

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

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USE FEC MAILING LABEL
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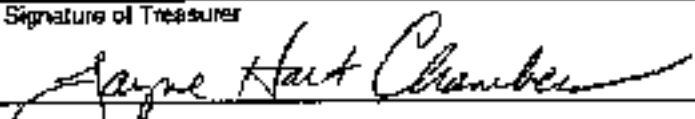
1. NAME OF COMMITTEE (in full) COLLEGE OF AMERICAN PATHOLOGISTS POLITICAL ACTION COMMITTEE		2. FEC IDENTIFICATION NUMBER C00274944
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1350 I STREET, NW SUITE 590		
CITY, STATE and ZIP CODE WASHINGTON, DC 20005		
3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)		

4. TYPE OF REPORT

- (a) April 15 Quarterly Report
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year End Report
 July 31 Mid Year Report (Non-election Year Only)
 Termination Report
- Monthly Report Due On:
 February 20 June 20 October 20
 March 20 July 20 November 20
 April 20 August 20 December 20
 May 20 September 20 January 31
- Twelfth day report preceding _____
(Type of Election)
election on _____ in the State of _____
- Thirtieth day report following the General Election on _____
in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 01/01/97 through 01/31/97			
6. (a)	Cash on Hand January 1, 1997		\$ 18,804.60
(b)	Cash on Hand at Beginning of Reporting Period	\$ 18,804.60	
(c)	Total Receipts (from Line 19)	\$ 35,320.00	\$ 35,320.00
(d)	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 54,124.60	\$ 54,124.60
7.	Total Disbursements (from Line 30)	\$ 20.27	\$ 20.27
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 54,104.33	\$ 54,104.33
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9630 Local 202-219-3420
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0	
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.			

Type or Print Name of Treasurer JAYNE HART CHAMBERS - ASSISTANT TREASURER	
Signature of Treasurer 	Date 02/12/97

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

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE		REPORT COVERING PERIOD	
COLLEGE OF AMERICAN PATHOLOGISTS POLITICAL ACTION COMMITTEE		FROM 01/01/97	TO 01/31/97
		COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts			
11.	Contributions (other than loans) From:		
a.	Individuals/Persons Other Than Political Committees		
i.	Itemized (use Schedule A)	18,850.00	18,850.00
ii.	Unitemized	16,470.00	16,470.00
iii.	Total (add i and ii) >	35,320.00	35,320.00
b.	Political Party Committees	0	0
c.	Other Political Committees (such as PACs)	0	0
d.	Total Contributions (add a iii, b and c) >	35,320.00	35,320.00
12.	Transfers From Affiliated/Other Party Committees	0	0
13.	All Loans Received	0	0
14.	Loan Repayments Received	0	0
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0	0
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees	0	0
17.	Other Federal Receipts (Dividends, Interest, etc.)	0	0
18.	Transfers from Nonfederal Account for Joint Activity	0	0
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	35,320.00	35,320.00
20.	Total Federal Receipts (subtract line 18 from line 19) >	35,320.00	35,320.00
II. Disbursements			
21.	Operating Expenditures:		
a.	Shared Federal/Non-Federal Activity (from Schedule H4)		
i.	Federal Share	0	0
ii.	Non-Federal Share	0	0
b.	Other Federal Operating Expenditures	20.27	20.27
c.	Total Operating Expenditures (add a i, a ii, and b) >	20.27	20.27
22.	Transfers to Affiliated/Other Party Committees	0	0
23.	Contributions to Federal Candidates/Committees and Other Political Committees	0	0
24.	Independent Expenditures (use Schedule E)	0	0
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0	0
26.	Loan Repayments Made	0	0
27.	Loans Made	0	0
28.	Refunds of Contributions To:		
a.	Individuals/Persons Other Than Political Committees	0	0
b.	Political Party Committees	0	0
c.	Other Political Committees (such as PACs)	0	0
d.	Total Contribution Refunds (add a, b and c) >	0	0
29.	Other Disbursements	0	0
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	20.27	20.27
31.	Total Federal Disbursements (subtract line 21 a ii from line 30) >	20.27	20.27
III. Net Contributions/Operating Expenditures			
32.	Total Contributions (other than loans)(from line 11d)	35,320.00	35,320.00
33.	Total Contribution Refunds (from line 28d)	0	0
34.	Net Contributions (other than loans)(subtract line 33 from 32)	35,320.00	35,320.00
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) >	20.27	20.27
36.	Offsets to Operating Expenditures (from line 15)	0	0
37.	Net Operating Expenditures (subtract line 36 from 35) >	20.27	20.27

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.

