PAGE 1 / 16

Image# 201606209018466025

FEC FORM 3Y

REPORT OF RECEIPTS AND DISBURSEMENTS

TORIWI 3X	For Other Than An Au	thorized Committee	Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, over the lines.	type 12FE4M5
College of American F	Pathologists Political	Action Committee	
ADDRESS (number and street)	1350 I Street, NW Suite 590		
Check if different than previously reported. (ACC)	Washington		DC 20005 -
2. FEC IDENTIFICATION N	UMBER ▼ CI	TY▲	STATE ▲ ZIP CODE ▲
C C00274944	-	IS THIS REPORT X (N)	OR AMENDED (A)
4. TYPE OF REPORT (Choose One)	Report Due On:		y 20 (M5) Aug 20 (M8) Nov 20 (M11 (Non-Election Year Only) 1 20 (M6) Sep 20 (M9) Dec 20 (M12 (Non-Election
(a) Quarterly Reports:			20 (M7) Oct 20 (M10) Jan 31 (YE)
April 15 Quarterly Report (Q1) (c) 12-Day	Primary (12P)	General (12G) Runoff (12R)
July 15 Quarterly Report (October 15	Q2) PRE-Election Report for the:	Convention (120	C) Special (12S)
Quarterly Report (January 31	El. al	on on	in the State of
Year-End Report (July 31 Mid-Year Report (Non-electi Year Only) (MY)	(d) 30-Day	General (30G)	Runoff (30R) Special (30S)
Termination Repor (TER)		on on	in the State of
5. Covering Period 0	5 01 / 2016	through	05 31 2016
I certify that I have examined t	his Report and to the best o	f my knowledge and bel	ief it is true, correct and complete.
Type or Print Name of Treasure	er John Michael Misialek Dr.		
Signature of Treasurer John	n Michael Misialek Dr.	[Electronically F	iled] Date 06 20 / 2016
NOTE: Submission of false, error	neous, or incomplete information	on 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

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

College of American Pathologists Political Action Committee

Report Covering the Period: From: 05 01 2016 To: 05 31 2016

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2016		486810.44
	(b) Cash on Hand at Beginning of Reporting Period	558433.34	
	(c) Total Receipts (from Line 19)	11006.00	143471.00
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	569439.34	630281.44
7.	Total Disbursements (from Line 31)	31600.90	92443.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	537838.44	537838.44
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	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 3X (Rev. 06/2004)

Write or Type Committee Name

College of American Pathologists Political Action Committee

I. Receipts		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date	
(a) Ind	outions (other than loans) From: dividuals/Persons Other nan Political Committees			
	Itemized (use Schedule A)	9800.00	126250.00	
, ,	Unitemized) TOTAL (add	1206.00	17221.00	
(111	Lines 11(a)(i) and (ii)	11006.00	143471.00	
	olitical Party Committeesher Political Committees	0.00	0.00	
(sı	uch as PACs)tal Contributions (add Lines	0.00	0.00	
11	(a)(iii), (b), and (c)) (Carry tals to Line 33, page 5)	11006.00	143471.00	
	ers From Affiliated/Other Committees	0.00	0.00	
13. All Loa	ns Received	0.00	0.00	
15. Offsets	Repayments Received To Operating Expenditures	0.00	0.00	
(Carry	ds, Rebates, etc.) Totals to Line 37, page 5) Is of Contributions Made	0.00	0.00	
Politica	eral Candidates and Other	0.00	0.00	
(Divide	Federal Receipts nds, Interest, etc.) ers from Non-Federal and Levin Funds	0.00	0.00	
, ,	n-Federal Account om Schedule H3)	0.00	0.00	
(b) Lev	rin Funds (from Schedule H5)	0.00	0.00	
(c) Tota	al Transfers (add 18(a) and 18(b))	0.00	0.00	
	deceipts (add Lines 11(d), 14, 15, 16, 17, and 18(c))▶	11006.00	143471.00	
	ederal Receipts ct Line 18(c) from Line 19)▶	11006.00	143471.00	

