12/17/2008 14:18

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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example:If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines American Psychiatric Association Political Action Committee 1000 Wilson Boulevard ADDRESS (number and street) **Suite 1825** Check if different than previously Arlington ٧A 22209 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** ZIPCODE A CITY A IS THIS NEW **AMENDED** C00373696 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Oct 20 (M10) Jul 20 (M7) Jan 31 (YE) April 15 Quarterly Report(Q1) 12-Day (c) Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election Х Runoff (30R) Special (30S) General (30G) Report for the: Termination Report (TER) in the 04 2008 VA 11 Election on State of 10 16 2008 24 2008 11 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Mr. Nicholas Meyers Type or Print Name of Treasurer Electronically Filed by Mr. Nicholas Meyers 12 17 2008 Signature of Treasurer Date 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 **FEC FORM 3X** Use (Rev. 12/2004) Only

FE6AN026

SUMMARY PAGE OF RECEIPTS AND DISRURSEMENTS

FEC Form 3X (Rev. 02/2003)

OF RECEIPTS AND DISBURSEMENTS

Page 2

Write or Type Committee Name American Psychiatric Association Political Action Committee [®] D " D 24 1.0 16 2008 1,1 2008 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 48470.06 2008 January 1 (b) Cash on Hand at 9766.55 Begining of Reporting Period 37459.00 295789.00 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 47225.55 344259.06 6(a) and 6(c) for Column B) 37154.25 334187.76 7. Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 10071.30 10071.30 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 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) Page 3

Write or Type Committee Name

American Psychiatric Association Political Action Committee

Report Covering the Period: From:	16 2008	o: 11 1 24 Y Y Y Y Y Y
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	23265.00	130901.00
(ii) Unitemized	37459.00	161388.00 292289.00
(b) Political Party Committees	0.00	0.00
11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	37459.00	292289.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
Loan Repayments Received Offsets To Operating Expenditures Output Description:	0.00	0.00
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
to Federal candidates and Other Political Committees	0.00	3500.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00

37459.00

37459.00

295789.00

295789.00

19. Total Receipts (add Lines 11(d),

20. Total Federal Receipts

12, 13, 14, 15, 16, 17, and 18(c))

(subtract Line 18(c) from Line 19)

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 4

	DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	ng Expenditures: ——ared Federal/Non-Federal		
	tivity (from Schedule H4)	0.00	0.00
(i)	Federal Share		
(ii)	Non-Federal Share	0.00	0.00
	ner Federal Operating	15654.25	96562.76
	penditurestal Operating Expenditures	13634.23	96362.76
. ,	Id 21(a)(i), (a)(ii) and (b))	15654.25	96562.76
•	rs to Affiliated/Other Party		
Commit 3. Contribu	tions to	0.00	0.00
Federal	Candidates/Committees	21500.00	233800.00
	er Political Committeesdent Expenditure	21300.00	233000.00
(use Sc	hedule E)	0.00	0.00
5. Coordin Commit	ated Expenditures Made by Party tees (2 U.S.C. 441a(d)) hedule F)	0.00	0.00
(use Sc	hedule F)	0.00	0.00
6. Loan Re	epayments Made	0.00	0.00
	Aades of Contributions To:	0.00	0.00
	Individuals/Persons Other Than Political Committees	0.00	3825.00
	arr onica committees	0.00	
` '	litical Party Committees	0.00	0.00
` '	ner Political Committees uch as PACs)	0.00	0.00
,	tal Contribution Refunds		
(ac	ld Lines 28(a), (b), and (c))	0.00	3825.00
9. Other D	isbursements	0.00	0.00
n Federal	Election Activity (2 U.S.C 431(20))		
	ared Federal Election Activity		
`	m Schedule H6)	0.00	0.00
(i)	Federal Share	0.00	0.00
(ii)	"Levin" Share	0.00	0.00
	deral Election Activity Paid Entirely	0.00	0.00
Wit	h Federal Funds	0.00	0.00
(c) Tot	al Federal Election Activity (add	0.00	0.00
Li	nes 30(a)(i), 30(a)(ii) and 30(b))		
1 Total D	isbursements (add Lines 21(c), 22,		
	25, 26, 27, 28(d), 29 and 30(c))	37154.25	334187.76
20, 24,			
2. Total F	ederal Disbursements		
	ct Line 21(a)(ii) and Line 30(a)(ii)	2=1=12=	22/127 = 2
from Li	ne 31)	37154.25	334187.76

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
33.	Total Contributions (other than loans) from Line 11(d), page 3)	37459.00	292289.00
84.	Total Contribution Refunds (from Line 28(d))	0.00	3825.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	37459.00	288464.00
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	15654.25	96562.76
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	15654.25	96562.76

FE6AN026

Any information copied from such Reports and or for commercial purposes, other than using the			X 11a 11b 11c 12 15 16 17
NAME OF COMMITTEE (In Full) American Psychiatric Association Pol	e name and add	lress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Jeffrey Akaka Mailing Address PO Box 11780 City	State	Zip Code	Date of Receipt 10 27 2008 Transaction ID: 2fd17fd0608d01802ae
Honolulu FEC ID number of contributing federal political committee.	С	96828-0780	Amount of Each Receipt this Period 250.00
Name of Employer Self-Employed Receipt For: Primary Other (specify) ▼	Occupation Physician Aggregate		
Full Name (Last, First, Middle Initial) Mary A. Albaugh Mailing Address 6155 Bridlewood Driv	e		Date of Receipt 1 1 2 1 2 0 0 8
City Fairview	State PA	Zip Code 16415-2708	Transaction ID: 9960a53cd9d41c1ab3a Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		100.00
Name of Employer Safe Harbor Behavioral He- alth Receipt For: Primary General Other (specify) ▼	Occupation Physician Aggregate		
Full Name (Last, First, Middle Initial) Edmond N. Amyot Mailing Address 211 Church Street			Date of Receipt
City	State	Zip Code	1 1 1 3 2 0 0 8 Transaction ID: 5f4868f8e674a62ba77
Saratoga Springs	NY	12866-1003	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Saratoga County Mental Hospital Receipt For: Primary General Other (specify) ▼	Occupation Physician Aggregate		
SUBTOTAL of Receipts This Page (optional) .			600.00

