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Image# 15951179137

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

								Office Us	e Only	
1. NAME OF COMMITT	EE (in full)	TYPE OR P	RINT ▼		mple: If typir r the lines.	ng, type	12FE4M	5		
College o	f American Pa	athologis	sts Politic	al Action	Committe	e e	1 1 1 1	1 1 1 1	1 1	I
ADDRESS (nu	mber and street)	1350 I Str	eet, NW				1 1 1 1			
•		Suite 590					1 1 1 1			
than	k if different previously ted. (ACC)	Washingt	on				DC	20005		
2. FEC IDE	NTIFICATION NU	MBER ▼		CITY ▲		S	STATE 🛦		ZIP COI	DE 🛦
C	00274944			3. IS THIS REPORT	\ \ \	NEW OR		MENDED A)		
4. TYPE O (Choose C	F REPORT	(b) Moni Repo	ort	Feb 20 (M2)		May 20 (M5)	Au	g 20 (M8)		Nov 20 (M11) (Non-Election Year Only)
(a) Quart	erly Reports:	Due		Mar 20 (M3)		Jun 20 (M6)	Se	p 20 (M9)		Dec 20 (M12) (Non-Election Year Only)
	April 15 Quarterly Report (Q	1)	×	Apr 20 (M4)		Jul 20 (M7)	Oc	t 20 (M10)	Ш	Jan 31 (YE)
	July 15 Quarterly Report (Q:	(C)	12-Day PRE-Electio		Primary (12F)	Genera	l (12G)	Ш	Runoff (12R)
	October 15 Quarterly Report (Q		Report for t	he:	Convention (12C)	Special	(12S)		
	January 31 Year-End Report (YI		E	Election on	M M /	D D /	Y Y Y	Y	in the State of	
	July 31 Mid-Year Report (Non-electior Year Only) (MY)	(d)	30-Day POST-Elect		General (300	à)	Runoff	(30R)		Special (30S)
	Termination Report (TER)		Report for t	ne: Election on	M = M /	D D /	Y	Y	in the State of	
5. Covering	Period 03	/ D 01		015	through	03	/ D D 31	/ Y Y 201	y	
I certify that I	have examined thi	s Report ar	nd to the be	est of my kno	wledge and I	pelief it is true	e, correct a	nd complet	e.	
Type or Print I	Name of Treasurer	John Mic	hael Misialek	Dr.						
Signature of T	reasurer John I	Michael Misia	ılek Dr.		[Electronically	Filed] Da	ate 04	M / D	D /	2015
NOTE: Submiss	sion of false, errone	ous, or inco	mplete infor	mation may su	bject the pers	son signing th	is Report to	the penaltie	es of 2 L	J.S.C. §437a.
Offic Use Onl	ce			.,,		<u> </u>	,	FEC	FOR ev. 12/20	M 3X

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

03 2015 03 2015 Report Covering the Period: 31 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 405859.24 January 1, 2015 (b) Cash on Hand at 489432.94 Beginning of Reporting Period..... 114448.00 23675.00 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 513107.94 520307.24 6(a) and 6(c) for Column B)..... 26850.90 34050.20 Total Disbursements (from Line 31)......

Cash on Hand at Close of
Reporting Period
(subtract Line 7 from Line 6(d))......

486257.04

0.00

486257.04

Debts and Obligations Owed **TO** the Committee (Itemize all on
 Schedule C and/or Schedule D)

Debts and Obligations Owed BY
 the Committee (Itemize all on Schedule C and/or Schedule D)

