelMarva Divisional Safety Man		
Receipt For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 374.92			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	187.46
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 19  
(check only one)

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

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)  
Wawa, Inc. Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Howard Stoeckel

Mailing Address 260 West Baltimore Pike

City State Zip Code  
Wawa PA 19063

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

Name of Employer Wawa, Inc. Occupation CEO

Receipt For: 2009  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 06 / 2009

**Transaction ID:** SA11AI.14713

Amount of Each Receipt this Period  
100.00

Payroll Withholding

**B.**

Full Name (Last, First, Middle Initial)  
Howard Stoeckel

Mailing Address 260 West Baltimore Pike

City State Zip Code  
Wawa PA 19063

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

Name of Employer Wawa, Inc. Occupation CEO

Receipt For: 2009  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 08 / 2009

**Transaction ID:** SA11AI.14786

Amount of Each Receipt this Period  
100.00

Payroll Withholding

**C.**

Full Name (Last, First, Middle Initial)  
Howard Stoeckel

Mailing Address 260 West Baltimore Pike

City State Zip Code  
Wawa PA 19063

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

Name of Employer Wawa, Inc. Occupation CEO

Receipt For: 2009  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 11 / 2009

**Transaction ID:** SA11AI.14859

Amount of Each Receipt this Period  
100.00

Payroll Withholding

**SUBTOTAL** of Receipts This Page (optional) ..... ► **300.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 19  
(check only one)

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

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)  
Wawa, Inc. Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Howard Stoeckel

Mailing Address 260 West Baltimore Pike

City State Zip Code  
Wawa PA 19063

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

Name of Employer Occupation  
Wawa, Inc. CEO

Receipt For: 2009  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
MM / DD / YYYY  
06 / 09 / 2009

Transaction ID: SA11AI.14932

Amount of Each Receipt this Period  
100.00

Payroll Withholding

**B.**

Full Name (Last, First, Middle Initial)  
Richard Wood, Jr.

Mailing Address 260 West Baltimore Pike

City State Zip Code  
Wawa PA 19063

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

Name of Employer Occupation  
Wawa, Inc. Non- Executive Chairman of the Board

Receipt For: 2009  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
MM / DD / YYYY  
02 / 09 / 2009

Transaction ID: SA11AI.14651

Amount of Each Receipt this Period  
200.00

Payroll Withholding

**C.**

Full Name (Last, First, Middle Initial)  
Richard Wood, Jr.

Mailing Address 260 West Baltimore Pike

City State Zip Code  
Wawa PA 19063

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

Name of Employer Occupation  
Wawa, Inc. Non- Executive Chairman of the Board

Receipt For: 2009  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
MM / DD / YYYY  
03 / 06 / 2009

Transaction ID: SA11AI.14724

Amount of Each Receipt this Period  
200.00

Payroll Withholding

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **500.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 19
	<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)  
Wawa, Inc. Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Richard Wood, Jr.	Date of Receipt MM / DD / YYYY 04 / 08 / 2009
	Mailing Address 260 West Baltimore Pike	<b>Transaction ID:</b> SA11AI.14797
	City State Zip Code Wawa PA 19063	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	Payroll Withholding
	Name of Employer Occupation Wawa, Inc. Non- Executive Chairman of the Board	
Receipt For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Richard Wood, Jr.	Date of Receipt MM / DD / YYYY 05 / 11 / 2009
	Mailing Address 260 West Baltimore Pike	<b>Transaction ID:</b> SA11AI.14870
	City State Zip Code Wawa PA 19063	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	Payroll Withholding
	Name of Employer Occupation Wawa, Inc. Non- Executive Chairman of the Board	
Receipt For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Richard Wood	Date of Receipt MM / DD / YYYY 06 / 09 / 2009
	Mailing Address 260 West Baltimore Pike	<b>Transaction ID:</b> SA11AI.14942
	City State Zip Code Wawa PA 19063	Amount of Each Receipt this Period 30.80
	FEC ID number of contributing federal political committee. C	Payroll Withholding
	Name of Employer Occupation Wawa, Inc. Brand Development Manager	
Receipt For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.20	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	430.80
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

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)  
Wawa, Inc. Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Richard Wood, Jr.		Date of Receipt
	Mailing Address 260 West Baltimore Pike		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 09 / 2009
	City	State	Zip Code
	Wawa	PA	19063
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.14943
	C		Amount of Each Receipt this Period
Name of Employer Wawa, Inc.		Occupation	Payroll Withholding
Non- Executive Chairman of the Board		200.00	
Receipt For: 2009			
<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General	Aggregate Year-to-Date ▼	1200.00
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	200.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	1926.56



**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 / 19

<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)  
Wawa, Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)  
ROB WITTMAN FOR CONGRESS