	E A (FEC Form 3X) RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 44 (check only one) X 11a 11b 11c 12 13 14 15 16 11
or for commercia	al purposes, other than using the	Statements ma e name and ad	y not be sold or used by any persondress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\	OMMITTEE (In Full) Psychiatric Association Pol	itical Action	Committee	
A. Eric D. Becker				Date of Receipt
	ess 2045 Westgate Drive	11 03 7 2008		
City <u>Bethlehem</u>		State PA	Zip Code 18017-7476	Transaction ID: 16053251b8a0b4908a Amount of Each Receipt this Period
FEC ID numb federal politic	per of contributing cal committee.	C		250.00
Name of Emp Self-Employe	bloyer ed	Occupatio Physicia		7
Receipt For: Primary Other (s	y General specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (La	ast, First, Middle Initial) er	Date of Receipt		
Mailing Addre	ess 9 Cedar Drive	10 20 / Y Y Y Y Y Y Y		
City		State	Zip Code	Transaction ID: 45411c95c1e63b8cf26
Great Neck		NY	11021-1954	Amount of Each Receipt this Period
FEC ID numb federal politic	per of contributing cal committee.	C		250.00
Name of Emp Self-Employe	ployer ed	Occupatio Physicia		
Receipt For:				
Primary Other (y General specify) ▼		500.00]
Full Name (La Mary E. Beegl	ast, First, Middle Initial) le			Date of Receipt
Mailing Addre	Mailing Address 1781 39th St. S Apt. 110			11 07 2008
City Fargo		State ND	Zip Code 58103-7178	Transaction ID: cf7d363160d3293dd44 Amount of Each Receipt this Period
FEC ID numb	per of contributing all committee.	C	30103-7170	250.00
Name of Emp Self-Employe	oloyer ed	Occupatio Physicia		
Receipt For:			e Year-to-Date ▼	
Primary Other (s	y		425.00	
SUBTOTAL of	Receipts This Page (optional) .	1	h	750.00
	eriod (last page this line number		<u> </u>	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 44 (check only one) X 11a 11b 11c 12 13 14 15 16 17			
	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Any information copied from such Reports and Statements may not be sold or used by any person or for commercial purposes, other than using the name and address of any political committee to so NAME OF COMMITTEE (In Full) American Psychiatric Association Political Action Committee					
Α.	Full Name (Last, First, Middle Initial) Seymour H. Block Mailing Address 310 E Shore Road St	uite 201		Date of Receipt			
	City Great Neck	State NY	Zip Code 11023-2432	Transaction ID: c97116edd8fe66c51d9 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee. Name of Employer Self-Employed	Occupation Physicia		100.00			
_	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00				
В.	Full Name (Last, First, Middle Initial) Christopher D. Bojrab Mailing Address 703 Pro-Med Lane St	Date of Receipt 1 1 0 5 2 0 0 8					
	City	State	Zip Code	Transaction ID: 788f7389638998882fe			
	Carmel FEC ID number of contributing federal political committee.	C	46032-5318	Amount of Each Receipt this Period 2500.00			
	Name of Employer Self-Employed	Occupation Physicia	n				
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2600.00				
C.	Full Name (Last, First, Middle Initial) Debra A. Bolick Mailing Address 255 18th Street South	Debra A. Bolick					
	City	State	Zip Code	1 0 2 8 2 0 0 8 Transaction ID: b77805673a5fae12e66			
	Hickory FEC ID number of contributing federal political committee.	NC C	28602-1364	Amount of Each Receipt this Period 250.00			
	Name of Employer Self-Employed	Occupation Physicia					
	Receipt For: Primary General Other (specify) ▼	_,	e Year-to-Date ▼ 500.00				
	SUBTOTAL of Receipts This Page (optional)			2850.00			
Ī	TOTAL This Period (last page this line number	er 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 / 44 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American Psychiatric Association Po	he name and address of any political committe	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Robert L. Boyd Mailing Address 301 Keithwood Road City Wynnewood FEC ID number of contributing	State Zip Code PA 19096-1213	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 250.00	230.00
Full Name (Last, First, Middle Initial) Donald R. Brada Mailing Address 1010 N Kansas Street	et	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 8266e97d0d65828aabd
Wichita FEC ID number of contributing federal political committee.	KS 67214-3124	Amount of Each Receipt this Period 250.00
Name of Employer KUSM	Occupation Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) Suzanne M. Bruch		Date of Receipt
Mailing Address 30 Valley Road		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 89537fb74c8a01a1803
San Carlos FEC ID number of contributing federal political committee.	CA 94070-2035	Amount of Each Receipt this Period 250.00
Name of Employer Self-Employed	Occupation Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	•
		750.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	for each o	rate schedule(s) category of the Summary Page	FOR LINE NUMBER: PAGE 10 / 44 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Psychiatric Association Po	e name and address of any p	or used by any person political committee to so	for the purpose of soliciting contributions olicit contributions from such committee.
∠ A.	Full Name (Last, First, Middle Initial) David L. Buch Mailing Address PO Box 16150 City Philadelphia FEC ID number of contributing	State Zip Cod PA 19114-0		Date of Receipt M M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Receipt For: Primary Other (specify)	Occupation Physician Aggregate Year-to-Date	250.00	
- З.	Full Name (Last, First, Middle Initial) Joanne Caring Mailing Address 115 E 87th Street Apr	Date of Receipt 10 23 2008		
	City New York FEC ID number of contributing federal political committee.	State Zip Cod NY 10128-		Transaction ID: 499c902bf4a9d5c5e3d Amount of Each Receipt this Period 150.00
	Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼	Occupation Physician Aggregate Year-to-Date	250.00	
- :.	Full Name (Last, First, Middle Initial) Jon F. Chaffee Mailing Address 5349 E 2nd Street	I		Date of Receipt 1 1 1 3 2 0 0 8
	City Long Beach FEC ID number of contributing federal political committee.	State Zip Cod CA 90803-		Transaction ID: ebe1a948d157665192 Amount of Each Receipt this Period 250.00
	Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼	Occupation Physician Aggregate Year-to-Date	250.00	
	SUBTOTAL of Receipts This Page (optional)	1	>	650.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 44 (check only one)		
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements may	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) American Psychiatric Association	Political Action (Committee			
Full Name (Last, First, Middle Initial) Walter A. Chameides			Date of Receipt		
Mailing Address 823 S Atlantic Bou	Mailing Address 823 S Atlantic Boulevard				
City Monterey Park	State CA	Zip Code 91754-4721	Transaction ID: b40ae1df3c3f996fe90 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		100.00		
Name of Employer Self-Employed	Occupation Physician				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00			
Full Name (Last, First, Middle Initial) Norman A. Chapman	Date of Receipt				
Mailing Address 420 Lake Cook Ro	oad Suite 115		M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y		
City Deerfield	State IL	Zip Code 60015-4914	Transaction ID: 48eee79d7c93965fff Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		250.00		
Name of Employer Self-Employed	Occupation Physician				
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 250.00			
Full Name (Last, First, Middle Initial) Daniel C. Dahl			Date of Receipt		
Mailing Address 1713 6th Avenue S Department of Psy			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City Birmingham	State AL	Zip Code 35294-0001	Transaction ID: 53e514bb186fd8a9e Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		250.00		
Name of Employer UAB	Occupation Physician				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 450.00			
SUBTOTAL of Receipts This Page (option	nal)		600.00		