0.00

×

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

College of American Pathologists Political Action Committee

I. Receipts	COLUMN B Calendar Year-to-Date			
	18120.00	96745.00		
(i) Itemized (use Schedule A)		7 7 7		
(ii) Unitemized	5555.00	17703.00		
Lines 11(a)(i) and (ii)	23675.00	114448.00		
Political Party Committees	0.00	0.00		
(such as PACs)	0.00	0.00		
Totals to Line 33, page 5)▶	23675.00	114448.00		
	0.00	0.00		
Loans Received	0.00	0.00		
an Repayments Received	0.00	0.00		
sets To Operating Expenditures	, , , , , , , , , , , , , , , , , , , ,	,,		
· · · · · · · · · · · · · · · · · · ·				
	0.00	0.00		
	0.00	0.00		
· ·		0.00		
insfers from Non-Federal and Levin Funds	0.00	0.00		
(from Schedule H3)	0.00	0.00		
Levin Funds (from Schedule H5)	0.00	0.00		
Total Transfers (add 18(a) and 18(b))	0.00	0.00		
	Intributions (other than loans) From: Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	Intributions (other than loans) From: Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	Total This Period			
21.	Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Calendar Year-to-Date		
	(i) Federal Share	0.00	0.00		
	(ii) Non-Federal Share	0.00	0.00		
	(b) Other Federal Operating				
	Expenditures	100.90	300.20		
	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	100.90	300.20		
2.	Transfers to Affiliated/Other Party				
3	Committees Contributions to	0.00	0.00		
	Federal Candidates/Committees and Other Political Committees	26750.00	33750.00		
4.	Independent Expenditures (use Schedule E)	0.00	0.00		
5.	Coordinated Party Expenditures (2 U.S.C. §441a(d))				
	(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00		
6.	Loan Repayments Made	0.00	0.00		
7	Loans Made	0.00	0.00		
8.	Refunds of Contributions To:		0.00		
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00		
	(b) Political Party Committees	0.00	0.00		
	(c) Other Political Committees				
	(such as PACs)	0.00	0.00		
	(d) Total Contribution Refunds				
	(add Lines 28(a), (b), and (c))▶	0.00	0.00		
9.	Other Disbursements	0.00	0.00		
		7			
0.	Federal Election Activity (2 U.S.C. §431(20)) (a) Allocated Federal Election Activity				
	(from Schedule H6)				
	(i) Federal Share	0.00	0.00		
	(ii) "Levin" Share	0.00	0.00		
	(b) Federal Election Activity Paid Entirely				
	With Federal Funds	0.00	0.00		
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00		
1.	Total Disbursements (add Lines 21(c), 22,				
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	26850.90	34050.20		
2.	Total Federal Disbursements				
	(subtract Line 21(a)(ii) and Line 30(a)(ii)	20252.22	04050.00		
	from Line 31)▶	26850.90	34050.20		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
3. Total Contributions (other than loans) (from Line 11(d), page 3)	23675.00	114448.00		
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00		
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	23675.00	114448.00		
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	100.90	300.20		
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00		
3. Net Operating Expenditures (subtract Line 37 from Line 36)	100.90	300.20		

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

FOF	R LINE	NU	MBER	:	PAGE	6	OF	23
(che	ck only	or	ne)					
X	11a		11b		11c	12	2	
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	Statements may not be sold or used by any person e name and address of any political committee to	
NAME OF COMMITTEE (In Full)	to Delitical Action Occasion	
College of American Pathologis	ats Political Action Committee	
Full Name (Last, First, Middle Initial) A. Gordon Bills MD		Date of Receipt
Mailing Address 9293 Witherbone Court		03 11 2015
City	State Zip Code	Transaction ID : SA11AI.52663
Cincinnati	OH 45242	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer	Occupation	
Souther Ohio Pathology Consultants	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	200.05	
Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial) Dr. Melissa Mulkey Blann MD		Date of Receipt
Mailing Address 3810 152nd St		03 11 2015
City	State Zip Code	Transaction ID : SA11AI.52676
Lubbock	TX 79423-6310	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	
Ameripath Lubbock CMC Campus	Pathologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Dann R Burns MD		Date of Receipt
Mailing Address Dept of Path		M M / D D / Y Y Y
1 Medical Village Dr		03 11 2015
City	State Zip Code	Transaction ID : SA11AI.52659
Edgewood	KY 41017-3403	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
St Elizabeth	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)		1550.00
TOTAL This Period (last page this line number	only)	