Transaction ID: SB23.15020

Date of Disbursement

Mailing Address PO BOX 999

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	5		2	0	0	9

City MONTROSS State VA Zip Code 22520

Amount of Each Disbursement this Period

500.00
--------

Purpose of Disbursement  
Contribution

--

Candidate Name  
ROB WITTMAN FOR CONGRESS

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2009  
 Primary  General  
 Other (specify) ▼

State: VA District: 01

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

500.00
--------

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

500.00
--------

**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 15 / 19

<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)  
Wawa, Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) Bolling for Lt. Governor	Transaction ID: SB29.14987 Date of Disbursement
	Mailing Address P.O. Box 8205	<input type="text" value="06"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City Richmond State VA Zip Code 23226	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="500.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Dominion Leadership Trust	Transaction ID: SB29.15012 Date of Disbursement
	Mailing Address P.O. Box 8296	<input type="text" value="06"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City Fredericksburg State VA Zip Code 22404	Amount of Each Disbursement this Period
	Purpose of Disbursement 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: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Friends of Brian O'Neill	Transaction ID: SB29.15015 Date of Disbursement
	Mailing Address 15209 Bernita Drive	<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City Philadelphia State PA Zip Code 19116	Amount of Each Disbursement this Period
	Purpose of Disbursement Fundraiser	<input type="text" value="500.00"/>
	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) .....	<input type="text" value="2000.00"/>
<b>TOTAL</b> 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 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)  
Wawa, Inc. Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Friends of Manoli Loupassi <hr/> Mailing Address P.O. Box 17384 <hr/> City Richmond State VA Zip Code 23226 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.14977 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 5 / 2 0 0 9
	Amount of Each Disbursement this Period 500.00
	Category/ Type
	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Friends of Peter Franchot <hr/> Mailing Address P.O. Box 7428 <hr/> City Silver Springs State MD Zip Code 20907 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.14957 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 9 / 2 0 0 9
	Amount of Each Disbursement this Period 500.00
	Category/ Type
	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Friends of Robert Wonderling <hr/> Mailing Address 375 Morris Road P.O. Box 1479 <hr/> City Lansdale State PA Zip Code 19446-0773 <hr/> Purpose of Disbursement Fundraiser Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.15016 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 7 / 2 0 0 9
	Amount of Each Disbursement this Period 500.00
	Category/ Type
	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

1500.00

**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 / 19

<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)  
Wawa, Inc. Political Action Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Hamilton for Delegate</p> <p>Mailing Address P.O. Box 1585</p> <p>City Newport News State VA Zip Code 23601</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p><b>Transaction ID:</b> SB29.14978 <b>Date of Disbursement</b> 06 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Limerick Twp Republican Committee</p> <p>Mailing Address 110 Presidential Drive</p> <p>City Limerick State PA Zip Code 19468</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p><b>Transaction ID:</b> SB29.14959 <b>Date of Disbursement</b> 01 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) McDonnell for Governor</p> <p>Mailing Address 2819 North Parham Road Suite 210</p> <p>City Richmond State VA Zip Code 23294</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p><b>Transaction ID:</b> SB29.14991 <b>Date of Disbursement</b> 06 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 5000.00</p>

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

6000.00

**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 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)  
Wawa, Inc. Political Action Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) McDougal for Senate</p> <p>Mailing Address P.O. Box 187</p> <p>City Merchanicville State VA Zip Code 23111</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB29.14975</p> <p>Date of Disbursement</p> <p><input type="text" value="06"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="500.00"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Nixon For Delegate</p> <p>Mailing Address P.O. Box 1386</p> <p>City Richmond State VA Zip Code 23234</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB29.15014</p> <p>Date of Disbursement</p> <p><input type="text" value="06"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="500.00"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Pogge for Delegate</p> <p>Mailing Address P.O. Box 1386</p> <p>City Yorktown State VA Zip Code 23692</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB29.14972</p> <p>Date of Disbursement</p> <p><input type="text" value="06"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="500.00"/></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="1500.00"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

**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 19 / 19

<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)  
Wawa, Inc. Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Republican Committee of Chester County

Mailing Address 15 South Church Street

City State Zip Code  
West Chester PA 19382

Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2009  Primary  General  Other (specify) ▼

State: District:

**Transaction ID:** SB29.14985  
Date of Disbursement

/  /

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
Steve Shannon for Attorney General

Mailing Address 10505 Judicial Dr.  
Suite 100

City State Zip Code  
Fairfax VA 22030

Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2009  Primary  General  Other (specify) ▼

State: District:

**Transaction ID:** SB29.14960  
Date of Disbursement

/  /

Amount of Each Disbursement this Period

**C.** Full Name (Last, First, Middle Initial)  
Tom Corbett for Governor

Mailing Address P.O. Box 2101

City State Zip Code  
Jenkintown PA 19046

Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2009  Primary  General  Other (specify) ▼

State: District:

**Transaction ID:** SB29.15007  
Date of Disbursement

/  /

Amount of Each Disbursement this Period

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

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