Newport Beach CA 92660-1749 Amount of Each Receipt this Period C 250.00 Receipt For: Primary General Other (specify) ▼ City State Zip Code San Francisco FEC ID number of contributing federal political committee. City State Zip Code San Francisco FEC ID number of contributing federal political committee. Name of Employer Self-Employed Physician Receipt For: Aggregate Year-to-Date ▼ Date of Receipt Tansaction ID: 796adc7f5a13f0db0cc Amount of Each Receipt this Period Date of Receipt Tansaction ID: 796adc7f5a13f0db0cc Amount of Each Receipt this Period Date of Receipt Tansaction ID: 796adc7f5a13f0db0cc Amount of Each Receipt this Period Date of Receipt Tansaction ID: 796adc7f5a13f0db0cc Amount of Each Receipt this Period Tansaction ID: 796adc7f5a13f0db0cc Amount of Each Receipt this Period Tansaction ID: 796adc7f5a13f0db0cc Amount of Each Receipt To 2 0 0 8 Transaction ID: 796adc7f5a13f0db0cc Amount of Each Receipt To 2 0 0 8 Tansaction ID: 796adc7f5a13f0db0cc Amount of Each Receipt Tansaction ID: 796adc7f5a13f0db0cc Tansaction ID: 796adc7	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 44 (check only one) X
Date of Receipt Date of Receipt Date of Receipt	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Name of Employed Physician	David M. Davis Mailing Address 20101 Southwest Birch City Newport Beach	State Zip Code CA 92660-1749	Transaction ID: aa364e8d623a9392332 Amount of Each Receipt this Period
Address 192 Grand View Avenue City State Zip Code San Francisco CA 94114-2732 FEC ID number of contributing federal political committee. Name of Employer Self-Employed Qeneral Other (specify) ▼ State Zip Code San Francisco CA 94123-4738 City State Zip Code Transaction ID: 796adc7/5a13f0db0cc Amount of Each Receipt this Period Physician Receipt For: Aggregate Year-to-Date ▼ Date of Receipt State Sign Code State Zip Code San Francisco CA 94123-4738 City State Zip Code Transaction ID: 53299164f195be935bb Amount of Each Receipt this Period Date of Receipt MM M Code State Sign Code State Sign Code San Francisco CA 94123-4738 City State Zip Code San Francisco CA 94123-4738 FEC ID number of contributing federal political committee. Name of Employer Self-Employed Physician Receipt For: Aggregate Year-to-Date ▼ Adon.oo	Receipt For: Primary General	Occupation Physician Aggregate Year-to-Date ▼	250.00
FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) John M. Dusay Mailing Address 2250 Green Street Apt. 3 City State Zip Code CA 94123-4738 City San Francisco FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General Occupation Physician Receipt For: Primary General Occupation Physician Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Occupation Physician Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼	John L. Dupre Mailing Address 192 Grand View Avenu	State Zip Code	10 DD / YYYYY Y 2008
Receipt For: Primary Other (specify) ▼ Physician Aggregate Year-to-Date ▼ Solo.00 Full Name (Last, First, Middle Initial) John M. Dusay Mailing Address 2250 Green Street Apt. 3 City San Francisco CA 94123-4738 FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ 400.00	FEC ID number of contributing federal political committee.	C	
Mailing Address 2250 Green Street Apt. 3 City State Zip Code San Francisco CA 94123-4738 FEC ID number of contributing federal political committee. Name of Employer Self-Employed Primary General Other (specify) ▼ Date of Receipt Transaction ID: 53299164f195be935bb Amount of Each Receipt this Period 200.00	Self-Employèd * Receipt For: Primary General	Physician Aggregate Year-to-Date ▼	
City State Zip Code CA 94123-4738 FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼ State Zip Code CA 94123-4738 Amount of Each Receipt this Period C 200.00 Aggregate Year-to-Date ▼ 400.00	John M. Dusay	t. 3	M M / D D / Y Y Y Y
federal political committee. Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00	San Francisco	CA 94123-4738	Transaction ID: 53299164f195be935bb Amount of Each Receipt this Period
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00	federal political committee. Name of Employer	Occupation	200.00
SUBTOTAL of Receipts This Page (optional)	Primary General	Aggregate Year-to-Date ▼	
	SUBTOTAL of Receipts This Page (optional)		700.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 44 (check only one) X	
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Psychiatric Association F	the name and addr	ess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.	
Full Name (Last, First, Middle Initial) Gail A. Edelsohn Mailing Address 70 High Point W			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City Huntingdon Valley FEC ID number of contributing federal political committee.	State PA	Zip Code 19006-4318	Transaction ID: cc1a383949ef07b4bd6 Amount of Each Receipt this Period 100.00	
Name of Employer Self-Employed Receipt For: Primary General Other (specify)	Occupation Physician Aggregate V	Year-to-Date ▼		
Full Name (Last, First, Middle Initial) Ellen L. Edens Mailing Address 7715 Cornell Avenu	,			
City Saint Louis FEC ID number of contributing federal political committee.	State MO	Zip Code 63130-2802	Transaction ID: ad3eb7596bbd512c52 Amount of Each Receipt this Period 100.00	
Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼	Occupation Physician Aggregate \	Year-to-Date ▼		
Full Name (Last, First, Middle Initial) Tiffany R. Farchione Mailing Address 5850 Centre Avenu	e		Date of Receipt 1 0 2 0 2 0 0 8	
Apt. 204 City Pittsburgh FEC ID number of contributing federal political committee.	State PA	Zip Code 15206	Transaction ID: 8b16f27b8bd034e0e4e Amount of Each Receipt this Period 50.00	
Name of Employer Western Psychiatric Institute & Clinic Receipt For: Primary General Other (specify) ▼	Occupation Physician Aggregate	Year-to-Date ▼ 650.00		
SUBTOTAL of Receipts This Page (optional	l)		250.00	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 44 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Psychiatric Association Pol	litical Action	Committee	
Α.	Full Name (Last, First, Middle Initial) William P. Fowler			Date of Receipt
	Mailing Address 190 Presidential Boul	evard Unit 51		10 25 2008
	City	State	Zip Code	Transaction ID: de1742e8a23fe0955f7
	Bala Cynwyd	PA	19004-1105	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Self-Employed	Occupatio Physicia		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	350.00	
- В.	Full Name (Last, First, Middle Initial) Kurt L. Fox	Date of Receipt		
	Mailing Address PO Box 39 921 Hamlet Drive			M M / D D / Y Y Y Y Y Y Y 1 1 1 1 1 1 1 1 1 1 1 1
	City	State	Zip Code	Transaction ID: 8778ec0a10e9cff3f08
	Avon	MN	56310-0039	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Self-Employed	Occupatio Physicia		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00]
С.	Full Name (Last, First, Middle Initial) Andrew J. Francis	1		Date of Receipt
	Mailing Address Suny HIth Sciences T	-10		10 24 2008
	City	State	Zip Code	Transaction ID: 34622e1ca2c635493aa
	Stony Brook	NY	11794-0001	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer SUNY	Occupatio Physicia		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
ſ	SUBTOTAL of Receipts This Page (optional) .	1		450.00
	TOTAL This Period (last page this line numbe		<u> </u>	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 44 (check only one) X 11a
Any information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) American Psychiatric Association	and Statements may not be sold or used by any persong the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Heather M. Fretwell Mailing Address 4326 Northeaster	n Avenue	Date of Receipt
City Indianapolis FEC ID number of contributing federal political committee.	State Zip Code IN 46239-1470 C	Transaction ID: ccc37c9df676efd56aa Amount of Each Receipt this Period 250.00
Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) John W. Garland Mailing Address 664 Lanier Park D	Or. Suite A	Date of Receipt 1 0 2 1 2 0 0 8
City Gainesville	State Zip Code GA 30501-2096	Transaction ID: a1ad88201a66234c5d Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General	Occupation Physician Aggregate Year-to-Date ▼	250.00
Other (specify) ▼ Full Name (Last, First, Middle Initial) David L. Ginsberg Mailing Address 530 1st Avenue #	250.00	Date of Receipt
City	State Zip Code	1 0 1 6 2 0 0 8 Transaction ID: 68b6526e2409399b01
New York FEC ID number of contributing federal political committee.	NY 10016-6402	Amount of Each Receipt this Period 250.00
Name of Employer NY University Medical Center Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Physician Aggregate Year-to-Date 350.00	
SUBTOTAL of Receipts This Page (option	nal)	750.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 44 (check only one) X
A C	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (I. F. III)	Statements ma	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Psychiatric Association Pc	olitical Action	Committee	
۸.	Full Name (Last, First, Middle Initial) Stuart M. Graves Mailing Address 16 Yandow Drive			Date of Receipt
	City	State	Zip Code	1 1 0 2 2 0 0 8 Transaction ID: fefdcc4ee3e71e5caa1
	South Burlington	VT	05403-7843	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Washington County Mental Health	Occupation Physicia		
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 750.00	
. –	Full Name (Last, First, Middle Initial) Ronald L. Green			Date of Receipt
	Mailing Address 1 Medical Center Driv	ve		10 20 YYYY 20 2008
	City	State	Zip Code	Transaction ID: 66350a6b428f052594
	Lebanon	NH	03756-1000	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer DHMC	Occupation Physicia		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
_	Full Name (Last, First, Middle Initial) William M. Greenberg			Date of Receipt
	Mailing Address 233 Mulberry Road			1 1 0 8 2 0 0 8
	City	State	Zip Code	Transaction ID: 042da4bfa21bb7ddf18
	Ramsey FEC ID number of contributing	C	07446-1159	Amount of Each Receipt this Period 250.00
	federal political committee.	<u> </u>		230.00
	Name of Employer Self-Employed	Occupation Physicia	n	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼ 750.00	1
	Other (specify) ▼		730.00	1
				600.00