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

FOR	LINE	NU	MBER	:	PAGE	7	OF	23
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	Statements may not be sold or used by any persite name and address of any political committee to	
NAME OF COMMITTEE (In Full)		
College of American Pathologis	sts Political Action Committee	
Full Name (Last, First, Middle Initial) 1. Dr. David K Carter MD		Date of Receipt
Mailing Address Dept of Path 407 E 3rd St		03 18 2015
City	State Zip Code	Transaction ID : SA11AI.52724
Duluth	MN 55805-1950	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer	Occupation	†
St. Mary's/Duluth Clinic Health System	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00 0	
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Dr. Timothy L Cole MD		Date of Receipt
Mailing Address Dept of Path		M = M / D = D / Y = Y = Y
421 S 28th Ave Ste 310	State 7th Ord	03 11 2015
City	State Zip Code	Transaction ID : SA11AI.52699
Hattiesburg	MS 39401	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer	Occupation	
Hattiesburg Clinic	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00 0	
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Dr Gary L Cooper MD		Date of Receipt
Mailing Address 501 20th St Ste G3		03 18 2015
City	State Zip Code	Transaction ID : SA11AI.52727
Knoxville	TN 37916-1890	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer	Occupation	1
Innovative Pathology Services	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	00 0	
Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)		1250.00
,3- (abinara)		
TOTAL This Period (last page this line number	only)	

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

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	Statements may not be sold or used by any pers e name and address of any political committee to	
NAME OF COMMITTEE (In Full) College of American Pathologis	sts Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Peggy Melissa Delahoussaye ME Mailing Address 4922 Linden St City Bellaire FEC ID number of contributing federal political committee. Name of Employer MLD Pathology Receipt For: Primary General Other (specify)	State Zip Code TX 77401-4435 C Occupation Pathologist Aggregate Year-to-Date 250.00	Date of Receipt 03 11 2015 Transaction ID: SA11AI.52681 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Dr. Richard N. Eisen MD Mailing Address Dept of Path 5 Perryridge Rd City Greenwich FEC ID number of contributing federal political committee. Name of Employer Greenwich Hospital Receipt For: Primary General Other (specify)	State Zip Code CT 06830-4608 C Occupation Pathologist Aggregate Year-to-Date ▼ 250.00	Date of Receipt 03 11 2015 Transaction ID: SA11AI.52686 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Dr Renee R Ellerbroek MD Mailing Address Dept of Path 1212 Pleasant St Ste LL3 City Des Moines FEC ID number of contributing federal political committee. Name of Employer Pathology Laboratory PC Receipt For: Primary General Other (specify)	State Zip Code IA 50309-1414 C Occupation Pathologist Aggregate Year-to-Date ▼ 1000.00	Date of Receipt 03 11 2015 Transaction ID : SA11AI.52684 Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)	>	1500.00
TOTAL This Period (last page this line number	only)	

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	the name and address of any political committee to	
NAME OF COMMITTEE (In Full)		
/ College of American Patholog	gists Political Action Committee	
Full Name (Last, First, Middle Initial) A. Dr. James N Elliott MD		Date of Receipt
Mailing Address Dept of Path 8118 Good Luck Rd		03 18 2015
City	State Zip Code	Transaction ID : SA11AI.52729
Lanham	MD 20706-3574	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	-
Doctors Community Hospital	Pathologist	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) B. Dr. Noel T. Florendo MD,PhD		Date of Receipt
Mailing Address 1211 Union Ave Ste 875		03 16 2015
City	State Zip Code	Transaction ID : SA11AI.52715
Memphis	TN 38104-6655	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Duckworth Pathology Group Inc	Occupation Pathologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Mark Albert Grathwohl MD	1	Date of Receipt
Mailing Address 6 Livery Ln		03 11 2015
City	State Zip Code	Transaction ID : SA11AI.52675
North Salem	NY 10560-3424	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	-
Northern Westchester Hospital	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General		
Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional) .	1750.00
TOTAL This Period (last page this line numb	per only)	

FOR LINE NUMBER: PAGE 10 OF Use separate schedule(s) for each category of the Detailed Summary Page

