FEC FORM 3X	AN	ID DISE	OF REC BURSEN An Authoriz	IENTS	ee		Office Use Only	
1. NAME OF COMMITTEE (in ful		FEC MAILING		xample:If typing ver the lines	, type			
College of American	Pathologists F	Political Action (	Committee					
ADDRESS (number and s	treet)	350 I Street, NV	<b>V</b>					
Check if differe than previously reported. (ACC	nt L	uite 590             /ashington 					20005	
2. FEC IDENTIFICAT	ON NUMBER	¥	CITY 🛋		S	STATE	ZIPCOD	E 🔺
C00274944			3. IS THIS REPOF		NEW N) <b>OR</b>	AI (A	MENDED	
July 15 Quarterly October 1 Quarterly January 3	rts: Report(Q1) Report(Q2) 5 Report(Q3) 1	(b) Monthly Report Due On: (c) 12-Day PRE-E Report	lection for the:	3)		Sep		Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE) Runoff (12R)
July 31 Mi Report(No Year Only Terminatio (TER)	n-election ) (MY)		Election on Election for the: Election on	General (300	à)	Runoff (	30R) in the State of	Special (30S)
5. Covering Period	02	01 2	2006	through	02	28	2006	
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 Dr. Alfred Wray Campbell Dr. Alfred Wray Campbell								
Signature of Treasurer       Electronically Filed by       Dr. Alfred Wray Campbell       Date       0.3       2.0       2.0 0.6								
NOTE : Submission of fa	alse, erroneous	, or incomplete	information may	subject the pers	on signing this	s Report to the	e penalties of 2 U.S	i.C 437g.
Office Use Only							(Rev. 02/200	

Image#	26920018099
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## SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name College of American Pathologists Political Action Committee MM D D Y W м м D D Y 02 02 28 01 2006 2006 Report Covering the Period: From: To: **COLUMN A** COLUMN B **This Period** Calendar Year-to-Date (a) Cash on Hand 6. 2006 46180.02 January 1 (b) Cash on Hand at 47254.08 Begining of Reporting Period ..... 11909.00 33749.00 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 59163.08 79929.02 6(a) and 6(c) for Column B) ..... 25680.54 46446.48 7. Total Disbursements (from Line 31) ..... Cash on Hand at Close of 8. **Reporting Period** 33482.54 33482.54 (subtract Line 7 from Line 6(d)) ..... 9. Debts and Obligations owed то the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations owed ΒY the committee (Itemize all on 0.00 Schedule C and/or Schedule D) .....

X 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

### Image# 26920018100

DETAILED SUMMARY PAGE OF RECEIPTS FEC Form 3X (Rev. 02/2003) Page 3 Write or Type Committee Name College of American Pathologists Political Action Committee <sup>м</sup> 2<sup>м</sup> <sup>D</sup>0<sup>D</sup>1 2006<sup>Y</sup> <sup>м</sup> 2<sup>м</sup> <sup>D</sup> 2<sup>D</sup> 8 ž 0 0 6 Y From: To Report Covering the Period: 

			0.00	
			0.00	
			0.00	

			0.00
			0.00
			0.00

		 _	0.00
			0.00
			0.00

	 33749.00
	22740.00

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1. Co (a	,		
	Than Political Committees (i) Itemized (use Schedule A)	8850.00	24825.00
	(ii) Unitemized	3059.00	8924.00
	(iii) TOTAL (add Lines 11(a)(i) and (ii) 🅨	11909.00	33749.00
(b	) Political Party Committees	0.00	0.00
(c (d	(such as PACs)	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	11909.00	33749.00
	ransfers From Affiliated/Other arty Committees	0.00	0.00
3. AI	I Loans Received	0.00	0.00
	pan Repayments Received ffsets To Operating Expenditures	0.00	0.00
(C	Refunds, Rebates, etc.) Carry Totals to Line 37, page 5) efunds of Contributions Made	0.00	0.00
to	Federal candidates and Other olitical Committees	0.00	0.00
	ther Federal Receipts Dividends, Interest, etc.)	0.00	0.00
	ransfers from Non-Federal and Levin Funds		
(8	a) Non-Federal Account (from Schedule H3)	0.00	0.0
(k	o) Levin Funds (from Schedule H5)	0.00	0.0
(c	c) Total Transfer (add 18(a) and 18(b)).	0.00	0.0
	otal Receipts (add Lines 11(d), 2, 13, 14, 15, 16, 17, and 18(c))	11909.00	33749.0
	otal Federal Receipts ubtract Line 18(c) from Line 19)	11909.00	33749.0

