

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED FEDERAL OPERATIONS CENTER

2004 OCT 19 A 10:47

Office Use Only

1. NAME OF COMMITTEE (In full) TYPE OR PRINT Example: If typing, type over the lines. Fulton Financial Corporation PAC

ADDRESS (number and street) One Penn Square P.O. Box 4887 Lancaster PA 17604 4887

2. FEC IDENTIFICATION NUMBER C 00400317 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) 15-Day PRE-Election Report for the: Primary, General, Runoff, Conviction, Special. (d) 30-Day POST-Election Report for the: General, Runoff, Special.

5. Covering Period 10/01/2004 through 10/13/2004

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer: Michael J. DePorter Signature of Treasurer: [Signature] Date: 10/18/2004

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. Office Use Only FEC FORM 3X (Rev. 02/2003)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev 02/2003)

Page 2

Name or Type Committee Name

Fulton Financial Corporation PAC

Report Covering the Period:

From:

10 01 2004

To:

10 13 2004

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2004	0.00	0.00
(b) Cash on Hand at Beginning of Reporting Period	9,955.19	
(c) Total Receipts (from Line 19)	185.04	12,215.23
(d) Subtotal (add Lines 6(b) and (c) for Column A and Lines 6(a) and (c) for Column B)	10,140.23	12,215.23
7 Total Disbursements (from Line 31)	0.00	2,075.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	10,140.23	10,140.23
9. Debts and Obligations Owed TO the Committee (itemize as on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (itemize as 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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 8X (Rev. 02/2003)

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Write or Type Committee Name

Fulton Financial Corporation PAC

Report Covering the Period: From: 10 01 2004 To: 10 13 2004

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	3,275.00
(ii) Unitemized.....	185.04	8,940.23
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....	185.04	12,030.19
(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 30, page 5).....	185.04	12,215.23
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 H5).....	0.00	0.00
(b) Levin Funds (from Schedule H5).....	0.00	0.00
(c) Total Transfers (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)).....	185.04	12,215.23
20. Total Federal Receipts (subtract Line 18(c) from line 19).....	185.04	12,215.23

**DETAILED SUMMARY PAGE
of Disbursements**

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II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedules 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	0.00	2,075.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441b(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	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(2))		
(a) Allocated 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))	0.00	2,075.00
32. Total Federal Disbursements (subtract Line 21(c) and Line 30(c) from Line 31)	0.00	2,075.00

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	185.04	12,215.23
34. Total Contribution Refunds (from Line 25(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	185.04	12,215.23
36. Total Federal Operating Expenditures (add Line 21(a)(5) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 16, page 8)	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) for each category of the Detailed Substantive Page		FOR LINE NUMBER: (check only one)		PAGE 1 OF 4	
<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"/>		<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<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)
Fulton Financial Corporation PAC

Full Name (Last, First, Middle Initial)
A. Wenger, E. Philip

Mailing Address
6 Whitetail Way

City **Reequea** State **PA** Zip Code **17565**

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

Name of Employer **Fulton Bank** Occupation **Banker - President**

Receipt For:
 Primary General
 Other (specify) **▼**

Aggregate Year-to-Date **250.00**

Date of Receipt **07 / 07 / 2004**

Amount of Each Receipt this Period **250.00**

Full Name (Last, First, Middle Initial)
B. Nau, Gerald A.

Mailing Address
12 Hidden Pond Drive

City **Reading** State **PA** Zip Code **19607**

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

Name of Employer **Fulton Bank** Occupation **Division President**

Receipt For:
 Primary General
 Other (specify) **▼**

Aggregate Year-to-Date **250.00**

Date of Receipt **07 / 14 / 2004**

Amount of Each Receipt this Period **250.00**

Full Name (Last, First, Middle Initial)
G. Jones, Robert S.

Mailing Address
1725 Cushing Greene

City **Camp Hill** State **PA** Zip Code **17011**

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

Name of Employer **Fulton Bank** Occupation **Division President**

Receipt For:
 Primary General
 Other (specify) **▼**

Aggregate Year-to-Date **300.00**

Date of Receipt **07 / 14 / 2004**

Amount of Each Receipt this Period **300.00**

SUBTOTAL of Receipts This Page (optional) **800.00**

TOTAL This Period (last page this line number only) **800.00**

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedules
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 2 OF 4

(check only one)

 11a
 11b
 11c
 12
 13
 14
 15
 16
 17

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NAME OF COMMITTEE (in Full)