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	Statements may not be sold or used by any pers e name and address of any political committee to	
NAME OF COMMITTEE (In Full) College of American Pathologis	sts Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Emily Ann Green MD Mailing Address 3936 19th St City San Francisco FEC ID number of contributing federal political committee. Name of Employer David Grant Med Ctr Receipt For: Primary General Other (specify)	State Zip Code CA 94114-2522 C Occupation Pathologist Aggregate Year-to-Date ▼ 500.00	Date of Receipt 03 21 2015 Transaction ID: SA11AI.52737 Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) Dr. Charles N. Iknayan MD Mailing Address E6385 Gheller Dr City Bessemer FEC ID number of contributing federal political committee. Name of Employer Grandview Hospital Receipt For: Primary Other (specify) General	State Zip Code MI 49911-9754 C Occupation Pathologist Aggregate Year-to-Date ▼ 300.00	Date of Receipt 03 11 2015 Transaction ID: SA11AI.52656 Amount of Each Receipt this Period 300.00
Full Name (Last, First, Middle Initial) Dr. William Emmett Jefferson III Mailing Address 101 Elm Ave SE City Roanoke FEC ID number of contributing federal political committee. Name of Employer Roanoke Mem Hosp Receipt For: Primary General Other (specify)	State Zip Code VA 24013-2222 C Occupation Pathologist Aggregate Year-to-Date ▼ 500.00	Date of Receipt 03 12 2015 Transaction ID: SA11AI.52706 Amount of Each Receipt this Period 500.00
SUBTOTAL of Receipts This Page (optional)	>	1300.00
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 11 OF 23

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	he name and address of any political committee to	
NAME OF COMMITTEE (In Full)		
College of American Patholog	ists Political Action Committee	
Full Name (Last, First, Middle Initial) A. Dr. Bradden W Jensen MD		Date of Receipt
Mailing Address Dept of Path		M = M / D = D / Y = Y = Y
PO Box 1600 City	State Zip Code	03 01 2015 Transaction ID : SA11AI.52649
Vancouver	WA 98668-1600	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	†
Peacehealth SW Medical Center	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00 0	
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Mr. Douglas G Knapman MBA		Date of Receipt
Mailing Address 325 Waukegan Rd		M = M / D = D / Y = Y = Y
City	State Zip Code	03 15 2015
City Northfield	State Zip Code IL 60093-2750	Transaction ID : SA11AI.52707 Amount of Each Receipt this Period
	00000 2.00	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	600.00
Name of Employer	Occupation]
College of American Pathologists	Pathologist]
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	600.00	
Full Name (Last, First, Middle Initial) C. Dr. Shannon Kratzer MD		Date of Receipt
Mailing Address 3445 Executive Ctr Dr Ste 2	250	03 11 2015
City	State Zip Code	03 11 2015 Transaction ID : SA11AI.52691
Austin	TX 78731	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	300.00
Name of Employer	Occupation	1
Clinical Pathology Associates	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	300.00	
SUBTOTAL of Receipts This Page (optional)		1400.00
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TOTAL This Period (last page this line number	er only)	

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Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any perse name and address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) College of American Pathologis	sts Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Hongmei Li MD Mailing Address 1380 Soldiers Field Rd Ste 1 City Brighton FEC ID number of contributing federal political committee. Name of Employer Dermpath New England LLC	State Zip Code MA 02135-1023 C Occupation Pathologist	Date of Receipt 03 19 2015 Transaction ID: SA11AI.52735 Amount of Each Receipt this Period 250.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Ji Lu MD Mailing Address 2410 Cutting St City	State Zip Code	Date of Receipt 03 11 2015 Transaction ID : SA11AI.52669
Walnut Creek West FEC ID number of contributing federal political committee.	CA 94596-6506	Amount of Each Receipt this Period 500.00
Name of Employer Kaiser Permanente Receipt For: Primary General Other (specify) ▼	Occupation Pathologist Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. John E Mcdonald MD Mailing Address Dept of Path 4401 Booth Calloway Rd City North Richland Hills FEC ID number of contributing federal political committee. Name of Employer North Hills Hospital Receipt For: Primary General Other (specify)	State Zip Code TX 76180-7371 C Occupation Pathologist Aggregate Year-to-Date ▼ 1000.00	Date of Receipt 03 11 2015 Transaction ID : SA11AI.52671 Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)	<u> </u>	1750.00
TOTAL This Period (last page this line number	only)	

federal political committee.