Image# 26920018101

### **DETAILED SUMMARY PAGE**

FEC Form 3X (Rev. 02/2003)	of Disbursements Pag				
II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date			
Operating Expenditures:		0.00			
(i) Federal Share					
(ii) Non-Federal Share	0.00	0.00			
(b) Other Federal Operating Expenditures	180.54	446.48			
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	180.54	446.48			
Transfers to Affiliated/Other Party					
Committees Contributions to	0.00	0.00			
and Other Political Committees	25500.00	46000.00			
(use Schedule E)	0.00	0.00			
Committees (2 U.S.C. 441a(d))	0.00	0.00			
Loan Repayments Made	0.00	0.00			
oans Made	0.00	0.00			
Refunds of Contributions To: (a) Individuals/Persons Other		0.00			
Than Political Committees					
(b) Political Party Committees	0.00	0.00			
(such as PACs)	0.00	0.00			
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) >	0.00	0.00			
	0.00	0.00			
(a) Shared Federal Election Activity					
	0.00	0.0			
Γ	0.00	0.0			
With Federal Funds	0.00	0.0			
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.0			
Total Disbursements (add Lines 21(c), 22,					
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	25680.54	46446.4			
Total Federal Disbursements					
(subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)	25680.54	46446.4			
	II. DISBURSEMENTS         Deperating Expenditures:         a) Shared Federal/Non-Federal Activity (from Schedule H4)         (i) Federal Share	IL DISBURSEMENTS       COLUMN A Total This Period         Operating Expenditures: a) Shared Federal/Non-Federal Activity (from Schedule H4) (i) Federal Share			

### Image# 26920018102

# DETAILED SUMMARY PAGE

	FEC Form 3X (Rev. 02/2003)	of Disbursements	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)	11909.00	33749.00
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	11909.00	33749.00
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	180.54	446.48
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	180.54	446.48

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 6 / 18         (check only one)       X         X       11a       11b       11c       12
Ar	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	not be sold or used by any perso	13     14     15     16     17       on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
$\rangle$	College of American Pathologists Politica	al Action (	Committee	
Α.	Full Name (Last, First, Middle Initial) W. David Bernard, Dr.	Date of Receipt		
	Mailing Address Department of Pathology 6565 Fannin	,		02 09 Y Y Y Y 02 09 2006
	City	State	Zip Code	Transaction ID: SA11A1.19822
	Houston	TX	77030-7030	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer The Methodist Hospital	Occupation Patholog		
	Receipt For:	•	Year-to-Date V	_
	Primary     General       Other (specify) ▼	0 0	250.00	]
в.	Full Name (Last, First, Middle Initial) B. Brett Cantrell, Dr.			Date of Receipt
	Mailing Address Pathology Department 1800 Barrs St.			M M M / D D / Y Y Y Y 02 / 17 / 2006
	City	State	Zip Code	Transaction ID: SA11A1.19850
		FL	32204	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer St. Vincent's Med Ctr	Occupation Patholog		
	Receipt For:	Aggregate	Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	0 0	250.00	]
<u>с.</u>	Full Name (Last, First, Middle Initial) MacKinnon James Crawford, Dr.			Date of Receipt
	Mailing Address Dept of Pathology PO Box 100275 Rm M64	9 JHMHC		M M / D D / Y Y Y Y Y 02 14 2006
	City	State	Zip Code	Transaction ID: SA11A1.19844
	Gainesville	<u>FL</u>	32610-0275	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1750.00
	Name of Employer Univ of Florida	Occupation Patholog		
	Receipt For:	Aggregate	Year-to-Date V	
	Primary     General       Other (specify) ▼	0 0	1750.00	]
s	JBTOTAL of Receipts This Page (optional)			2250.00
Т	OTAL This Period (last page this line number on	ly)	·····	

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 7 / 18 (check only one)				
ITEMIZED RECEIPTS			or each category of the	$\overline{X}$ 11a 11b 11c 12				
			Detailed Summary Page					
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	v 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.				
	NAME OF COMMITTEE (In Full)							
$\rangle$	College of American Pathologists Politic	al Action (	Committee					
Α.	Full Name (Last, First, Middle Initial) J. Cameron Hall			Date of Receipt				
	Mailing Address 6046 Knight Arnold Rd Suite 101			0 2 / D D / Y Y Y Y 0 2 0 5 / 2 0 0 6				
	City	State	Zip Code	Transaction ID: SA11A1.19808				
	Memphis	TN	38115	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		500.00				
	Name of Employer Trumbull Laboratories, LLC	Occupation Patholog						
	Receipt For:	- ·	Year-to-Date ▼					
	Primary General Other (specify) ▼	0 0	500.00	]				
в.	Full Name (Last, First, Middle Initial) W. Howard Hoffman			Date of Receipt				
	Mailing Address Associated Pathologists 4230 Burnham Ave	02 / D D / Y Y Y Y 02 / 08 2006						
	City	State	Zip Code	Transaction ID: SA11A1.19817				
	Las Vegas	NV	89119-5410	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		2500.00				
	Name of Employer Quest Diagnostics Incorpo- rated	Occupation Patholog						
	Receipt For:	Aggregate	e Year-to-Date 🔻					
	Primary     General       Other (specify) ▼	0 0	2500.00	]				
<u></u>	Full Name (Last, First, Middle Initial) T. Michael Kafka, Dr.			Date of Receipt				
	Mailing Address Department of Pathology 2720 Stone Park Blvd	/		0 2 1 4 2 0 0 6				
	City	State	Zip Code	Transaction ID: SA11A1.19846				
	Sioux City	IA	51104	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		500.00				
	Name of Employer St. Luke's Reg Med Ctr	Occupation Patholog						
	Receipt For:	Aggregate	e Year-to-Date 🔻					
	Other (specify)	0 0	500.00	]				
s	UBTOTAL of Receipts This Page (optional)		······	3500.00				
	OTAL This Period (last page this line number or							