COLLEGE OF AMERICAN PATHOLOGISTS POLITICAL ACTION COMMITTEE

Name, mailing address, and zip code	Employer and occupation	Date	Amount
PAUL BACHNER 810 DELONG LEXINGTON, KY 40515	PATHOLOGIST UNIVERSITY OF KENTUCKY MEDICAL CENTER	01/13/97	1000.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		1000.00
N. BALASUBRAMANIAM ELLIS HOSPITAL SCHENECTADY, NY 12308	PATHOLOGIST ELLIS HOSPITAL	01/28/97	300.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		300.00
LAURENCE C. BERG 1836 SOUTH AVENUE LA CROSSE, WI 54650	PATHOLOGIST GUNDERSEN CLINIC	01/13/97	300.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		300.00
J.K. BILLMAN, JR. P.O. BOX 10337 MOLINE, IL 61266	PATHOLOGIST SELF-EMPLOYED	01/17/97	300.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		300.00
JOHN R. BRINEMAN 5501 COUNTRY CLUB BOULEVARD LITTLE ROCK, AR 72207	PATHOLOGIST PATHOLOGY ASSOCIATES	01/13/97	300.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		300.00
DESIREE CARLSON 73 BONAD ROAD WEST NEWTON, MA 02165	PATHOLOGIST CARLSON PATHOLOGY ASSOCIATES	01/13/97	500.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		500.00

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Name, mailing address, and zip code	Employer and occupation	Date	Amount
JACK F. CONSAMUS 5379 CROW CREEK ROAD BETTENDORF, IA 52722	PATHOLOGIST SELF-EMPLOYED	01/17/97	300.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		300.00
TERENCE J. CUDAHY 7802 HOLLY CREEK LANE INDIANAPOLIS, IN 46240	PATHOLOGIST COLAB	01/13/97	300.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		300.00
MICHAEL A. DECK 3700 SHANTARA LANE PLANO, TX 75093	PATHOLOGIST SELF-EMPLOYED	01/13/97	500.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		500.00
CRAIG A. DISE 42 NESTLING WOOD DRIVE LONG VALLEY, NJ 07853	PATHOLOGIST MORRISTOWN PATHOLOGY ASSOCIATES	01/13/97	300.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		300.00
KEVIN B. DOLE 35 HARTFORD STREET DOVER, MA 02030	PATHOLOGIST SELF-EMPLOYED	01/13/97	500.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		500.00
HAROLD F. DVORAK 27 MASON ROAD NEWTON CENTER, MA 02159	PATHOLOGIST BETH ISRAEL HOSPITAL	01/13/97	300.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		300.00

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Name, mailing address, and zip code	Employer and occupation	Date	Amount
EDWARD R. ECKERT 3102 ABOVE STRATFORD PLACE AUSTIN, TX 78746	PATHOLOGIST AUSTIN PATHOLOGY ASSOCIATES	01/13/97	2500.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		2500.00
GENE E. EWING 4509 HIGHLAND DRIVE DALLAS, TX 75205	PATHOLOGIST ST. PAUL HOSPITAL	01/17/97	300.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		300.00
KENNETH J. FRIEDMAN 1730 ELTON ROAD SILVER SPRING, MD 21042	PATHOLOGIST SELF-EMPLOYED	01/13/97	300.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		300.00
STEPHEN GELLER 8700 BEVERLY BOULEVARD LOS ANGELES, CA 90048	PATHOLOGIST CEDAR SINAI MEDICAL CENTER	01/13/97	250.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		250.00
JOSEPH GIAMMALVO 69 LONGFELLOW DRIVE LONGMEADOW, MA 01106	PATHOLOGIST SELF-EMPLOYED	01/13/97	300.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		300.00
DANIEL J. HANSON 5347 FARMINGTON ROAD TOLEDO, OH 43623	PATHOLOGIST MERCY HOSPITAL	01/16/97	1000.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		1000.00

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Name, mailing address, and zip code	Employer and occupation	Date	Amount
JOHN R. HARBOUR 6112 LAUREL VALLEY COURT FORT WORTH, TX 76132	PATHOLOGIST PATHOLOGY ASSOCIATES OF TEXAS	01/13/97	300.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		300.00
CAROL J. HECKMAN ONE RIVER POINTE PLAZA JEFFERSONVILLE, IN 47130	PATHOLOGIST CARITOS MEDICAL CENTER	01/13/97	300.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		300.00
RICHARD H. KELTY 3664 TWIN LAKE RIDGE WESTLAKE VILLAGE, CA 91361	PATHOLOGIST SELF-EMPLOYED	01/13/97	300.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		300.00
GLEN D. MASON 1819 BILTMORE STREET, NW WASHINGTON, DC 20009	GOV'T AFFAIRS DIRECTOR COLLEGE OF AMERICAN PATHOLOGISTS	01/13/97	250.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		250.00
FREDERICK MUSCHENHEIM 5257 OWERA POINT CAZENOVIA, NY 13035	PATHOLOGIST SELF-EMPLOYED	01/13/97	300.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		300.00
RICHARD L. MYEROWITZ 100 WARWICK DRIVE MONROEVILLE, PA 15146	PATHOLOGIST PENNSYLVANIA CYTOLOGY SERVICES	01/13/97	300.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		300.00