ITEMIZED R	A (FEC Form 3X) ECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 1//44 (check only one)
Any information cop or for commercial p	ied from such Reports and Staurposes, other than using the r	atements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\	MITTEE (In Full) chiatric Association Politic	cal Action (Committee	
Full Name (Last, Linda J. Griffith	First, Middle Initial)			Date of Receipt
Mailing Address	114 W North College St	reet		M M / D D / Y Y Y Y Y 1 1 0 1 0 1 0 1 0 1 0 1 0 1 0
City Yellow Spring	s	State OH	Zip Code 45387-1536	Transaction ID: 9275384aa2c4401d8 Amount of Each Receipt this Period
FEC ID number federal political of		С		250.00
Name of Employ Self-Employed	er	Occupatio Physicial		
Receipt For: Primary Other (spe	General	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, Jana E. Grimmig	First, Middle Initial)			Date of Receipt
	5571 Roselawn Drive			M M / D D / Y Y Y Y Y 1 Y 1 1 1 1 0 4 2 0 0 8
City Memphis		State TN	Zip Code 38119-6015	Transaction ID: 3f542bdd6ebaa09aa Amount of Each Receipt this Period
FEC ID number federal political c		C		50.00
Name of Employ Self-Employed	er	Occupatio Physicia		
Receipt For: Primary Other (spe	General		e Year-to-Date ▼ 250.00	
Full Name (Last, Philip A. Grossi	First, Middle Initial)			Date of Receipt
Mailing Address	3425 S Bascom Avenue	Suite C		M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
City Campbell		State CA	Zip Code 95008-7300	Transaction ID: d5129e79cc2c5972e Amount of Each Receipt this Period
FEC ID number federal political of		C	33000-7300	250.00
Name of Employ Self-Employed	er	Occupatio Physicia		7
Receipt For: Primary Other (spe	General		e Year-to-Date ▼ 350.00	
SUBTOTAL of Re	Leipts This Page (optional)			550.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 44 (check only one) X 11a
	ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Psychiatric Association Po	ne name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ \ .	Full Name (Last, First, Middle Initial) Jennifer H. Gunn Mailing Address 103 W Seneca Street	t		Date of Receipt 1 1 2 1 2 0 0 8
	City	State NY	Zip Code	Transaction ID: 46f1b8b20c7bbebe988
	Ithaca FEC ID number of contributing federal political committee.	C	14850-4145	Amount of Each Receipt this Period 200.00
	Name of Employer Self-Employed	Occupation Physician	1	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 400.00	
	Full Name (Last, First, Middle Initial) Richard K. Harding Mailing Address 3555 Harden Street E	Extension Suit	e	Date of Receipt 1 1 0 2 0 0 8
	City	State	Zip Code	Transaction ID: 861b87f8a1b71f91112
	Columbia FEC ID number of contributing federal political committee.	SC C	29203-6894	Amount of Each Receipt this Period 250.00
	Name of Employer Self-Employed	Occupation Physician		
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 250.00	
_	Full Name (Last, First, Middle Initial) David B. Henley Mailing Address 630 Teetor Road			Date of Receipt 1 0 3 0 2 0 0 8
	City	State	Zip Code	Transaction ID: 2de6e6924b4e85f760f
	Hagerstown FEC ID number of contributing federal political committee.	C	47346-9617	Amount of Each Receipt this Period 100.00
	Name of Employer Self-Employed	Occupation Physician		
	Receipt For: Primary General Other (specify) ▼	_,	e Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)			550.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 44 (check only one) X 11a 11b 11c 12 13 14 15 16 17
A	ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Psychiatric Association Pole	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) Jeffrey W. Hermann Mailing Address 730 Cricket Glen Roa City	State	Zip Code	Date of Receipt 1 0 1 6 2 0 0 8 Transaction ID: 4d686a46496056a36cs
	Hummelstown FEC ID number of contributing federal political committee.	C	17036-8547	Amount of Each Receipt this Period 250.00
	Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼	Occupation Physicia Aggregate		
3.	Full Name (Last, First, Middle Initial) Christina L. Herring Mailing Address 1030 E Lancaster Ave	enue Suite Le	3	Date of Receipt
	City	State	Zip Code	Transaction ID: 950dc433d8213fbbcf4
	Bryn Mawr FEC ID number of contributing federal political committee.	C	19010-1459	Amount of Each Receipt this Period 200.00
	Name of Employer Self-Employed	Occupation Physicia		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 450.00	
	Full Name (Last, First, Middle Initial) Lewis D. Hoover Mailing Address 49 Old Solomons Isla	nd Road Sui	te	Date of Receipt 1 0 2 7 2 0 0 8
	City	State	Zip Code	Transaction ID: cd6a685c2b7ce90ddfb
	Annapolis FEC ID number of contributing federal political committee.	C	21401-3870	Amount of Each Receipt this Period 250.00
	Name of Employer Self-Employed	Occupation Physicia		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 450.00	
\[\text{s}	SUBTOTAL of Receipts This Page (optional) .			700.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 44 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may not be sold or used by any personant the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Psychiatric Association Po	olitical Action Committee	
Full Name (Last, First, Middle Initial) Constantine loannou		Date of Receipt
Mailing Address 41 Forest Avenue St	uite 6	1 1 1 3 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Glen Cove	State Zip Code NY 11542-2121	Transaction ID: fcd2befd963ae994be8 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Self-Employed	Occupation Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Jeffrey S. Janofsky Mailing Address 30 E Padonia Road	Suite 206	Date of Receipt
		10 16 2008
City Luthvle Timon	State Zip Code MD 21093-2308	Transaction ID: f1afa5afc267f7c0cdc Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Self-Employed	Occupation Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Sheila Judge		Date of Receipt
Mailing Address PO Box 37		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Gwynedd	State Zip Code PA 19436-0037	Transaction ID: 6c009fa875936808d5 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 19450-0057	500.00
Name of Employer Self-Employed	Occupation Physician	7
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
		850.00

	EDULE A (FEC Form 3X) IIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 44 (check only one)
Any inf	ormation copied from such Reports and Statement of the commercial purposes, other than using the r	atements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAI	ME OF COMMITTEE (In Full) nerican Psychiatric Association Politic		•	
	Name (Last, First, Middle Initial) ith P. Kane			Date of Receipt
	ling Address 315 W Wall Street Suite	e 100		M M / D D / Y Y Y Y Y Y 1 1 0 2 7 2 0 0 8
City <u>Gra</u>	apevine	State TX	Zip Code 76051-5202	Transaction ID: deb8164771c8bf7bc1 Amount of Each Receipt this Period
	C ID number of contributing eral political committee.	С		250.00
Nar Sel	ne of Employer f-Employed	Occupatio Physicial		
Rec	ceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
	Name (Last, First, Middle Initial) vid M. Ledner			Date of Receipt
	ling Address 5 Hillcrest Avenue			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Mo	nt Vernon	State NH	Zip Code 03057-1629	Transaction ID: 8f7125e3dbed4bc25 Amount of Each Receipt this Period
FE	C ID number of contributing eral political committee.	C		50.00
Nar Sel	ne of Employer f-Employed	Occupatio Physicial		
Rec	ceipt For: Primary General Other (specify) ▼	· · · · · · · · · · · · · · · · · · ·	e Year-to-Date ▼ 250.00	
	Name (Last, First, Middle Initial) Levi			Date of Receipt
	ling Address 2112 F Street Northwes	t Suite 502		M M / D D / Y Y Y Y Y 1 1 0 1 0 2 3 2 0 0 8
City	ashington	State DC	Zip Code 20037-2761	Transaction ID: 3610c24aabc70244f
FE	C ID number of contributing eral political committee.	C	20037-2701	Amount of Each Receipt this Period 250.00
Nar Sel	ne of Employer f-Employed	Occupatio Physicia		
Rec	ceipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 250.00	
CLIET	COTAL of Receipts This Page (optional)			550.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 44 (check only one) X 11a 11b 11c 12 13 14 15 16
	y information copied from such Reports and or commercial purposes, other than using th NAME OF COMMITTEE (In Full) American Psychiatric Association Pol			
	Full Name (Last, First, Middle Initial) Brian P. Lipton Mailing Address 1111 Park Avenue City	State	Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
•	New York FEC ID number of contributing federal political committee.	NY C	10128-1234	Amount of Each Receipt this Period 150.00
	Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼	Occupation Physicial Aggregate		
	Full Name (Last, First, Middle Initial) Laurence S. Lorefice Mailing Address 39 Ballwood Road	<u>. I</u>		Date of Receipt 1 0 1 6 2 0 0 8
	City	State	Zip Code	Transaction ID: e29edd802f3fae3a02
	Old Greenwich	CT	06870-2332	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
•	Name of Employer Self-Employed	Occupatio Physicia		
-	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 450.00	
	Full Name (Last, First, Middle Initial) Douglas A. Marcus			Date of Receipt
	Mailing Address 151 Broadway			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Amityville	State NY	Zip Code 11701-2729	Transaction ID: 233d1b27a6b3f42f3f
•	FEC ID number of contributing federal political committee.	C	11701-2729	100.00
•	Name of Employer Self-Employed	Occupatio Physicia		
	Receipt For: Primary General Other (specify) ▼	, ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	e Year-to-Date ▼ 300.00	
SI	JBTOTAL of Receipts This Page (optional) .	1		500.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 44 (check only one) X
Ai or	ny information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Psychiatric Association Po	ne name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
A .	Full Name (Last, First, Middle Initial) Judith A. Marcus Mailing Address 34 Elm Street City Great Neck FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General Other (specify)	State NY C Occupation Physician Aggregate		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
— В.	Full Name (Last, First, Middle Initial) David J. Markowitz Mailing Address 6714 Patterson Aven City Richmond	ue State VA	Zip Code 23226-3432	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General Other (specify)	Occupation Physician Aggregate		100.00
 C.	Full Name (Last, First, Middle Initial) Catherine S. May Mailing Address 2000 P Street Northw City Washington FEC ID number of contributing federal political committee.	vest Suite 601 State DC	Zip Code 20036-6971	Date of Receipt 10 21 2008 Transaction ID: 6bada72bf190764578c Amount of Each Receipt this Period 500.00
	Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼	Occupation Physician Aggregate		
s	SUBTOTAL of Receipts This Page (optional)]	700.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24/44 (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may g the name and addr	not be sold or used by any personess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Psychiatric Association	Political Action C	Committee	
Full Name (Last, First, Middle Initial) Edwards U. Mc Reynolds			Date of Receipt
Mailing Address 1640 Norfolk St. #	В		M M / D D / Y Y Y Y Y Y 1 1 1 1 3 2 0 0 8
City Houston	State TX	Zip Code 77006-5229	Transaction ID: 8dc7a364f1653a584 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		100.00
Name of Employer Self-Employed	Occupation Physician		
Receipt For: Primary General Other (specify) ▼	Aggregate '	Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Stephen A. McLeod-Bryant			Date of Receipt
Mailing Address PO Box 250861			M M / D D / Y Y Y Y Y 1 Y 1 1 1 1 3 2 0 0 8
City Charleston	State SC	Zip Code 29425-0861	Transaction ID: 4b708f12039a7acf1 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20120 0001	250.00
Name of Employer Medical U of South Caroli-	Occupation Physician		
na Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) T. C. Merritt			Date of Receipt
Mailing Address 6817 Southpoint P	arkway Suite 304	1	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Jacksonville	State	Zip Code	Transaction ID: f27524553404056ce
FEC ID number of contributing federal political committee.	C	32216-6287	Amount of Each Receipt this Period 250.00
Name of Employer Self-Employed	Occupation Physician		
Receipt For: Primary General Other (specify) ▼	 	Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (options	al)		600.00