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date	
	Operating Expenditures: (a) Allocated 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	100.90	543.00	
	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	100.90	543.00	
22.	Transfers to Affiliated/Other Party	188.00		
	Committees	0.00	0.00	
	Contributions to Federal Candidates/Committees and Other Political Committees	31500.00	91400.00	
	Independent Expenditures	0.00	0.00	
25. ((use Schedule E) Coordinated Party Expenditures	0.00	0.00	
	(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	
	Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	0.00	500.00	
	man i olitical committees			
	(b) Political Party Committees	0.00	0.00	
	(c) Other Political Committees (such as PACs)	0.00	0.00	
	(d) Total Contribution Refunds			
	(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))▶	0.00	500.00	
20.	Other Disbursements	0.00	0.00	
29.	Other Dispursements	0.00	0.00	
	Federal Election Activity (2 U.S.C. §431(20))			
	(a) Allocated Federal Election Activity(from Schedule H6)			
	(i) Federal Share	0.00	0.00	
	(2)	0.00	0.00	
	(ii) "Levin" Share(b) Federal Election Activity Paid Entirely	0.00	0.00	
,	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	
	Total Disbursements (add Lines 21(c), 22,		00410.00	
i	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	31600.90	92443.00	
32. ·	Total Federal Disbursements			
	(subtract Line 21(a)(ii) and Line 30(a)(ii)	24222.22		
1	from Line 31)	31600.90	92443.00	

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	11006.00	143471.00
4. Total Contribution Refunds (from Line 28(d))	0.00	500.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	11006.00	142971.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	100.90	543.00
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	100.90	543.00

FOR LINE NUMBER: **PAGE** 6 OF 16 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

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) College of American Pathologists Political Action Committee Full Name (Last, First, Middle Initial) Dr. C. Robert Baisden MD Date of Receipt Mailing Address 3227 Ramsgate Rd 2016 City Zip Code State Transaction ID: SA11AI.54096 GA Augusta 30909-3215 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Memo Item Name of Employer Occupation Georgia Regents University Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Stephen N Bauer MD Date of Receipt Mailing Address Path Dept 6501 Coyle Ave 05 12 2016 City State Zip Code Transaction ID: SA11AI.54118 CA Carmichael 95608-0306 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Memo Item Name of Employer Occupation Mercy San Juan Med Ctr Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1000.00 Full Name (Last, First, Middle Initial) c. Dr. Brent D Benjamin MD Date of Receipt Mailing Address Dept of Path 400 S 43rd St 05 04 2016 City Zip Code State Transaction ID: SA11AI.54087 WA Renton 98055-5714 Amount of Each Receipt this Period FEC ID number of contributing С 250.00 federal political committee. Memo Item Name of Employer Occupation Valley Med Ctr Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1750.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: **PAGE** 7 OF 16 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

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) College of American Pathologists Political Action Committee Full Name (Last, First, Middle Initial) Dr. Mary Elizabeth Fowkes MD,PhD Date of Receipt Mailing Address 28 Elm Road 2016 City Zip Code State Transaction ID: SA11AI.54097 NY Katonah 10536 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Memo Item Name of Employer Occupation Mt Sinai Schl of Med Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. S. Robert Freedman MD Date of Receipt Mailing Address 604 Everett Avenue 05 12 2016 City State Zip Code Transaction ID: SA11AI.54117 CA Palo Alto 94301 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Memo Item Name of Employer Occupation Regional Med Ctr Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1000.00 Full Name (Last, First, Middle Initial) c. Dr. Alan F Frigy MD Date of Receipt Mailing Address Dept of Path 1800 E Lake Shore Dr 05 12 2016 City State Zip Code Transaction ID: SA11AI.54106 IL Decatur 62521-3810 Amount of Each Receipt this Period FEC ID number of contributing С 1000.00 federal political committee. Memo Item Name of Employer Occupation St Mary's Hospital Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 2500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: **PAGE** 8 OF 16 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

ITEMIZED RECEIPTS 13 14 15 16 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) College of American Pathologists Political Action Committee Full Name (Last, First, Middle Initial) Dr. David L. Gang MD Date of Receipt Mailing Address Dept of Path 759 Chestnut St 2016 City Zip Code State Transaction ID: SA11AI.54107 Springfield MA 01199-1001 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer Occupation Baystate Med Ctr Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Richard R. Gomez MD Date of Receipt Mailing Address Laboratory 1700 SW 7th St 05 10 2016 City State Zip Code Transaction ID: SA11AI.54100 KS Topeka 66606-2489 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Memo Item Name of Employer Occupation St Francis HIth Ctr Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 500,00 Full Name (Last, First, Middle Initial) c. Dr. Peter Anthony Herreid MD Date of Receipt Mailing Address PO Box 3405 05 12 2016 City Zip Code State Transaction ID: SA11AI.54115 WA Spokane 99220 Amount of Each Receipt this Period FEC ID number of contributing С 350.00 federal political committee. Memo Item Name of Employer Occupation Incyte Pathology-Bellevue Branch Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) 950.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: **PAGE** 9 OF 16 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