S	CHEDULE A (FEC Form 3X)		Use separate sched	lule(s)	FOR LINE NUMBER: PAGE 8 / 18 (check only one)				
ITEMIZED RECEIPTS		or each category of the			X 11a 11b 11c 12				
			Detailed Summary F	age					
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	y not be sold or used by dress of any political co	any person mmittee to so	for the purpose of soliciting contributions plicit contributions from such committee.				
$\sum$	NAME OF COMMITTEE (In Full)								
$\geq$	College of American Pathologists Politi	cal Action (	Committee						
Α.	Full Name (Last, First, Middle Initial) E John Maxwell, Dr.				Date of Receipt				
	Mailing Address 109 Circle Dr				02 / 07 / Y Y Y Y 2006				
	City	State	Zip Code		Transaction ID: SA11A1.19814				
	West Monroe	LA	71291-5303		Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C			500.00				
	Name of Employer Bayou Pathology, APMC	Occupation Patholog							
	Receipt For:		e Year-to-Date 🔻						
	Primary General		5	00.00					
	Other (specify) 🔻	0 0		0.00					
в.	Full Name (Last, First, Middle Initial) Saeid Movahedi-Lankarani								
	Mailing Address Div of Gynecologic Path 401 N Broadway				0 2 / D D / Y Y Y Y 1 1 / 2 0 0 6				
	City	State	Zip Code		Transaction ID: SA11A1.19837				
	Baltimore	MD	21231		Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C			250.00				
	Name of Employer Johns Hopkins Hospital	Occupation Patholog							
	Receipt For:	Aggregate	e Year-to-Date 🔻						
	Primary General		2!	50.00					
	Other (specify) 🔻	0 0							
C.	Full Name (Last, First, Middle Initial) Joseph James Navin, Dr.				Date of Receipt				
	Mailing Address 5287 Poola Street				0 2 / D D / Y Y Y Y 2 0 0 6				
	City	State	Zip Code		Transaction ID: SA11A1.19831				
	Honolulu	HI	96821	_	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C			500.00				
	Name of Employer Straub Clinic & Hosp	Occupation Patholog							
	Receipt For:	Aggregate	e Year-to-Date 🔻						
	Primary General Other (specify) ▼	0 0	100	00.00					
Г					1250.00				
s	UBTOTAL of Receipts This Page (optional)			••••• •	1250.00				
т	OTAL This Period (last page this line number o	only)		🕨					

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		tements may	Use separate schedule(s) or each category of the Detailed Summary Page y not be sold or used by any perso	FOR LINE NUMBER:       PAGE 9 / 18         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17         on for the purpose of soliciting contributions
	nmercial purposes, other than using the n E OF COMMITTEE (In Full) oge of American Pathologists Politic			solicit contributions from such committee.
A. Joseph Mailin City Honc FEC I	ame (Last, First, Middle Initial) h James Navin, Dr. g Address 5287 Poola Street blulu D number of contributing al political committee.	State HI	Zip Code 96821	Date of Receipt Date of Receipt D 2 / 2 4 / 2 0 0 6 Transaction ID: SA11A1.19859 Amount of Each Receipt this Period 500.00
Straul Recei	of Employer o Clinic & Hosp pt For: Primary General Other (specify) <b>v</b>	Occupation Patholog Aggregate		]
B. E. Rot Mailin City Oakv FEC I federa Name Ameri	pt For: Primary General	State OH Occupation Patholog Aggregate		Date of Receipt
C. Full N E. Cha Mailin City Pass FEC I federa Name Garde	Other (specify) ▼ ame (Last, First, Middle Initial) arles Slonaker, Dr. g Address 24410 Oaklawn Plantation Christian D number of contributing al political committee. of Employer en Park Medical Center pt For: Primary General Other (specify) ▼	State MS C Occupation Patholog	Zip Code 39571	Date of Receipt 0 2 / 1 0 / 2 0 0 6 Transaction ID: SA11A1.19835 Amount of Each Receipt this Period 1000.00
	TAL of Receipts This Page (optional) This Period (last page this line number or			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 10 / 18         (check only one)       Image: state s						
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may not be sold or used by any person name and address of any political committee to su	for the purpose of soliciting contributions olicit contributions from such committee.						
NAME OF COMMITTEE (In Full)								
College of American Pathologists Politi	cal Action Committee							
Full Name (Last, First, Middle Initial) <b>A.</b> D. Charles Sturgis, Dr.		Date of Receipt						
Mailing Address 809 W Buena Ave #1E		0 2 1 3 Y Y Y Y Y 0 2 0 0 6						
City	State Zip Code	Transaction ID: SA11A1.19843						
Chicago	IL 60613-1611	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	<b>C</b>	100.00						
Name of Employer Evanston Northwestern Hlt- hcare	Occupation Pathologist							
Receipt For:	Aggregate Year-to-Date ▼							
Other (specify)	355.00							