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) College of American Pathologists Political Action Committee Full Name (Last, First, Middle Initial) Dr. Philip W Mcguire MD Date of Receipt Mailing Address 1660 Hogan Ave 2015 City Zip Code State Transaction ID: SA11AI.52683 Chesterton IN 46304-9378 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Name of Employer Occupation Alverno Clinical Laboratories Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Aruna D. Parikh MD Date of Receipt Mailing Address Laboratories PO Box 690685 03 30 2015 City State Zip Code Transaction ID: SA11AI.52756 TX Houston 77269-0685 Amount of Each Receipt this Period FEC ID number of contributing 370.00

Name of Employer Occupation Wilkenfeld Medical Laboratories Ltd Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 370.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. David O Scamurra MD Date of Receipt Mailing Address 2950 Elmwood Ave 03 18 2015 City Zip Code State Transaction ID: SA11AI.52726 NY Kenmore 14217-1304 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation X Cell Labs of Western NY Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1870.00

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

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

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FOR LINE NUMBER: PAGE 14 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) College of American Pathologists Political Action Committee Full Name (Last, First, Middle Initial) Dr. Imran Shahab MD Date of Receipt Mailing Address 5956 Davenhill Dr 2015 03 City State Zip Code Transaction ID: SA11AI.52665 TX Plano 75093-4346 Amount of Each Receipt this Period FEC ID number of contributing C 1500.00 federal political committee. Name of Employer Occupation Michael A Deck MD PA Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Marcia Catherine Shattuck MD Date of Receipt Mailing Address 416 Connable Ave 03 18 2015 City State Zip Code Transaction ID: SA11AI.52733 MI Petoskey 49770-2212 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation McLaren Northern Michigan Hospital Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Ervin B Shaw MD Date of Receipt Mailing Address 4524 Darby Ambrose Rd 03 11 2015 City Zip Code State Transaction ID: SA11AI.52662 SC Lexington 29072-9210 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Lexington Medical Center Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 2500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 15 OF 23 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