SCHEDULE A (FEC Form 3X FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 44 (check only one) X 11a 11b 11c 12 13 14 15 16
NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any per he name and address of any political committee	
American Psychiatric Association Po	Diffical Action Committee	
Full Name (Last, First, Middle Initial) Sheldon J. Meyers Mailing Address 122 S Michigan Ave	nua Cuita 1005	Date of Receipt
Walling Address 122 S Michigan Ave	nue Suite 1305	11 21 2008
City	State Zip Code	Transaction ID: eb2bb8a426e0a4ccc
Chicago	IL 60603-6191	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Self-Employed	Occupation Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary ☐ General Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial) Susan A. Minchin		Date of Receipt
Mailing Address 1 Barnes Hospital Pl	aza Suite 1641	M M / D D / Y Y Y Y Y 1 1 1 1 2 2 0 0 8
City	State Zip Code	Transaction ID: 5e95cc104998e747
Saint Louis	MO 63110-1003	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Self-Employed	Occupation Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Michaela S. Mohr		Date of Receipt
Mailing Address 1514 Emerson Aven	ue	1 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 4c3e617466fc73962
Salt Lake Cty	UT 84105-2728	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer Self-Employed	Occupation Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary ☐ General Other (specify) ▼	300.00	
		550.00

	ULE A (FEC Form 3X) ED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 44 (check only one) X
or for comm	ation copied from such Reports and S nercial purposes, other than using the DF COMMITTEE (In Full) can Psychiatric Association Pol	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	me (Last, First, Middle Initial)			Date of Descript
Luke J. Mailing A	Address 1700 Pierce Street Su	ite 205		Date of Receipt 1 0 1 6 2 0 0 8
City San Fr	rancisco	State CA	Zip Code 94115-6114	Transaction ID: 8bb435dc6ecef39e9a Amount of Each Receipt this Period
FEC ID	number of contributing political committee.	С		250.00
Name of Self-Em	f Employer ployed	Occupatio Physicia		
	For: rimary General ther (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Michael	ne (Last, First, Middle Initial) J. Murray Address 3313 Leslie Lane	<u> </u>		Date of Receipt
City		State	Zip Code	1 1 2 3 2 0 0 8 Transaction ID: bfcde8ef86bc10b133
Eau Cl	laire	WI	54703-1312	Amount of Each Receipt this Period
	number of contributing political committee.	C		1000.00
Name of Self-Em	f Employer poloyed	Occupatio Physicia		
	For: rimary General ther (specify) ♥	Aggregate	e Year-to-Date ▼ 1000.00	
	ne (Last, First, Middle Initial) 3. Nagarkar			Date of Receipt
	Address 3046 Gaslight Drive			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City <u>Bay Ci</u>	ty	State MI	Zip Code 48706-9604	Transaction ID: c2581f0836181b8865 Amount of Each Receipt this Period
	number of contributing political committee.	C		100.00
Name of Self-Em	f Employer nployed	Occupatio Physicia		
	For: rimary General ther (specify) ♥	Aggregate	e Year-to-Date ▼ 300.00	
SUBTOTA	AL of Receipts This Page (optional) .			1350.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 44 (check only one) X 11a 11b 11c 12 13 14 15 16 17
NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American Psychiatric Association Po	olitical Action Committee	
Full Name (Last, First, Middle Initial) Mary S. Nobilski		Date of Receipt
Mailing Address 9 Meadowbrook Drive	е	11 24 2008
City	State Zip Code	Transaction ID: b8c86d59971ffa011b2
Arkport	NY 14807-9548	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Self-Employed	Occupation Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Judith A. Nowak		Date of Receipt
Mailing Address 908 New Hampshire	Avenue Northwest	1 1 0 8 2 0 0 8
City	State Zip Code	Transaction ID: 3265c75066daaa7e264
Washington	DC 20037-2349	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Self-Employed	Occupation Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial) John P. O'Reardon		Date of Receipt
Mailing Address 8 Oakley Court		1 1 0 7 Y Y Y Y Y
City	State Zip Code	Transaction ID: 53ad78c0245fde00fe2
Cherry Hill	NJ 08003-2225	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer Self-Employed	Occupation Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
	1	400.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 44 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Psychiatric Association P	d Statements may not be sold or used by any personante name and address of any political committee to olitical Action Committee	
Full Name (Last, First, Middle Initial) Lilia M. Ortiz Mailing Address 4509 Mokry Drive City Crp Christi	State Zip Code TX 78415-2743	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼	Occupation Physician Aggregate Year-to-Date 450.00	250.00
Full Name (Last, First, Middle Initial) Norma C. Panahon Mailing Address 12 Hidden Pines Co City East Amherst FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General Other (specify)	urt State Zip Code NY 14051-1688 C Occupation Physician Aggregate Year-to-Date ▼	Date of Receipt M M J 30 2008 Transaction ID: 30c530c432f615f3340 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Jack L. Potts Mailing Address 221 E Indianola Ave City Phoenix FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General Other (specify)	State Zip Code AZ 85012-2002 C Occupation Physician Aggregate Year-to-Date 300.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	750.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 44 (check only one) X 11a 11b 11c 12 13 14 15 16 17
4	Any information copied from such Reports and sor for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any persolress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) American Psychiatric Association Pol	litical Action (Committee	
∠ A.	Full Name (Last, First, Middle Initial) John N. Richie			Date of Receipt
	Mailing Address 2508 Bert Kouns Indu			111 / 21 / 2008
	City Shreveport	State LA	Zip Code 71118-3175	Transaction ID: 7ff72a21d981d46c7ec Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Self-Employed	Occupation Physician		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
— В.	Full Name (Last, First, Middle Initial) Gordon T. Risk	1		Date of Receipt
	Mailing Address PO Box 12005			11 13 2008
	City	State	Zip Code	Transaction ID: aaab02c30a0a10b5408
	Kansas City	KS	66112-0005	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Wyandot Center	Occupation Physician		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 200.00	
_ С.	Full Name (Last, First, Middle Initial) Graham A. Rogeness			Date of Receipt
	Mailing Address 3046 Colony Drive			M M / D D / Y Y Y Y Y 1 1 1 1 3 2 0 0 8
	City San Antonio	State TX	Zip Code 78230-3416	Transaction ID: 836bcdde8db5a2d5446 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	70230-3410	100.00
	Name of Employer Self-Employed	Occupation Physician		
	Receipt For: Primary General Other (specify) ▼	, '	Year-to-Date ▼ 300.00	
	SUBTOTAL of Receipts This Page (optional) .	1		300.00
F	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 44 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persong the name and address of any political committee to	
American Psychiatric Association	Political Action Committee	
Full Name (Last, First, Middle Initial) Deborah S. Rose		Date of Receipt
Mailing Address 750 Welch Road City	Suite 220 State Zip Code	Transaction ID: 0a4933da39008f2105
Palo Alto	CA 94304-1509	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Self-Employed	Occupation Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) David L. Rosenberg Mailing Address 1893 Sheridan Ro	nad Suite 217	Date of Receipt
Maining Address Toss Sheridan Ad	10 24 2008	
City	State Zip Code	Transaction ID: c3cf3d858305cbda34
Highland Park FEC ID number of contributing federal political committee.	IL 60035-2637	Amount of Each Receipt this Period 100.00
Name of Employer Self-Employed	Occupation Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	200.00	
Full Name (Last, First, Middle Initial) Katherine S. Sanborn		Date of Receipt
Mailing Address 1101 University A	venue	10 23 YYYY 2008
City	State Zip Code	Transaction ID: 399619901ed523f7c6
Palo Alto	CA 94301-2239	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Self-Employed	Occupation Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
SURTOTAL of Receipts This Page (antio	nal)	450.00