Fulton Financial Corporation PAC

Full Name (Last, First, Middle Initial) A. Bowman, Donald M.		Date of Receipt <input type="text" value="07"/> <input type="text" value="23"/> <input type="text" value="2004"/>	
Mailing Address 10702 Hopewell Road		Amount of Each Receipt this Period <input type="text" value="250.00"/>	
City Williamsport	State MD	Zip Code 21795	
FEC ID number of contributing federal political committee <input type="text" value="C"/>			
Name of Employer Fulton Financial Corporation		Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) B. Roda, Craig A.		Date of Receipt <input type="text" value="07"/> <input type="text" value="06"/> <input type="text" value="2004"/>	
Mailing Address 842 Indian Springs Drive		Amount of Each Receipt this Period <input type="text" value="250.00"/>	
City Lancaster	State PA	Zip Code 17601	
FEC ID number of contributing federal political committee <input type="text" value="C"/>			
Name of Employer Fulton Mortgage Company		Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) C. Kays, Ann E.		Date of Receipt <input type="text" value="07"/> <input type="text" value="13"/> <input type="text" value="2004"/>	
Mailing Address 1055 Skyview Drive		Amount of Each Receipt this Period <input type="text" value="275.00"/>	
City Milton	State PA	Zip Code 17847	
FEC ID number of contributing federal political committee <input type="text" value="C"/>			
Name of Employer Swinford National Bank		Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="275.00"/>	

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 3 OF 4
(check only one)

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

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NAME OF COMMITTEE (In Full)
Fulton Financial Corporation PAC

A. Full Name (Last, First, Middle Initial)
Scada, Clark S.

Mailing Address
1204 Bucks Road

City State Zip Code
Pekesie PA 18944

FEC ID number of contributing federal political committee
C

Name of Employer Occupation
Premier Bank Chairman of Board

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) 500.00

Date of Receipt

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
Leshar, Jr., Donald W.

Mailing Address
717 South 12th Street

City State Zip Code
Lebanon PA 17042

FEC ID number of contributing federal political committee
C

Name of Employer Occupation
Leaher Neck Sales & Service Treasurer

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) 300.00

Date of Receipt

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
Hess, J. Robert

Mailing Address
P.O. Box 5009

City State Zip Code
Lancaster PA 17606-5009

FEC ID number of contributing federal political committee
C

Name of Employer Occupation
Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) 250.00

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) 0.00

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 4 OF 4
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (in full)

Fulton Financial Corporation PAC

Full Name (Last, First, Middle Initial)

A. Smith, Jr., R. Scott

Mailing Address

1346 Silver Spring Road

City

Holtwood

State

PA

Zip Code

17532

FEC ID number of contributing federal political committee.

C

Name of Employer

Fulton Financial Corporation

Occupation

President & COO

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

Amount of Each Receipt This Period

Full Name (Last, First, Middle Initial)

B. Fulton, Jr., Rufus A.

Mailing Address

700 Buttonwood Farm Road

City

Millersville

State

PA

Zip Code

17551

FEC ID number of contributing federal political committee.

C

Name of Employer

Fulton Financial Corporation

Occupation

Chairman & CEO

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

Amount of Each Receipt This Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

0.00

TOTAL This Period (last page lists line number only).....

1,575.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER (check only one)						PAGE 1 OF 2
	<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)
Fulton Financial Corporation PAC
Full Name (Last, First, Middle Initial)

A. Friends of Senator Brightbill

Date of Disbursement: 08 05 2004

Mailing Address: 400 South 8th Street

City: Lebanon State: PA Zip Code: 17066

Purpose of Disbursement: Contribution

Candidate Name: _____

Amount of Each Disbursement this Period: 500.00

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: _____ District: _____

B. Armstrong for Senate

Date of Disbursement: 08 18 2004

Mailing Address: P.O. Box 43

City: Refton State: PA Zip Code: 17568

Purpose of Disbursement: Contribution

Candidate Name: _____

Amount of Each Disbursement this Period: 275.00

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: _____ District: _____

C. Warren County Republican Committee

Date of Disbursement: 09 14 2004

Mailing Address: P.O. Box 446

City: Belvidere State: NJ Zip Code: 07823

Purpose of Disbursement: Contribution

Candidate Name: _____

Amount of Each Disbursement this Period: 200.00

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: _____ District: _____

SUBTOTAL of Disbursements This Page (optional): 975.00

TOTAL This Period (last page has line number only): 975.00

**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 2 OF 2	
	<input type="checkbox"/> 21a	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27	
	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30	<input type="checkbox"/> 30b	