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) College of American Pathologists Political Action Committee Full Name (Last, First, Middle Initial) Dr. Kathryn Teresa Knight MD Date of Receipt Mailing Address 326 Haddon Ct 2016 City Zip Code State Transaction ID: SA11AI.54110 TN Franklin 37067 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Memo Item Name of Employer Occupation Unaffiliated Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Mathew J Putzi MD Date of Receipt Mailing Address 1301 W 38th St Ste 200 05 12 2016 City State Zip Code Transaction ID: SA11AI.54113 TX Austin 78705-1011 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Memo Item Name of Employer Occupation Seton Healthcare Family Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 500,00 Full Name (Last, First, Middle Initial) c. Dr. James Joseph Schnabel MD, PhD Date of Receipt Mailing Address Path Dept 05 04 2016 3300 NW Expressway 2nd Fl City Zip Code State Transaction ID: SA11AI.54088 OK Oklahoma City 73112-4999 Amount of Each Receipt this Period FEC ID number of contributing С 300.00 federal political committee. Memo Item Name of Employer Occupation Integris Baptist Medical Center Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 1800.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 10 OF 16 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

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) College of American Pathologists Political Action Committee Full Name (Last, First, Middle Initial) Dr. Caroline Leilani Valdes MD Date of Receipt Mailing Address 608 W Commercial St 04 2016 City Zip Code State Transaction ID: SA11AI.54086 77901-6302 Victoria TX Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Memo Item Name of Employer Occupation Regional Medical Laboratory Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Ronald L. Weiss MD, MBA Date of Receipt Mailing Address Dept of Path 500 Chipeta Way 05 10 2016 City State Zip Code Transaction ID: SA11AI.54101 UT Salt Lake City 84108-1221 Amount of Each Receipt this Period FEC ID number of contributing 1500.00 federal political committee. Memo Item Name of Employer Occupation **ARUP Laboratories Inc** Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1500.00 Full Name (Last, First, Middle Initial) c. Dr. Robert Brian Wells Sr MD Date of Receipt Mailing Address Dept of Path 05 04 2016 1726 S Beckham Ave City Zip Code State Transaction ID: SA11AI.54090 Tyler TX 75701-4465 Amount of Each Receipt this Period FEC ID number of contributing С 300.00 federal political committee. Memo Item Name of Employer Occupation Pathology Associates of Tyler Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 2300.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 11 OF 16 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 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) College of American Pathologists Political Action Committee Full Name (Last, First, Middle Initial) Dr. Eva M Wojcik MD Date of Receipt Mailing Address Bldg 103 Rm 0177 2160 S 1st Ave 2016 City State Zip Code Transaction ID: SA11AI.54109 Maywood IL 60153-3328 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Memo Item Name of Employer Occupation Loyola University Medical Center Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) В. Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 500.00 SUBTOTAL of Receipts This Page (optional)..... 9800.00 TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 12 OF 16	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one) 22 23 24 25 26 28a 28b 28c 29 30l
Any information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) College of American Pathologists P			Solicit contributions from Such committee.
Full Name (Last, First, Middle Initial) Sun Trust Bank			Date of Disbursement
Mailing Address P.O. Box 85024			05 03 2016
Richmond	tate Zip Code VA 23285		Transaction ID : SB21B.54072
Purpose of Disbursement Suntrust Moneris ACH Fee Candidate Name			Amount of Each Disbursement this Period
Office Sought: House Disbursem	pont For:	Category/ Type	41.90
Senate President	Primary General Other (specify)		Memo Item
State: District: Full Name (Last, First, Middle Initial) Sun Trust Bank Mailing Address P.O. Box 85024			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Richmond	State Zip Code VA 23285		Transaction ID : SB21B.54073
Purpose of Disbursement Suntrust Account Analysis Bank Fee			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	59.00
	nent For: Primary General Other (specify)		Memo Item
Full Name (Last, First, Middle Initial)			Date of Disbursement
Mailing Address			M = M / D = D / Y = Y = Y
City	state Zip Code		
Purpose of Disbursement			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	
	nent For: Primary General Other (specify) ▼		Memo Item
SUBTOTAL of Disbursements This Page (optional)			100.90
TOTAL This Period (last page this line number only).			100.90