City State Zip Code Baton Rouge LA 70809 FEC ID number of contributing federal political committee. Name of Employer Self-Employed Primary General Other (specify) ▼ State Zip Code Hartford CT 06106-3309 FEC ID number of contributing federal political committee. City State Zip Code Transaction ID: 7c0befc6d64ba4df Amount of Each Receipt this Period Date of Receipt Transaction ID: 7c0befc6d64ba4df Amount of Each Receipt this Period Date of Receipt Transaction ID: 7c0befc6d64ba4df Amount of Each Receipt this Period Transaction ID: 7c0befc6d64ba4df Amount of Each Receipt this Period Date of Receipt Transaction ID: 7c0befc6d64ba4df Amount of Each Receipt this Period Transaction ID: 7c0befc6d64ba4df Amount of Each Receipt this Period Transaction ID: 7c0befc6d64ba4df Amount of Each Receipt this Period Transaction ID: 7c0befc6d64ba4df Amount of Each Receipt this Period Transaction ID: 7c0befc6d64ba4df Amount of Each Receipt this Period Transaction ID: 7c0befc6d64ba4df Amount of Each Receipt this Period Transaction ID: 7c0befc6d64ba4df Amount of Each Receipt this Period Transaction ID: 7c0befc6d64ba4df Amount of Each Receipt this Period Transaction ID: 7c0befc6d64ba4df Amount of Each Receipt this Period Transaction ID: 7c0befc6d64ba4df Amount of Each Receipt this Period Transaction ID: 7c0befc6d64ba4df Amount of Each Receipt this Period Transaction ID: 7c0befc6d64ba4df Amount of Each Receipt this Period Transaction ID: 7c0befc6d64ba4df Amount of Each Receipt this Period Transaction ID: 7c0befc6d64ba4df Amount of Each Receipt this Period Transaction ID: 7c0befc6d64ba4df Amount of Each Receipt this Period Transaction ID: 7c0befc6d64ba4df Amount of Each Receipt this Period Transaction ID: 7c0befc6d64ba4df Tr	SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 44 (check only one) X
Full Name (Last, First, Middle Initial) Donald A. Schenagder Mailing Address 4622 Hamblin Drive City State Zip Code Baton Rouge LA 70809 FEC ID number of contributing federal political committee. Name of Employer Other (specify) ▼ Full Name (Last, First, Middle Initial) Harold I. Schwartz Mailing Address 200 Retreat Avenue City State Zip Code Physician Receipt For: Primary General Other (specify) ▼ State Zip Code Amount of Each Receipt this Period FEC ID number of contributing federal political committee. C T 06106-3309 Feb (ID number of contributing federal political committee. C T 06106-3309 Full Name (Last, First, Middle Initial) Ramakrishnan Shenoy Mailing Address 1309 Port Elissa Landing City State Zip Code Physician Receipt For: Primary General Other (specify) ▼ State Zip Code Physician Aggregate Year-to-Date ▼ Transaction ID: 70befc6debadd Amount of Each Receipt this Period Amount of Each Receipt this Period Date of Receipt Transaction ID: 72befc6debadd Amount of Each Receipt this Period Transaction ID: 72befc6debadd Amount of Each Receipt this Period Date of Receipt Transaction ID: 046eada2e9b3575 Midlothian VA 23114-7154 FEC ID number of contributing federal political committee. C State Zip Code Name of Employer Self-Employed Physician Receipt For: Primary General Occupation Physician Physician Aggregate Year-to-Date ▼ Transaction ID: 046eada2e9eb3575 Amount of Each Receipt this Period Transaction ID: 046eada2e9eb3575 Amount of Each Receipt this Period Transaction ID: 046eada2e9eb3575 Amount of Each Receipt this Period FEC ID number of contributing federal political committee.	or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Primary General Aggregate Year-to-Date ▼	Full Name (Last, First, Middle Initial) Donald A. Schexnayder Mailing Address 4622 Hamblin Drive City Baton Rouge FEC ID number of contributing federal political committee.	State Zip Code LA 70809 C Occupation	Transaction ID: 8baa4a8d5db5ba63f04 Amount of Each Receipt this Period
Mailing Address 200 Retreat Avenue City State Zip Code CT 06106-3309 FEC ID number of contributing federal political committee. Name of Employer Institute of Living Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Ramakrishnan Shenoy Mailing Address 1309 Port Elissa Landing City State Zip Code CT 06106-3309 Full Name (Last, First, Middle Initial) Pamakrishnan Shenoy Mailing Address 1309 Port Elissa Landing City State Zip Code Transaction ID: 7c0befc6d64ba4dd Amount of Each Receipt this Period Date of Receipt Transaction ID: 7c0befc6d64ba4dd Amount of Each Receipt this Period Date of Receipt Transaction ID: 7c0befc6d64ba4dd Amount of Each Receipt this Period Primary General Occupation Physician Date of Receipt Transaction ID: 7c0befc6d64ba4dd Amount of Each Receipt this Period Transaction ID: 7c0befc6d64ba4dd Amount of Each Receipt this Period Transaction ID: 7c0befc6d64ba4dd Amount of Each Receipt this Period Date of Receipt Transaction ID: 7c0befc6d64ba4dd Amount of Each Receipt this Period Transaction ID: 7c0befc6d64ba4dd Amount of Each Receipt this Period Transaction ID: 7c0befc6d64ba4dd Amount of Each Receipt this Period Date of Receipt Transaction ID: 7c0befc6d64ba4dd Amount of Each Receipt this Period Transaction ID: 7c0befc6d64ba4dd Amount of Each Receipt this Period Transaction ID: 7c0befc6d64ba4dd Amount of Each Receipt this Period Transaction ID: 7c0befc6d64ba4dd Amount of Each Receipt this Period Transaction ID: 7c0befc6d64ba4dd Amount of Each Receipt this Period Transaction ID: 7c0befc6d64ba4dd Amount of Each Receipt this Period Transaction ID: 7c0befc6d64ba4dd Amount of Each Receipt this Period Transaction ID: 7c0befc6d64ba4dd Amount of Each Receipt this Period Transaction ID: 7c0befc6d64ba4dd Amount of Each Receipt this Period Transaction ID: 7c0befc6d64ba4dd Amount of Each Receipt this Period	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
Hartford CT 06106-3309 FEC ID number of contributing federal political committee. Name of Employer Institute of Living Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Ramakrishnan Shenoy Mailing Address 1309 Port Elissa Landing City State Zip Code Transaction ID: 046eada29eb3575 Midlothian VA 23114-7154 FEC ID number of contributing federal political committee. Name of Employer Self-Employed Physician Receipt For: Primary General Occupation Physician Receipt For: Primary General Occupation Physician Amount of Each Receipt this Period	Harold I. Schwartz	e	M M / D D / Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Institute of Living Physician Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Ramakrishnan Shenoy Mailing Address 1309 Port Elissa Landing City State Zip Code VA 23114-7154 FEC ID number of contributing federal political committee. Name of Employer Self-Employed Name of Employer Self-Employed Receipt For: Primary General Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼	•	·	Transaction ID: 7c0befc6d64ba4d09fd
Institute of Living	FEC ID number of contributing		
Primary	Name of Employer Institute of Living	,	
Aggregate Year-to-Date Ramakrishnan Shenoy Mailing Address 1309 Port Elissa Landing City State Zip Code M M M M M M M M M M M M M M M M M M M	Primary General]
City State Zip Code Midlothian VA 23114-7154 FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General Primary General Primary General Primary General Transaction ID: 046eada29eb3575 Amount of Each Receipt this Period 200.00 Aggregate Year-to-Date ▼	Ramakrishnan Shenoy	anding	M M / D D / Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General Aggregate Year-to-Date 650.00	City	State Zip Code	Transaction ID: 046eada29eb3575ba2
federal political committee. Name of Employer Self-Employed Receipt For: Primary General Coccupation Physician Aggregate Year-to-Date FEO.00		VA 23114-7154	Amount of Each Receipt this Period
Self-Employèd		С	200.00
Primary General 650.00	Name of Employer Self-Employed		
	Primary General		
SUBTOTAL of Receipts This Page (optional)	SUBTOTAL of Receipts This Page (optional	(ls	650.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 / 44 (check only one)
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements magne name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
American Psychiatric Association Po	litical Action	Committee	
Full Name (Last, First, Middle Initial) Ramakrishnan Shenoy			Date of Receipt
Mailing Address 1309 Port Elissa Lan	ding		11 13 2008
City <u>Midlothian</u>	State VA	Zip Code 23114-7154	Transaction ID: 627575d48528027fef Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		200.00
Name of Employer Self-Employed	Occupation Physicial		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00]
Full Name (Last, First, Middle Initial) Clifford H. Siegel	!		Date of Receipt
Mailing Address 9 Red Fox Lane			1 1 2 1 2 0 0 8
City Greenwood Village	State CO	Zip Code 80111-1440	Transaction ID: dc61c769b8c2ebf2efc Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		200.00
Name of Employer Self-Employed	Occupatio Physicia		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) Gurdial N. Singh			Date of Receipt
Mailing Address 239 W Commerce St	reet		10 28 2008
City	State	Zip Code	Transaction ID: 24f8efb01d65f0ba2e8
Shamokin FEC ID number of contributing federal political committee.	C	17872-5357	Amount of Each Receipt this Period 100.00
Name of Employer Downtown Medical Center	Occupatio Physicia		_
Receipt For: Primary General Other (specify) ▼	- ' - ' 	e Year-to-Date ▼ 300.00	
SUBTOTAL of Receipts This Page (optional)			500.00
TOTAL This Period (last page this line number		·	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 44 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any personal he name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
American Psychiatric Association Po	olitical Action Committee	
Full Name (Last, First, Middle Initial) Eugene F. Smith		Date of Receipt
Mailing Address 138 Brookhaven Driv	/e State Zip Code	1 0 3 1 2 0 0 8 Transaction ID: 3d79abf6d9f6078d4f7
Moore	SC 29369-9750	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Self-Employed	Occupation Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) B. Eliot Sorel		Date of Receipt
Mailing Address 2301 E Street North	vest # 1101	10 23 2008
City	State Zip Code	Transaction ID: 2a464213fc9e578cc4e
Washington	DC 20037-2829	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Self-Employed	Occupation Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initial) Janet M. Spraggins		Date of Receipt
Mailing Address 780 Welch Road Sui		111 / 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: d415bfad6a6f2efbd72
Palo Alto	CA 94304-1518	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Self-Employed	Occupation Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)		600.00
TOTAL This Period (last page this line numb	·	