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NAME OF COMMITTEE (In Full)
Fulton Financial Corporation PAC

Full Name (Last, First, Middle Initial)
A. Montgomery County Republican Committee

Date of Disbursement
09 / 27 / 2004

Mailing Address
619 DeKalb Street

City: **Norristown** State: **PA** Zip Code: **19401**

Purpose of Disbursement
Contribution

Candidate Name

Amount of Each Disbursement This Period
600.00

Category/Type

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

State: _____ District: _____

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

Date of Disbursement

Mailing Address

City: _____ State: _____ Zip Code: _____

Purpose of Disbursement

Candidate Name

Amount of Each Disbursement This Period

Category/Type

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

State: _____ District: _____

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

Date of Disbursement

Mailing Address

City: _____ State: _____ Zip Code: _____

Purpose of Disbursement

Candidate Name

Amount of Each Disbursement This Period

Category/Type

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

State: _____ District: _____

SUBTOTAL of Disbursements This Page (optional) **600.00**

TOTAL This Period (last page this line number only) **1,575.00**

SCHEDULE C (FEC Form 3X)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	FOR LINE 13 OF FORM 3X	

NAME OF COMMITTEE (in Full) Fulton Financial Corporation PAC		
LOAN SOURCE Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code		Electronic <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
TERMS		
Date Issued	Date Due	Interest Rate
<input type="text"/>	<input type="text"/>	<input type="text"/> % (apr)
Secured: <input type="checkbox"/> Yes <input type="checkbox"/> No		
List All Employers or Guarantors (if any) to Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City	State	ZIP Code
		Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City	State	ZIP Code
		Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City	State	ZIP Code
		Amount Guaranteed Outstanding: <input type="text"/>
4. 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)		<input type="text"/>
TOTALS This Period (last page in this line only)		<input type="text" value="0.00"/>
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.		

**SCHEDULE D (FEC Form 3X)
DEBTS AND OBLIGATIONS
Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE	OF
	FOR LINE NUMBER: (check only one)	<input type="checkbox"/> 9

NAME OF COMMITTEE (in full)
Fulton Financial Corporation PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City	State	
Outstanding Balance Beginning This Period		Outstanding Balance at Close of This Period
Amount Incurred This Period	Payment This Period	
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City	State	
Outstanding Balance Beginning This Period		Outstanding Balance at Close of This Period
Amount Incurred This Period	Payment This Period	
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City	State	
Outstanding Balance Beginning This Period		Outstanding Balance at Close of This Period
Amount Incurred This Period	Payment This Period	

1) SUBTOTALS This Period This Page (optional)	
2) TOTALS This Period (see page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	0.00

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Fulton Financial Corporation PAC	FEC IDENTIFICATION NUMBER C
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle Initial) of Payee _____ Mailing Address _____ City _____ State _____ Zip Code _____	Date _____ Amount _____
--	----------------------------------

Purpose of Expenditure _____ Category/Type _____	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____ Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: _____		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee _____ Mailing Address _____ City _____ State _____ Zip Code _____	Date _____ Amount _____
--	----------------------------------

Purpose of Expenditure _____ Category/Type _____	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____ Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: _____		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures	_____
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____ 0.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party (committee) any political party committee or its agent.

Date / /

Signature _____

SCHEDULE F (FEC Form 3X)

**ITEMIZED COORDINATED PARTY EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE OF
FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (in Full) Fulton Financial Corporation PAC	Check if 24-hour notice
--	----------------------------

Have your committee been designated to make coordinated expenditures by a political party committee? <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, name the designating committee	POC Name of Subordinate Committee Mailing Address City State ZIP Code
--	---

Full Name (Last, First, Middle Initial) of Each Payee Mailing Address City State Zip Code Name of Federal Candidate Supported Office Sought: House Senate Presidential State: District:	Purpose of Expenditure Date Amount <input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C. §441a(4)(4)(A)-1)
Aggregate General Election Expenditure for this Candidate	Category/Type

Full Name (Last, First, Middle Initial) of Each Payee Mailing Address City State Zip Code Name of Federal Candidate Supported Office Sought: House Senate Presidential State: District:	Purpose of Expenditure Date Amount <input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C. §441a(4)(4)(A)-1)
Aggregate General Election Expenditure for this Candidate	Category/Type

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SUBTOTAL of Expenditures this Page (optional)	0.00
TOTAL this Period (last page this line number only)	0.00

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

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

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>DHL</i>	Shipping Date <i>10-19-04</i>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
<i>JMP</i> PREPARER	<i>10-19-04</i> DATE PREPARED