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 13 OF 16		
TEMIZED DISBURSEMENTS		(check only one)		
	for each category of the Detailed Summary Page	21b 22	X 23 24 25 26	
		27 28a	28b 28c 29 30b	
Any information copied from such Reports and Staten	nents may not be sold or used	by any person for the	purpose of soliciting contributions	
or for commercial purposes, other than using the name	e and address of any political	committee to solicit c	ontributions from such committee.	
NAME OF COMMITTEE (In Full)				
College of American Pathologists F	Political Action Comm	ittee		
Full Name (Last, First, Middle Initial)				
A. BADGERPAC		Date	of Disbursement	
Mailing Address P.O. BOX 70980		05	12 2016	
City	State Zip Code	_		
WASHINGTON	DC 20024	Irar	saction ID: SB23.54080	
Purpose of Disbursement				
		Amou	nt of Each Disbursement this Period	
Candidate Name	7.	Category/	5000.00	
Office Cought: House	ant Fore Code	Туре	7.3333	
	nent For: 2016	M	emo Item	
	Primary General Other (specify) ▼			
State: District:	Other (specify) • Other			
Full Name (Last, First, Middle Initial)				
BLUMENAUER FOR CONGRESS		Date	of Disbursement	
DEGINERA (OER FOR CONTORIEGO		M	M / D D / Y Y Y Y	
Mailing Address 232 NE 9TH AVE.		05		
City	State Zip Code	Tran	nsaction ID : SB23.54074	
Portland	OR 97232			
Purpose of Disbursement		Amou	nt of Each Disbursement this Period	
Candidate Name	[.		int of Each Disbursement this Feriod	
Canada Name		Category/ Type	1000.00	
Office Sought: Y House Disbursen	nent For: 2016		emo Item	
	Primary General			
President	Other (specify) ▼			
State: OR District: 03				
Full Name (Last, First, Middle Initial)				
Democratic Congressional Campai	gn Committee	Date	of Disbursement	
Mailing Address 100 0 11 0 11 10 10 0		M = 05		
Mailing Address 430 South Capital Street, SE 2nd Floor		05	09 2016	
	State Zip Code			
	DC 20003	Trar	saction ID : SB23.54075	
Purpose of Disbursement				
		Amou	nt of Each Disbursement this Period	
Candidate Name		Category/	7500.00	
Office Squaht: House Dishurs	pont For: 0040	Туре	7300.00	
Office Sought: House Disbursen Senate	nent For: 2016 Primary General	M	emo Item	
	Other (specify)			
State: District:	(OPOOII)/ V			
	Other			
	Other			
SUBTOTAL of Disbursements This Page (optional)			13500.00	