SUBTOTAL of Receipts This Page (optional)	►	100.00
TOTAL This Period (last page this line number only)	►	8850.00

S	CHEDULE B (FEC Form 3X)	Use seperate sch		FOR LIN	NE NUMBER: PAGE 11 only one)						11 / 1	/ 18	
IT	EMIZED DISBURSEMENTS	for each category Detailed Summa		1.5	X 21b 27		) 2 [ 8a ]		23 28b	24 28c	П	25 29	26 30b
	y Information copied from such Reports and Statem for commercial purposes, other than using the name												5
	NAME OF COMMITTEE (In Full)		, here er										
$\langle \rangle$	College of American Pathologists Political	Action Committe	e										
Α.	Full Name (Last, First, Middle Initial) Sun Trust Bank									SB21B ement	.1989	93	
	Mailing Address PO Box 85024					(	) 2 ∖	И /	<sup>D</sup> 0	<sup>D</sup> 2	Ý Ž	0 ð 6	Y
	Richmond	State Zip Co VA 2328	ode 5-5024			A	mour	nt of	Each	Disburse	ement		
	Purpose of Disbursement Merchant service fee		[							<u> </u>		15.8	36
	Candidate Name	ment For:			egory/ ype								
	Senate President		General										
	State: District:												
В.	Full Name (Last, First, Middle Initial) Sun Trust Bank					D		f Dis	burse	SB21B			Y
	Mailing Address PO Box 85024						ຶ 2 ື		0	<b>6</b> /		0 ð 6	
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C.	Full Name (Last, First, Middle Initial) Sun Trust Bank					D	ate o	f Dis	burse	SB21B ement			_
	Mailing Address PO Box 85024					(	<sup>™</sup> 2 <sup>™</sup>	И /	<sup>D</sup> 1	<b>6</b> /	Ý Ž	0 ð 6	Y
		State Zip Co VA 2328	ode 5-5024			A	mour	nt of	Each	Disburse	ement		
	Purpose of Disbursement Harland check order charge											22.6	8
	Candidate Name				tegory/ ype								
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						Γ					1	130.0	4
	UBTOTAL of Disbursements This Page (optional) .							•				130.0	
Ľ	<b>OTAL</b> This Period (last page this line number only)				🕨	L						130.0	

SCHEDULE B (FEC Form 3X)		Use seperate schedule(s)					LINE NUMBER: PAGE 1 ck only one)						12 / 1	2 / 18		
IT	EMIZED DISBURSEMENTS	for each categ Detailed Sumr						22 28a		23 28b	24 28c	$\square$	25 29	26 30b		
	y Information copied from such Reports and Statem for commercial purposes, other than using the name													s		
<u>,</u>	NAME OF COMMITTEE (In Full)															
$\langle \rangle$	College of American Pathologists Political	Action Commi	ttee													
<u>к</u> .	Full Name (Last, First, Middle Initial) Burgess for Congress										SB23.1	988	5			
								Date o			B /	Y Y	o ò e	Y		
	Mailing Address P.O. Box 2334							02		2	8	. 2	006			
	,		Code 202					Amou	nt of	Each	Disburs	emen	t this F	Period		
	Purpose of Disbursement					-	_					1	000.0	00		
	Candidate Name			Ca	ater	jory/										
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	°	ment For: Primary	2006 General													
	President	Other (specify)	▼													
	State: District: Full Name (Last, First, Middle Initial)						<u> </u>	Trono			<u>6000 1</u>	007	4			
В.	CONGRESSMAN BILL YOUNG CAMPAIG	N COMMITTE	E					Date of			SB23.1 ement	987	I			
	Mailing Address P. O. Box 47025							0 2	M /	<sup>D</sup> 2	<b>8</b> /	Ý Ž	o ò e	5 <sup>Y</sup>		
			Code					Amou	nt of	Each	Disburse	emen	t this F	Period		
	St. Petersburg Purpose of Disbursement	FL 33	743	_	-		_					1	000.0	00		
	Candidate Name			Ca	ateg	jory/										
	Office Sought: X House Disburse	ment For:	2006		Тур	e	_									
	Senate X	Primary	General													
	State: FL District: 10	Other (specify)	▼													
C.	Full Name (Last, First, Middle Initial) CULBERSON FOR CONGRESS							<b>Trans</b> Date c			SB23.1 ement	986	7			
	Mailing Address P.O. Box 41964							0 <sup>M</sup> 2	M /	<sup>D</sup> 2	<b>8</b> /	Ý 2	o ò e	5 <sup>Y</sup>		
			Code 241					Amou	nt of	Each	Disburs	emen	t this F	Period		
	Purpose of Disbursement				-			L.				1	000.0	00		
	Candidate Name				ateg Typ	jory/ e										
	Senate X President	ment For: Primary Other (specify)	2006 General ▼													
_	State: TX District: 07								-							
s	UBTOTAL of Disbursements This Page (optional) .					►		L.				3	000.0	00		
т	OTAL This Period (last page this line number only)					►										
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SCHEDULE B (FEC Form 3X) Use seperate schedule(s) FOR LINE NUMBER:				P	AGE	13 / 1	18								
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page			21b 27			Х	23 28b	,	24 28c	F	25 29		26 30
	y Information copied from such Reports and Statem for commercial purposes, other than using the name													S	
	NAME OF COMMITTEE (In Full)	, , , , , , , , , , , , , , , , , , ,								-					
$\langle \rangle$	College of American Pathologists Political	Action Committee													
Α.	Full Name (Last, First, Middle Initial) ERIC PAC						Date o		-	rsen				Y	
	Mailing Address 209 Pennsylvania Ave. SE						02		L	28	3	2	0 Å 6	;	
	,	StateZip CodeDC20003					Amou	nt o	f Ea	ch D	isburs	emer	it this F	Perioc	1
	Purpose of Disbursement PAC Contribution		Γ	0			L.					2	2500.0	00	
	Candidate Name				gory/ pe										
	Senate President X	ment For: 2006 Primary General Other (specify) ▼													
	State: District: Other														
В.	Full Name (Last, First, Middle Initial) Feeney for Congress						Date o	of D	isbu	rsen			-		
	Mailing Address P.O. Box 2776						0 <sup>™</sup> 2	М	/ [	28	3	Ý 2	2 0 Ŏ 6	; Y	
		State Zip Code VA 22202					Amou	nt o	fEa	ch D	isburs	emer	it this F	Period	ł
	Purpose of Disbursement		Γ	v			L.						1000.0	00	
	Candidate Name				gory/ pe										
	5 <u>X</u>	ement For: 2006 Primary General Other (specify) ▼													
	State: FL District: 24	_													
C.	Full Name (Last, First, Middle Initial) FRIENDS OF CRAIG THOMAS						Trans Date o		isbu	rsen		1987	8		
	Mailing Address 2780 OLIVE DR						0 2	М	/	28	<b>3</b> /	Ý 2	2 0 Å 6	; Y	
		State Zip Code WY 82001					Amou	nt o	fEa	ch D	isburs	emer	it this F	Perioc	ł
	Purpose of Disbursement		Γ	0			L.						1000.0	00	_
	Candidate Name				gory/ pe										
	<b>°</b>	ement For: 2006 Primary General Other (specify) ▼													
<u> </u>								-		-	• •	1	500.0	0	7
s	<b>UBTOTAL</b> of Disbursements This Page (optional) .				<u> </u>			0				4	500.0	.0	╡
Т	<b>OTAL</b> This Period (last page this line number only)				•		L.								