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Name, mailing address, and zip code	Employer and occupation	Date	Amount
STEPHEN A. OVANESSOFF 10276 EAST BELLA VISTA SCOTTSDALE, AZ 85258	PATHOLOGIST CLIN-PATH ASSOCIATES	01/17/97	300.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		300.00
DWIGHT K. OXLEY 1319 RUTLAND CIRCLE WICHITA, KS 67206	PATHOLOGIST WESLEY PATHOLOGY CONSULTANTS	01/13/97	1000.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		1000.00
JOSEPH PATLOVICH 283 FERRY LANDING DRIVE SANIBEL, FL 33957	PATHOLOGIST SELF-EMPLOYED	01/13/97	300.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		300.00
ALAN PIERCE 3200 HUNTER ROAD FORT LAUDERDALE, FL 33331	PATHOLOGIST SELF-EMPLOYED	01/28/97	250.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		250.00
POLIUS A. RASLAVICIUS 3 WILLIS LANE LYNNFIELD, MA 01940	PATHOLOGIST BOSTON REGIONAL MEDICAL CENTER	01/13/97	500.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		500.00
DENNIS D. REINKE 2336 ROLLING DRIVE BISMARCK, ND 58501	PATHOLOGIST MEDCENTER ONE HEALTH SYSTEMS	01/17/97	300.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		300.00

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Name, mailing address, and zip code	Employer and occupation	Date	Amount
GARRY F. RUST 2003 WIND CREEK KINGWOOD, TX 77345	PATHOLOGIST NORTHEAST MEDICAL CENTER HOSPITAL	01/17/97	1000.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		1000.00
AHMED SAYEED P.O. BOX 840865 HOUSTON, TX 77284	PATHOLOGIST SELF-EMPLOYED	01/13/97	300.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		300.00
HOYLE E. SETZER P.O. BOX 1217 BILLINGS, MT 59103	PATHOLOGIST PATHOLOGY CONSULTANTS	01/13/97	300.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		300.00
CHARLES E. SLONAKER, III 14672 SOUTH COUNTRYWOOD DRIVE GULFPORT, MS 39503	PATHOLOGIST SELF-EMPLOYED	01/13/97	500.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		500.00
MARK S. SYNOVEC 5420 SOUTHWEST VORSE ROAD AUBURN, KS 66402	PATHOLOGIST TOPEKA PATHOLOGY	01/28/97	300.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		300.00
PAULA E. SZYPKO 1401 THORNHILL LANE WINSTON-SALEM, NC 27106	PATHOLOGIST NORTH STATE PATHOLOGY ASSOCIATES	01/17/97	300.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		300.00

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COLLEGE OF AMERICAN PATHOLOGISTS POLITICAL ACTION COMMITTEE

Name, mailing address, and zip code	Employer and occupation	Date	Amount
ELIZABETH W. VARSA 5216 SANDY RIVER COVE PORT WAYNE, IN 46804	PATHOLOGIST FAIRFIELD PATHOLOGISTS	01/13/97	500.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		500.00
ARTHUR M. VOGEL 1515 18TH AVENUE EAST SEATTLE, WA 98112	PATHOLOGIST CYTO LAB	01/17/97	300.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		300.00
GORDON V. WEBB 8093 SOUTH GRAPE COURT LITTLETON, CO 80122	PATHOLOGIST PORTER MEMORIAL HOSPITAL	01/13/97	300.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		300.00
CARL D. WINBERG 1764 VISTA DEL VALLE ARCADIA, CA 91006	PATHOLOGIST SELF-EMPLOYED	01/13/97	300.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		300.00
THOMAS P. WOOD 3114-A MIDDLEBROOK CIRCLE TALLAHASSEE, FL 32312	PATHOLOGIST SELF-EMPLOYED	01/17/97	500.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		500.00
RAYMOND C. ZASTROW 504 PONDEROSA DRIVE HARTLAND, WI 53029	PATHOLOGIST ST. MICHAEL HOSPITAL	01/13/97	300.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		300.00

TOTAL ITEMIZED LINE 11a

18850.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 21b

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NAME OF COMMITTEE (In Full)

COLLEGE OF AMERICAN PATHOLOGISTS POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Crestar Bank 1455 New York Avenue, NW Washington, DC 20005	Bank charge Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/02/97	20.27
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

20.27

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

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

Hand Delivered

DATE OF RECEIPT

2-14-97

First Class Mail

POSTMARKED

Registered/Certified Mail

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No Postmark

Postmark Illegible

Received from the House Office of Records
and Registration

DATE OF RECEIPT

Received from the Senate Office of Public
Records

DATE OF RECEIPT

Other (Specify):

POSTMARKED

and/or DATE OF RECEIPT

JMN
PREPARER

2-14-97
DATE PREPARED