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 14 OF 16	
ITEMIZED DISBURSEMENTS	ZED DISBURSEMENTS Use separate schedule(s) (check only one)		one)
	Detailed Summary Page	21b 27	22 X 23 24 25 26
And to form of the country of the co			28a 28b 28c 29 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)			
College of American Pathologists F	Political Action Com	mittee	
	Ontrodit / totion Com		
Full Name (Last, First, Middle Initial)			D
A. GUTHRIE FOR CONGRESS			Date of Disbursement
Mailing Address P.O. Box 9639			05 09 2016
			20 00 2010
City	State Zip Code		Transaction ID : SB23.54076
Bowling Green	KY 42102		11ansaction ID . 3B23.34076
Purpose of Disbursement Split Check			Amount of Each Disbursement this Period
Candidate Name			Amount of Each disbursement this Period
23		Category/ Type	2000.00
Office Sought:	nent For: 2016	.,,,,,	Memo Item
Senate	Primary General		
	Other (specify) ▼		
State: KY District: 02			
Full Name (Last, First, Middle Initial)			Data of Diaburgament
B. GUTHRIE FOR CONGRESS			Date of Disbursement
Mailing Address P.O. Box 9639			05 09 2016
			2010
•	State Zip Code		Transaction ID : SB23.54121
	KY 42102		
Purpose of Disbursement Split Check			Amount of Each Disbursement this Period
Candidate Name		Cotogorit	dir di Zadri Diodulodiricii tilio i cilou
		Category/ Type	500.00
Office Sought: House Disbursen	nent For: 2016		Memo Item
	Primary General		
<u>-</u>	Other (specify) ▼		
State: KY District: 02			
Full Name (Last, First, Middle Initial)			Date of Disbursement
C. MCKINLEY FOR CONGRESS			
Mailing Address PO BOX 642			05 09 2016 _
,	State Zip Code		Transaction ID : SB23.54077
MORGANTOWN Purpose of Disbursement	WV 26507		
i dipose di bisbuisement			Amount of Fook Dishurasment this Davied
Candidate Name		Catagory	Amount of Each Disbursement this Period
		Category/ Type	1000.00
Office Sought: House Disbursen	nent For: 2016		Memo Item
	Primary General		
	Other (specify) ▼		
State: WV District: 01			
OUDTOTAL of Distance of The Day of the St			3500.00
SUBTOTAL of Disbursements This Page (optional)		·····	3300.00
TOTAL This Period (last page this line number only)			
(, , , , , , , , , , , , , , , , , , ,		_	7

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 15 OF 16 (check only one)	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 30
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full) College of American Pathologists P	,		
Full Name (Last, First, Middle Initial)			Date of Dichurasment
Mailing Address 320 FIRST STREET, SE	ESSIONAL COMMI	IIEE	Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City S	tate Zip Code		
•	DC 20003		Transaction ID : SB23.54078
Purpose of Disbursement			Amount of Each Disbursement this Period
Candidate Name	"	Category/ Type	7500.00
Senate	nent For: 2016 Primary ☐ General Other (specify) ▼		Memo Item
State: District:	Other		
Full Name (Last, First, Middle Initial) B. POMPEO FOR CONGRESS INC			Date of Disbursement
Mailing Address P.O. Box 780146			05 12 2016
WICHITA	tate Zip Code KS 67212		Transaction ID : SB23.54081
Purpose of Disbursement			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	1000.00
Senate President	nent For: 2016 Primary ☐ General Other (specify) ▼		Memo Item
State: KS District: 04 Full Name (Last, First, Middle Initial)			
RAND PAUL FOR US SENATE 20	16		Date of Disbursement
Mailing Address PO BOX 72928			05 12 2016
NEWPORT	itate Zip Code KY 41072		Transaction ID : SB23.54083
Purpose of Disbursement Candidate Name			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	2500.00
X Senate	ent For: 2016 Primary General Other (specify)		Memo Item
SUBTOTAL of Disbursements This Page (optional)			11000.00
TOTAL This Period (last page this line number only).			

TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	NE NUMBER: PAGE 16 OF 16 only one) 21b 22 X 23 24 25 26 27 28a 28b 28c 29 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam NAME OF COMMITTEE (In Full) College of American Pathologists F	ents may not be sold or used by any e and address of any political committee	person for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) A. STABENOW FOR US SENATE Mailing Address P.O. BOX 4945		Date of Disbursement 05 09 2016
City S EAST LANSING Purpose of Disbursement	tate Zip Code MI 48826	Transaction ID : SB23.54079 Amount of Each Disbursement this Period
X Senate X	Category Type ent For: 2016 Primary General Other (specify)	1000.00 Memo Item
Full Name (Last, First, Middle Initial) 3. TUESDAY GROUP POLITICAL AC Mailing Address PO BOX 40385	CTION COMMITTEE	Date of Disbursement Date of Disbursement Date of Disbursement Date of Disbursement Date of Disbursement
,	tate Zip Code DC 20016	Transaction ID : SB23.54085 Amount of Each Disbursement this Period
Senate	Category Type ent For: 2016 Primary General Other (specify) Other	2500.00 Memo Item
Full Name (Last, First, Middle Initial) Mailing Address		Date of Disbursement
City	tate Zip Code	
Purpose of Disbursement Candidate Name	Category Type	Amount of Each Disbursement this Period
	ent For: Primary General Other (specify) The state of the state o	Memo Item
State. District.	cure. (openly)	
SUBTOTAL of Disbursements This Page (optional)		3500.00