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 / 44 (check only one) X
	Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American Psychiatric Association Po	he name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Robert W. Stanton Mailing Address 1601 Walnut Street S	Suite 1009		Date of Receipt 10 23 2008
	City	State PA	Zip Code	Transaction ID: 526ae368dddada7b689
	Philadelphia FEC ID number of contributing federal political committee.	C	19102-2906	Amount of Each Receipt this Period 50.00
	Name of Employer Self-Employed	Occupatio Physicial	n	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 250.00	
3.	Full Name (Last, First, Middle Initial) Emily S. Stein Mailing Address 245 E 54th Street Ap	ot. 3R		Date of Receipt 1 1 4 2 0 0 8
	City	State	Zip Code	Transaction ID: 6d2140a14a0993dc4c0
	New York FEC ID number of contributing federal political committee.	C	10022-4716	Amount of Each Receipt this Period 250.00
	Name of Employer Self-Employed	Occupatio Physicia		7
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 500.00	
	Full Name (Last, First, Middle Initial) Belinda Straight Mailing Address 3900 Watson Place	Northwest		Date of Receipt 10 23 2008
	City	State	Zip Code	Transaction ID: 8a26da062c2451250dl
	Washington FEC ID number of contributing federal political committee.	C	20016-5416	Amount of Each Receipt this Period 50.00
	Name of Employer Self-Employed	Occupatio Physicia		
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 300.00	
	SUBTOTAL of Receipts This Page (optional)			350.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 / 44 (check only one) X 11a 11b 11c 12 13 14 15 16 17
A C	ny information copied from such Reports and r for commercial purposes, other than using th	Statements may not be sold or used by any pe e name and address of any political committe	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Psychiatric Association Pol	itical Action Committee	
۷.	Full Name (Last, First, Middle Initial) John C. Strunk		Date of Receipt
	Mailing Address 205 Willowbrook Terr	ace	10 20 7 2008
	City Dothan	State Zip Code AL 36301-1275	Transaction ID: 2731e1f0a6af3ad0429
	FEC ID number of contributing federal political committee.	C 30301-1273	Amount of Each Receipt this Period 200.00
	Name of Employer Self-Employed	Occupation Physician	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
- -	Full Name (Last, First, Middle Initial) Peter E. Tanguay Mailing Address 1129 Cardinal Drive		Date of Receipt
			11 13 2008
	City Louisville	State Zip Code KY 40213-1363	Transaction ID: d98c7cc3acfba7dd936 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	100.00
	Name of Employer Self-Employed	Occupation Physician	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
_	Full Name (Last, First, Middle Initial) Alan J. Tuckman	1	Date of Receipt
	Mailing Address Summit Professional 971 Route 45	Building	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Pomona	State Zip Code NY 10970	Transaction ID: fbc644c4fcee44d5431
	FEC ID number of contributing federal political committee.	C 10970	Amount of Each Receipt this Period 250.00
	Name of Employer Self-Employed	Occupation Physician	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
Γ			550.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	f	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 / 44 (check only one) X 11a
	Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American Psychiatric Association Po	ne name and address	s of any political committee to	on for the purpose of soliciting contributions
∠ 4 .	Full Name (Last, First, Middle Initial) Anna H. Vander Schraaf Mailing Address 21 Perry Street			Date of Receipt 1 0 2 4 2 0 0 8
	City Morristown	State NJ	Zip Code 07960-9446	Transaction ID: 669e9707c371d4037a2 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼	Occupation Physician Aggregate Yea	ar-to-Date ▼ 300.00	
_ 3.	Full Name (Last, First, Middle Initial) Garry M. Vickar Mailing Address 11125 Dunn Road S	uite 213		Date of Receipt 1 1 1 1 4 2 0 0 8
	City	State	Zip Code	Transaction ID: c7ecb4c20c89c4cb329
	Saint Louis FEC ID number of contributing federal political committee.	C	63136-6132	Amount of Each Receipt this Period 1000.00
	Name of Employer Self-Employed	Occupation Physician		
	Receipt For: Primary General Other (specify)	Aggregate Yea	ar-to-Date ▼ 2000.00	
<u> </u>	Full Name (Last, First, Middle Initial) Albert V. Vogel Mailing Address PO Box 1747			Date of Receipt 1 1 0 5 2 0 0 8
	City	State	Zip Code	Transaction ID: a8c1e071dde39a149e4
	Crested Butte FEC ID number of contributing federal political committee.	C	81224-1747	Amount of Each Receipt this Period 250.00
	Name of Employer Self-Employed	Occupation Physician		
	Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)			1400.00

SCHEDULE A (FEC FITEMIZED RECEIPTS	orm 3X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 37/44 (check only one)
Any information copied from such or for commercial purposes, other	Reports and Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Fo	(الد	•	
Full Name (Last, First, Middle I Sandra C. Walker	nitial)		Date of Receipt
	ry Street Suite 240		10 16 2008
City <u>Seattle</u>	State WA	Zip Code 98104-2023	Transaction ID: a702f2e7abe3cc1c31 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Self-Employed	Occupatio Physicia		
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle I B T. Walsh	nitial)		Date of Receipt
Mailing Address 1051 Riverside Drive Unit 98			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City New York	State NY	Zip Code 10032-1007	Transaction ID: 7e49a4438f640da54 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		100.00
Name of Employer Self-Employed	Occupatio Physicial		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle I Mark A. Wellek	nitial)		Date of Receipt
	nd St. Suite G		10 23 2008
City Phoenix	State AZ	Zip Code 85018-4765	Transaction ID: 6ba964906c1528ac9 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	05010 4705	200.00
Name of Employer Self-Employed	Occupatio Physicial		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 450.00	
SUBTOTAL of Receipts This Page	ge (optional)		550.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 / 44 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persole name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
American Psychiatric Association Pol	itical Action Committee	
Full Name (Last, First, Middle Initial) William C. Wilkerson		Date of Receipt
Mailing Address PO Box 81689	01.12 7'- 0.12	10 16 2008
City Mobile	State Zip Code AL 36689-1689	Transaction ID: 1f9942046a09ee5d9dd Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Self-Employed	Occupation Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Eric Williams		Date of Receipt
Mailing Address 708 Cottontail Ct S	1 1 1 4 2 0 0 8	
City	State Zip Code	Transaction ID: f30b8c442ec81f134fb
Columbia	SC 29229-9485	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	100.00
Name of Employer Self-Employed	Occupation Physician	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General Other (specify) ▼	450.00	
Full Name (Last, First, Middle Initial) Mark S. Wright		Date of Receipt
Mailing Address 2112 Thorndale Way		10 23 YYYYY 2008
City	State Zip Code	Transaction ID: d65ebebcb6faa0d6ee6
Lexington FEC ID number of contributing federal political committee.	KY 40515-1111	Amount of Each Receipt this Period 115.00
Name of Employer Self-Employed	Occupation Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
		1
SUBTOTAL of Receipts This Page (optional) .		465.00
TOTAL This Period (last page this line number	r only)	

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В.