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NAME OF COMMITTEE (In Full)							
College of American Pathologists	Political Action Com	mittee					
Full Name (Last, First, Middle Initial)							
A. DIANE BLACK FOR CONGRESS	3		Date of Disbursement				
Mailing Address PO BOX 1437			03 23 201				
City	State Zip Code		T ID				
GALLATIN	TN 37066		Transaction ID : SB23.52630				
Purpose of Disbursement							
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President	Other (specify) ▼						
State: TN District: 06	_						
Full Name (Last, First, Middle Initial)							
B. ENGEL FOR CONGRESS			Date of Disbursement				
Mailing Address 462 California Road			03 23 201				
City Bronxville	State Zip Code NY 10708		Transaction ID : SB23.52631				
Purpose of Disbursement							
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	ement For: 2016						
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State: NY District: 16	Other (specify)						
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Mailing Address 10 WEST BROADWAY			03 23 201	5			
SUITE 500 City	State Zip Code						
SALT LAKE CITY	UT 84101		Transaction ID : SB23.52632				
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_	Full Name (Last, First, Middle Initial)													
В.	GUTHRIE FOR CONGRESS						Date o	t Dis	burse	ment				
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	Mailing Address P.O. Box 9639						03	-	2	3		2015		
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	Bowling Green	KY	42102				Trans	sacti	on ID	: SB2	3.5263	3		
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_	State: KY District: 02													
_	Full Name (Last, First, Middle Initial)						Date o	f Dia	huroo	mont				
C.	JIM RENACCI FOR CONGRESS							_						
	Mailing Address 150 SMOKERISE DRIVE						03	/	23	_		2015	Y	
	Mailing Address 150 SMORERISE DRIVE						03	-	2.	,		-010		
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NAME OF COMMITTEE (In Full)			
College of American Pathologists F	Political Action Com	mittee	
Full Name (Last, First, Middle Initial)			
A. KURT SCHRADER FOR CONGRE	:SS		Date of Disbursement
Mailing Address P.O. BOX 3314			03 25 2015
City	State Zip Code		Transaction ID : SB23.52645
OREGON CITY	OR 97045		11alisaction ID . 3B23.32043
Purpose of Disbursement			Amount of Each Disbursement this Period
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		Type	1000.00
	nent For: 2016		
	Primary General Other (specify)		
State: OR District: 05	Other (specify)		
Full Name (Last, First, Middle Initial)			
B. MIKE BISHOP FOR CONGRESS			Date of Disbursement
Mailing Address 499 S CAPITAL STREET, SW SUITE 420			03 23 2015
WASHINGTON	State Zip Code DC 20003		Transaction ID : SB23.52635
Purpose of Disbursement		· · ·	Amount of Each Disbursement this Period
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C. NATIONAL REPUBLICAN CONGR	RESSIONAL COMM	ITTEE	Date of Disbursement
			M M / D D / Y Y Y Y
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City	State Zip Code		Transaction ID : SB23.52647
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City State Zip Code Transaction ID : SB23.52644		Mailing Address DOUGLED LIVE CO.	DEET NO.			Y
Transaction ID: 5B23.52644		Mailing Address DRUCKER LAWHON 317 15TH ST	REET NW		03 25 2015	_
Transaction ID: 5B23.52644		City S	State Zip Code		Transaction ID - CD00 50044	
		WASHINGTON			i ransaction ID : 5823.52644	
Purpose of Disbursement		Purpose of Disbursement				
Candidate Name Amount of Each Disbursement this Period		Candidate Name			Amount of Each Disbursement this P	eriod
Category/ Type 1000.00		Canadate Name			1000.	00
Office Sought:		Office Sought:	nent For: 2016	1,700		
Senate Primary General				al		
President Other (specify) ▼			Other (specify) ▼			
State: LA District: 01		State: LA District: 01				
3000.00	_				3000	00
SUBTOTAL of Disbursements This Page (optional)	s	UBTOTAL of Disbursements This Page (optional)		·····•	3000.0	00

SCHEDULE B (FEC Form 3X)		FOR LINE I	NUMBER:	PAGE 23 OF 23
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b	24 25 26	
	,	27	28a 28b	28c 29 30
Any information copied from such Reports and Statem or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full)				
College of American Pathologists F	Political Action Com	mittee		
Full Name (Last, First, Middle Initial)			Data of Diahuraan	nont
UPTON FOR ALL OF US			Date of Disbursement	
Mailing Address P.O. BOX 490			03 23	_2015
,	State Zip Code		Transaction ID :	SB23 52641
ST JOSEPH	MI 49085			0520102011
Purpose of Disbursement			Amount of Each D	Disbursement this Period
Candidate Name		Category/ Type		2500.00
Senate	nent For: 2016 Primary General Other (specify)	7,1	,	,
State: MI District: 06	•			
Full Name (Last, First, Middle Initial)				
3. VERN BUCHANAN FOR CONGRESS			Date of Disbursement	
Mailing Address P.O. BOX 48928			03 30	
•	State Zip Code		Transaction ID :	SB23.52648
SARASOTA Purpose of Disbursement	FL 34230			
·			Amount of Each [Disbursement this Period
Candidate Name		Category/ Type	, ,	2500.00
Senate President	nent For: 2016 Primary General Other (specify)			
State: FL District: 16 Full Name (Last, First, Middle Initial)				
.			Date of Disbursen	
Mailing Address			W - W / D - L	
City	State Zip Code			
Purpose of Disbursement				
Candidate Name		Category/ Type	Amount of Each [Disbursement this Period
	nent For: Primary General Other (specify)			
District.				
SUBTOTAL of Disbursements This Page (optional)		·····		5000.00
TOTAL This Period (last page this line number only).				26750.00