S	CHEDULE B (FEC Form 3X)		FOR LINE	E NUMBER: PAGE 14 / 18							
ITEMIZED DISBURSEMENTS		Use seperate schedule(s) for each category of the	(check only								
		Detailed Summary Page	21b 27	22         X         23         24         25         26           28a         28b         28c         29         30b							
	y Information copied from such Reports and Statem for commercial purposes, other than using the name										
	NAME OF COMMITTEE (In Full)	· · · · · · · · · · · · · · · · · · ·									
$\langle \rangle$	College of American Pathologists Political	Action Committee									
Α.	Full Name (Last, First, Middle Initial) Friends of Mark Foley			Transaction ID: SB23.19879							
	·			Date of Disbursement 0 2 / 2 8 / 2 0 0 6							
	Mailing Address PO Box 30505			02 28 2006							
	, , , , , , , , , , , , , , , , , , ,	State Zip Code FL 33410		Amount of Each Disbursement this Period							
	Purpose of Disbursement	12 33410		500.00							
	Candidate Name		Category/ Type								
	-	ement For: 2006									
	Senate X President	Primary General Other (specify)									
	State: FL District: 16										
_	Full Name (Last, First, Middle Initial)			Transaction ID: SB23.19880							
В.	Friends of Mark Foley			Date of Disbursement							
	Mailing Address PO Box 30505			$ \begin{bmatrix} M & M \\ 0 & 2 \end{bmatrix} / \begin{bmatrix} D & D \\ 2 & 8 \end{bmatrix} / \begin{bmatrix} Y & Y & Y \\ 2 & 0 & 0 \end{bmatrix} $							
		State Zip Code FL 33410		Amount of Each Disbursement this Period							
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	Office Sought: X House Disburse Senate President	ement For: 2006 Primary X General Other (specify) ▼									
	State: FL District: 16										
C.	Full Name (Last, First, Middle Initial) FRIENDS OF MAX BAUCUS			Transaction ID: SB23.19877 Date of Disbursement							
	Mailing Address PO BOX 586			$ \begin{bmatrix} M & M \\ 0 & 2 \end{bmatrix} $ $ \begin{bmatrix} D & D \\ 2 & 8 \end{bmatrix} $ $ \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{bmatrix} $							
		State Zip Code MT 59624		Amount of Each Disbursement this Period							
	Purpose of Disbursement			2000.00							
	Candidate Name		Category/ Type								
		ement For: 2006 Primary General Other (specify)									
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50	CHEDULE B (FEC Form 3X)	Use seperate schedule(s	)			R LINE NUMBER: PAGE 15						15 /	/ 18		
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	,				22 28a	X	23 28b	24	,	25 29	26 30		
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$\langle \rangle$	College of American Pathologists Political	Action Committee													
Α.	Full Name (Last, First, Middle Initial) GINGREY FOR CONGRESS						Trans Date of		-	SB23. ement	1988	81			
	Mailing Address PO Box U						0 <sup>M</sup> 2	M	۵2	<b>8</b> /	Y 2	źoóe	6 <sup>°</sup>		
		State Zip Code GA 30060					Amou	nt of	Each	Disburs	semer	nt this I	Period		
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	Candidate Name		С		egory/ /pe										
	Senate X President	ment For: 2006 Primary General Other (specify) ▼	<u>I</u>												
	State: GA District: 11					_									
В.	Full Name (Last, First, Middle Initial) Hastert for Congress						Date	of Di	sburse	SB23. ement		_	X		
	Mailing Address P.O. Box 625						0 2	M	□2	8 <sup>D</sup> /	Ý 2	źoòe	3 <sup>°</sup>		
		State Zip Code IL 60510					Amou	nt of	Each	Disburs					
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C.	Full Name (Last, First, Middle Initial) HOYER FOR CONGRESS						Date		sburse	SB23. ement	1988	33			
	Mailing Address 7905 MALCOLM ROAD S	SUITE 102					0 <sup>M</sup> 2	M	□2	8 <sup>D</sup> /	Ý 2	źoòe	3 <sup>°</sup>		
		State Zip Code MD 20735					Amou	nt of	Each	Disburs					
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	5 <u>X</u>	ment For: 2006 Primary General Other (specify) ▼													
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SCHEDULE B (FEC Form 3X)		Use seperate schedule(s)			OR LIN			R:		PAGE 16/18				
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	NAME OF COMMITTEE (In Full)		0011					ibuti			00111			
$\langle \rangle$	College of American Pathologists Political	Action Committee												
Α.	Full Name (Last, First, Middle Initial) HULSHOF FOR CONGRESS						Trans Date of			SB23. ement	1988	4		
	Mailing Address Post Office Box 1621						0 <sup>M</sup> 2	M	□2	<b>8</b> <sup>7</sup>	² ż	éoòe	S <sup>Y</sup>	
	,	State Zip Code MO 65010					Amou	nt of	Each	Disburs	emer	nt this I	Period	
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В.	Full Name (Last, First, Middle Initial) PAULA HOLLINGER FOR CONGRESS						Date	of Di	sburse				X	
	Mailing Address PO BOX 5861						0 2	M	□2	<b>8</b> <sup>7</sup>	Ż	έοŏε	3 <sup>°</sup>	
		State Zip Code MD 21282					Amou	nt of	Each	Disburs	-			
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C.	Full Name (Last, First, Middle Initial) PETE STARK RE-ELECTION COMMITTE	E					Date	of Di	sburse					
	Mailing Address PO BOX 8331						0 <sup>M</sup> 2	M	<sup>D</sup> 0	B /	ž	έοŏe	3 <sup>°</sup>	
		State Zip Code CA 94537					Amou	nt of	Each	Disburs		-		
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ITEMIZED DISBURSEMENTS       Ior each category of the Dataled Summary Page       [Disbursements may not be sold or used by any person for the purpose of solicaling cont or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such com or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such com NAME OF COMMITTEE (in Full)         College of American Pathologists Political Action Committee       Transaction ID: SB23.1980         Full Name (Last, First, Middle Initial)       Transaction ID: SB23.1980         Are price for Congress       [Disbursement for: 	SCHEDULE B (FEC Form 3X)		Use sepe				INE NUMBER: PAGE 1						= 17/	7 / 18	
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such com         NAME OF COMMITTEE (in Full)         College of American Pathologists Political Action Committee         Full Name (Last, First, Middle Initial)         A Price for Congress         Malling Address       P.O. Box 425         City       State       Zip Code         Roswell       GA       30077         Purpose of Disbursement       Category/         Candidate Name       Disbursement For:       2006         Y President       Disbursement For:       2006         State: GA       Disbursement For:       2006         Purpose of Disbursement       Category/       Y         Maling Address       733 - 42nd Street NW       Transaction ID: SB23.1980         Date of Disbursement       Disbursement For:       2006         City       State       Zip Code         Candidate Name       Category/       Y         Office Sought:       House       Disbursement For:       2006         City       Senate       Disbursement For:       2006         Category       Type       Other (specify)       Transaction ID: SB23.1980         Date of Disbursement       Category <t< th=""><th>ITEMIZED DIS</th><th>BURSEMENTS</th><th></th><th></th><th></th><th colspan="2">21b</th><th></th><th>22</th><th></th><th></th><th></th><th></th><th>25 29</th><th>26 30b</th></t<>	ITEMIZED DIS	BURSEMENTS				21b			22					25 29	26 30b
NAME OF COMMITTEE (in Full)         College of American Pathologists Political Action Committee         Full Name (Last, First, Middle Initial)         A.         Price for Congress         Malling Address       P.O. Box 425         City       State         Category/ Purpose of Disbursement         Candidate Name       Category/ Purpose of Disbursement         Candidate Name       Disbursement For: President         State: GA       District: 6         Full Name (Last, First, Middle Initial)       Transaction ID: SB23.1980 Date of Disbursement         Mailing Address       733 - 42nd Street NW         City       State: OH         Disbursement       Other (spacify)         Category/ Type       Transaction ID: SB23.1980 Date of Disbursement         Mailing Address       733 - 42nd Street NW         City       State       Zip Code OH 44709         Purpose of Disbursement       Category/ Type         Office Sought:       X House       Disbursement For: President         State: OH       District: 16         Full Name (Last, First, Middle Initial)       Transaction ID: SB23.1980         Category/ Type       Other (spacify)       Transaction ID: SB23.1980         Disbursement For:       2006      S															s
College of American Pathologists Political Action Committee         Full Name (Last, First, Middle Initial)         Price for Congress         Mailing Address       P.O. Box 425         City       State         Roswell       GA         Candidate Name       Gategory'         Office Sought:       X         House       Disbursement For:         Candidate Name       Category'         Office Sought:       X         House       Disbursement For:         State:       GA         B.       REGULA FOR CONGRESS COMMITTEE         Mailing Address       733 - 42nd Street NW         City       State         Candidate Name       Category'         Viter (specify)       V         B.       REGULA FOR CONGRESS COMMITTEE         Mailing Address       733 - 42nd Street NW         City       State         Candidate Name       Category'         Other (specify)       V         Office Sought:       X         President       Senate         President       Senate         President       Senate         President       Senate         President       Senate     <					com			501101		ibuti	0113 11	om su			
A.       Price for Congress         Mailing Address       P.O. Box 425         City       State       Zip Code         Roswell       GA       30077         Purpose of Disbursement       Category/         Candidate Name       Disbursement For:       2006         President       Disbursement For:       2006         President       Disbursement For:       2006         President       Other (specify) ▼       State: CA         Mailing Address       733 - 42nd Street NW       Transaction ID: SB23.1980         City       State       Zip Code         City       State       Zip Code         City       State       Zip Code         Category/       Type       Other (specify) ▼         Office Sought:       House       Disbursement For:       2006         Senate       President       Other (specify) ▼       Transaction ID: SB23.1980         Disbursement       Category/       Type       Other (specify) ▼         Office Sought:       House       Disbursement For:       2006         Senate       President       Other (specify) ▼       Transaction ID: SB23.1980         Date of Disbursement       Category/       Y 2 8 / Y       Y		. ,	Action Co	mmittee											
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Senate       President         State: GA       District: 6         Full Name (Last, First, Middle Initial)       Transaction ID: SB23.1980         Mailing Address       733 - 42nd Street NW         City       State         Candidate Name       OH         Purpose of Disbursement       OH         Candidate Name       Disbursement For:         Office Sought:       X         Y       Note of Disbursement         Office Sought:       X         House       Disbursement For:         Other (specify)       Transaction ID: SB23.1980         Date of Disbursement       Category/         Type       Disbursement For:         Office Sought:       X         House       Disbursement For:         Other (specify)       Transaction ID: SB23.1980         Date of Disbursement       Disbursement         Mailing Address       P.O. Box 27         City       State       Zip Code         Holidaysburg       PA       16648         Purpose of Disbursement       Category/         Type       Disbursement For:       2006         City       Senate       Disbursement For:       2006         Office Sought:	Candidate Name														
Full Name (Last, First, Middle Initial)       Transaction ID: SB23.198/d Date of Disbursement         Mailing Address       733 - 42nd Street NW         City       State       Zip Code         Canton       OH       44709         Purpose of Disbursement       Category/         Office Sought:       X       House         State: OH       Disbursement For:       2006         State: OH       District: 16       Transaction ID: SB23.198/d Date of Disbursement         Mailing Address       P.O. Box 27       City         City       State       Zip Code         Mailing Address       P.O. Box 27       City         City       State       Zip Code         Mailing Address       P.O. Box 27       City         City       State       Zip Code         Mailing Address       P.O. Box 27       City         City       State       Zip Code         Hollidaysburg       PA       16648         Purpose of Disbursement       Category/         Candidate Name       Category/         City       Senate       Disbursement For:         2006       Senate       Primary       General         Office Sought:       X       House <td>-</td> <td>Senate X President</td> <td>Primary</td> <td>General</td> <td></td>	-	Senate X President	Primary	General											
B.       REGULA FOR CONGRESS COMMITTEE       Date of Disbursement         Mailing Address       733 - 42nd Street NW       Disbursement         City       State       Zip Code         Qandidate Name       OH       44709         Office Sought:       X       House         State:       OH       Disbursement For:       2006         X       Primary       General       Other (specify)         Office Sought:       X       House       Disbursement For:         State:       OH       District: 16       Transaction ID: SB23.1980         Date of Disbursement       Other (specify)       Transaction ID: SB23.1980         Date of Disbursement       Disbursement For:       2006         Full Name (Last, First, Middle Initial)       C.       Shuster for Congress         Mailing Address       P.O. Box 27       Amount of Each Disbursement         Office Sought:       X       House       Disbursement For:       2006         Candidate Name       Category/       Type       Y       Y         Office Sought:       X       House       Disbursement For:       2006         Senate       President       Other (specify)       Amount of Each Disbursement         Office Sought:															
City       State       Zip Code         Category/       Purpose of Disbursement         Candidate Name       Category/         Office Sought:       X         Senate       President         President       Other (specify)         State: OH       District: 16         Full Name (Last, First, Middle Initial)       Category/         City       State         Mailing Address       P.O. Box 27         City       State         Hollidaysburg       PA         Parpose of Disbursement       Category/         Transaction ID: SB23.1980         Date of Disbursement         Mailing Address       P.O. Box 27         City       State       Zip Code         Hollidaysburg       PA       16643         Purpose of Disbursement       Category/         Category/       Type         Office Sought:       X       House         Senate       President         Other (specify)       Y         Office Sought:       X         Anount of Each Disbursement       Category/         Type       Other (specify)         Office Sought:       X         Senate       Presiden									Date	of Di	sburs	ement			Y
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Candidate Name       Category/ Type         Office Sought:       X         House       Disbursement For:       2006         State: OH       District: 16         Full Name (Last, First, Middle Initial)       C.         Shuster for Congress       Disbursement         Mailing Address       P.O. Box 27         City       State         Hollidaysburg       PA         Purpose of Disbursement       Category/ Type         Office Sought:       X         Purpose of Disbursement       Category/ Type         Office Sought:       X         House       Disbursement For:         Condidate Name       Category/ Type         Office Sought:       X         Purpose of Disbursement       Category/ Type         Office Sought:       X         President       Disbursement For:         Category/ Type       Type         Office Sought:       X         President       Other (specify) ▼         State: PA       District: 9									Amou	nt of	Each	ı Disbu	irseme		
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City     State     Zip Code       Hollidaysburg     PA     16648       Purpose of Disbursement     Category/ Type       Candidate Name     Category/ Type       Office Sought:     X       House     Disbursement For:       President     Other (specify)       State: PA     District: 9	•								Date o	of Di	sburs	ement			
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Office Sought:     X     House     Disbursement For:     2006       Senate     X     Primary     General       President     Other (specify)     ▼	Purpose of Disbur	sement							L.					1000.	0
Senate     X     Primary     General       President     Other (specify)     ▼	Candidate Name														
	-	Senate X President	Primary	General											
							►					• •		3000.(	00
TOTAL This Period (last page this line number only)												• •			

S	CHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 18 / 18
		Use seperate schedule(s)	(check only	
11	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	<u>Г</u> 21b Г	22 🗙 23 🗌 24 🗌 25 🗌 26
			27	28a 28b 28c 29 30b
An	y Information copied from such Reports and Staten	hents may not be sold or used	by any person fo	or the purpose of solicating contributions
or	for commercial purposes, other than using the name	e and address of any political	committee to sol	icit contributions from such committee
Ν	NAME OF COMMITTEE (In Full)			
$ \rangle$	College of American Pathologists Political	Action Committee		
L				
•	Full Name (Last, First, Middle Initial)			Transaction ID: SB23.19890
Α.	TEXAS FREEDOM FUND			Date of Disbursement
	Mailing Address 104 East Hume Avenue			02 <sup>M</sup> /28 <sup>/</sup> 2006 <sup>Y</sup>
	104 East Hume Avenue			
	City	State Zip Code		Amount of Each Disbursement this Period
	Alexandria	VA 22301		
	Purpose of Disbursement		· · · · · · · · · · · · · · · · · · ·	1000.00
	PAC contribution			
	Candidate Name		Category/	
			Туре	
		ement For: 2006 Primary General		
	Senate President X	Primary General Other (specify)		
	State: District: Other			
	Full Name (Last, First, Middle Initial)			<b>T</b>
В.				Transaction ID: SB23.19891 Date of Disbursement
	Mailing Address P.O. Box 16488			$ \begin{array}{c} M \\ 0 \\ 2 \\ \end{array} \begin{array}{c} M \\ 2 \\ \end{array} \begin{array}{c} D \\ 2 \\ 8 \\ \end{array} \begin{array}{c} D \\ 2 \\ 8 \\ \end{array} \begin{array}{c} D \\ 2 \\ 8 \\ \end{array} \begin{array}{c} D \\ 2 \\ 0 \\ \end{array} \begin{array}{c} D \\ 2 \\ 0 \\ 0 \\ \end{array} \begin{array}{c} Y \\ 2 \\ 0 \\ 0 \\ \end{array} \begin{array}{c} Y \\ 0 \\ 0 \\ \end{array} \begin{array}{c} Y \\ Y \\ 2 \\ 0 \\ 0 \\ \end{array} \begin{array}{c} Y \\ 0 \\ 0 \\ \end{array} \begin{array}{c} Y \\ Y $
	-			
	City Arlington	State Zip Code VA 22215		Amount of Each Disbursement this Period
	Purpose of Disbursement			5000.00
	PAC contribution			
	Candidate Name		Category/	
			Туре	
	Office Sought: House Disburse	ement For: 2006		
	Senate	Primary General		
		Other (specify)		
	State: District: Other			

1		
SUBTOTAL of Disbursements This Page (optional)	►	6000.00
TOTAL This Period (last page this line number only)	►	25500.00
FEC Schedule B (Form 3X) Rev. 02/2003		