PAGE 39 / 44 FOR LINE NUMBER: SCHEDULE A (FEC Form 3X) Use separate schedule(s) (check only one) for each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 13 14 16 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) American Psychiatric Association Political Action Committee Full Name (Last, First, Middle Initial) Narithookil S. Xavier Date of Receipt Mailing Address 100 Century Park S Suite 206 21 2008 1.1 City State Zip Code Transaction ID: 67abfaaf3615a7ee3f3 **Birmingham** 35226-3922 Αl Amount of Each Receipt this Period FEC ID number of contributing 200.00 C federal political committee. Name of Employer Self-Employed Occupation Physician Receipt For: Aggregate Year-to-Date General Primary 350.00 Other (specify) Full Name (Last, First, Middle Initial) J. S. Zil Date of Receipt Mailing Address PO Box 160208 2008 20 City Transaction ID: 7c211cc46d41cc6ea7c State Zip Code Sacramento CA 95816-0208 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Self-Employed Occupation Physician Receipt For: Aggregate Year-to-Date ▼ Primary General

SUBTOTAL of Receipts This Page (optional)	•	450.00
TOTAL This Period (last page this line number only)		23265.00

250.00

Other (specify)

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SCHEDULE B (FEC Form 3X)		Use separate schedule(s)	FOR LINE (check onl	NUMBER: PAGE 40 / 44 yone)
1	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
	y Information copied from such Reports and Stat or commercial purposes, other than using the na			
<u> </u>	NAME OF COMMITTEE (In Full)			
/	American Psychiatric Association Politic	al Action Committee		
	Full Name (Last, First, Middle Initial)			Transaction ID: V76906-887096583843
	National Capital Teleserv			Date of Disbursement
	Mailing Address 300 Fifth Street, NE			111 / 21 / 2008
	City Washington	State Zip Code DC 20002		Amount of Each Disbursement this Period
	Purpose of Disbursement Non-Candidate Support Tele-Fundr Exp		001	15654.25
	Candidate Name		Category/ Type	
	Office Sought: House Disbut Senate President	rsement For: Primary General Other (specify)		
	State: District:			

SUBTOTAL of Disbursements This Page (optional)	•	15654.25
TOTAL This Period (last page this line number only)		15654.25

CHEDULE B (FEC Fori	² Use sep	arate schedule(s)	FOR LINE		= 41 / 44
EMIZED DISBURSEME	NTS for each	category of the Summary Page	(check only 21b 27	22 X 23 24 28b 28c	25 26 29 30
ny Information copied from such Reported for commercial purposes, other than					
NAME OF COMMITTEE (In Full) American Psychiatric Associa	-				
Full Name (Last, First, Middle Initial)			Transaction ID: 94244-3	0009096860
Friends of Rahm Emanuel				Date of Disbursement	YYY
Mailing Address PO Box 101	124			10 17	ž 0 0 8 °
City Chicago	State IL	Zip Code 60610		Amount of Each Disburseme	
Purpose of Disbursement Contribution			011		00.00
Candidate Name Rahm Israel Emanuel			Category/ Type		
Office Sought: X House Senate	Disbursement For: Primary	2008 X General			
State: IL President District: 05	Other (spe	ecify) 🔻			
Full Name (Last, First, Middle Initial) Hawkeye Pac, the				Transaction ID: 94244-4	8234194517
Mailing Address PO Box 725	5			10	2 0 0 8 °
City Des Moines	State IA	Zip Code 50309		Amount of Each Disburseme	nt this Period
Purpose of Disbursement Contribution		30003	011	5	00.00
Candidate Name			Category/ Type		
Office Sought: House Senate President	Disbursement For: Primary X Other (spr	2008 General	,,		
State: District:	Contribution				
Full Name (Last, First, Middle Initial John Sullivan for Congress In	•			Transaction ID: 94244-10 Date of Disbursement	
Mailing Address Post Office Box 470840				10 M / D 17 / Y	ž 0 0 8 °
City Tulsa	State OK	Zip Code 74147		Amount of Each Disburseme	
Purpose of Disbursement Contribution			011	2	2500.00
Candidate Name John Sullivan			Category/ Type		
Office Sought: X House Senate	Disbursement For:	2008 X General			
State: OK District: 01	Other (spo	ecity) 🔻			
				0	500.00
SUBTOTAL of Disbursements This P	age (ontional)			0	วบบ.บบ

SCHEDULE B (FEC FOIIII 3X)	Use separate schedule(s	(check on	E NUMBER: PAGE 42 / 44
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 36
Any Information copied from such Reports and State or for commercial purposes, other than using the n			
NAME OF COMMITTEE (In Full)	,,,,		
American Psychiatric Association Politic	cal Action Committee		
Full Name (Last, First, Middle Initial)			Transaction ID: 60416-73850649595
Nancy Pelosi for Congress			Date of Disbursement
Mailing Address 235 Montgomery Stre Suite 610	et		10 M / 29 / Y Y Y O O 8
City San Francisco	State Zip Code CA 94104		Amount of Each Disbursement this Period
Purpose of Disbursement			5000.00
Contribution		011	
Candidate Name Nancy Pelosi		Category/ Type	
Office Sought: X House Disbu	Primary X General		
State: CA District: 08	Other (specify) ▼		
Full Name (Last, First, Middle Initial)			Transaction ID: 94244-12563723325
Paul Tonko for Congress			Date of Disbursement
Mailing Address 911 Central Avenue PO Box 221			10 M / D D 7 Y Y Y O O 8 Y
City Albany	State Zip Code NY 12206		Amount of Each Disbursement this Period
Purpose of Disbursement Contribution		011	1000.00
Candidate Name Paul David Tonko		Category/ Type	
Senate President	rrsement For: 2008 Primary X General Other (specify) ▼		
State: NY District: 21			
Full Name (Last, First, Middle Initial) Searchlight Leadership Fund			Transaction ID: 60416-78013247251 Date of Disbursement
Mailing Address 607 14th Street N.W. Suite 800			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Washington	State Zip Code DC 20005		Amount of Each Disbursement this Period
Purpose of Disbursement Contribution		011	5000.00
Candidate Name		Category/ Type	
Office Sought: House Disbution Senate President	rsement For: 2008 Primary General X Other (specify)	71-21-	
State: District: Conf	ribution		
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	CHEDULE B (FEC Form 3X EMIZED DISBURSEMENTS	Use separate schedule(s)	FOR LINE (check only 21b 27	PAGE 43 / 44 y one)
	y Information copied from such Reports and for commercial purposes, other than using the		, , ,	, ,
\rangle	NAME OF COMMITTEE (In Full) American Psychiatric Association Po	olitical Action Committee		
	Full Name (Last, First, Middle Initial) Tim Murphy for Congress Mailing Address PO Box 24551			Transaction ID: 88738-5296136736869 Date of Disbursement M
	City Pttsburgh Purpose of Disbursement Contribution	State Zip Code PA 15234	011	Amount of Each Disbursement this Period 2000.00
	Candidate Name Timothy F. Murphy		Category/ Type	
	Office Sought: X House Senate President State: PA District: 18	oisbursement For: 2008 Primary X General Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)	•	2000.00
TOTAL This Period (last page this line number only)	•	21500.00

Image# 28994119125 Form/Schedule: F3X Transaction ID: