FEC FORM 3X	A	EPORT C ND DISBU Other Than A	JRSEM	ENTS	ee		Office Use Only	
1. NAME OF COMMITTEE (in fu		E FEC MAILING L TYPE OR PRINT		mple:If typing r the lines	, type			
College of America	n Pathologists	Political Action Co	mmittee]
ADDRESS (number and	street)	350 I Street, NW						
Check if differ than previously reported. (ACC	/ I V	Vashington					20005	
2. FEC IDENTIFICAT		R ¥ _	CITY 🛋		S	STATE	ZIPCOL	DE 🔺
C00274944			3. IS THIS REPORT		NEW N) OR	AM (A)	ENDED	
July 15 Quarterly October Quarterly January 3 Quarterly July 31 M Report(N Year Only	Ports: Report(Q1) Report(Q2) 15 Report(Q3) 81 Report(YE) lid-Year on-election	(b) Monthly Report Due On: (c) 12-Day PRE -Elec Report for (d) 30-Day Post -Ele Report for	r the:		12C)	Sep 2	2G) in the State o	Special (30S)
5. Covering Period I certify that I have exam Type or Print Name of T Signature of Treasurer	-	rt and to the best o				3 1 and complete. ate 0 1	2009	2010
NOTE : Submission of f	alse, erroneou:	s, or incomplete inf	ormation may su	bject the pers	on signing this	Report to the p	FEC FOR	
Use Only							(Rev. 12/200	

Image# 10930056166

FEC Form 3X (Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

2 / 51

F	Report Covering the Period: From:	D D Y Y Y Y 01 2009	To:
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1 2009 Y Y		84806.66
	(b) Cash on Hand at Begining of Reporting Period	348998.95	
	(c) Total Receipts (from Line 19)	69706.00	687512.00
	(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	418704.95	772318.66
	Total Disbursements (from Line 31)	31297.35	384911.06
3.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	387407.60	387407.60
).	Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
0.	Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

FE6AN026

Image# 10930056167

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

College of American Pathologists Political Action Committee

F	eport Covering the Period: From:		
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1.	Contributions (other than loans) From: (a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	54562.00	537083.50
	(ii) Unitemized	15144.00	144678.50
	(iii) TOTAL (add Lines 11(a)(i) and (ii) ▶	69706.00	681762.00
	(b) Political Party Committees	0.00	0.00
	 (c) Other Political Committees (such as PACs) (d) Total Contributions (add Lines 	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) 🅨	69706.00	681762.00
2.	Transfers From Affiliated/Other Party Committees	0.00	0.00
3.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
e	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00
0.	to Federal candidates and Other Political Committees	0.00	5750.00
7.	Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
3.	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
9.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	69706.00	687512.00
).	Total Federal Receipts (subtract Line 18(c) from Line 19)	69706.00	687512.00

Image# 10930056168

DETAILED SUMMARY PAGE

	FEC Form 3X (Rev. 02/2003)	of Disbursements	4 / 51
	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Shared Federal/Non-Federal		
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share	0.00	0.00
	(iii) New Federal Observ	0.00	0.00
	(ii) Non-Federal Share(b) Other Federal Operating		
	Expenditures	297.35	12481.28
	(c) Total Operating Expenditures		
	(add 21(a)(i), (a)(ii) and (b)) 🕨	297.35	12481.28
22.	Transfers to Affiliated/Other Party	0.00	0.00
23	Committees Contributions to	0.00	0.00
-0.	Federal Candidates/Committees and Other Political Committees	31000.00	372179.78
<u>2</u> 4.	Independent Expenditure		
	(use Schedule E)	0.00	0.00
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d))	0.00	0.00
	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26	Loan Repayments Made	0.00	0.00
_0.			
	Loans Made	0.00	0.00
28.	Refunds of Contributions To: (a) Individuals/Persons Other		
	Than Political Committees	0.00	250.00
	(b) Political Party Committees	0.00	0.00
	(b) Political Party Committees(c) Other Political Committees		
	(such as PACs)	0.00	0.00
	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c)) 🕨	0.00	250.00
29.	Other Disbursements	0.00	0.00
30.	Federal Election Activity (2 U.S.C 431(20))		
	(a) Shared Federal Election Activity		
	(from Schedule H6)	0.00	0.00
	(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	0.00	0.00
	Lines 30(a)(i), 30(a)(ii) and 30(b))		0.00
31.	Total Disbursements (add Lines 21(c), 22,	01007.05	004011.00
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	31297.35	384911.06
32.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	31297.35	384911.06
	·		

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DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003) of Disbursements

5 / 51

	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)	69706.00	681762.00
34.	Total Contribution Refunds (from Line 28(d))	0.00	250.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	69706.00	681512.00
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	297.35	12481.28
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	297.35	12481.28

FE6AN026

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SCHEDULE A (FEC Form	· Ose separate schedule(s)	FOR LINE NUMBER: PAGE 6 / 51 (check only one)				
ITEMIZED RECEIPTS	for each category of the	X 11a 11b 11c 12				
	Detailed Summary Page					
Any information copied from such Reports or for commercial purposes, other than us	Any information copied from such Reports and Statements may not be sold or used by any persor for commercial purposes, other than using the name and address of any political committee t					
NAME OF COMMITTEE (In Full)						
College of American Pathologist	s Political Action Committee					
Full Name (Last, First, Middle Initial) L. Charles Abbott, Dr.		Date of Receipt				
Mailing Address Dept of Path & C 725 North St		1 2 / 1 5 / Y Y Y Y 1 2 0 0 9				
City	State Zip Code	Transaction ID: SA11AI.35903				
Pittsfield	MA 01201-4124	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	100.00				
Name of Employer Berkshire Health Systems	Occupation Pathologist					
Receipt For:	Aggregate Year-to-Date ▼	1				
Primary General	350.00					
Other (specify)						
Full Name (Last, First, Middle Initial) Mahmood Osama Alassi, Dr.		Date of Receipt				
Mahmood Osama Alassi, Dr. Mailing Address 48344 Castleside	e Dr					
City	State Zip Code	Transaction ID: SA11AI.35986				
Canton	MI 48187-1249	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	250.00				
Name of Employer Henry Ford Health System	Occupation Pathologist					
Receipt For:	Aggregate Year-to-Date V					
Primary General Other (specify) ▼	250.00					
Full Name (Last, First, Middle Initial) W Ashley Allison, Dr.	I	Date of Receipt				
Mailing Address 3918 Montclair F	Rd Ste 100	M M / D D / Y Y Y Y 1 2 28 2009				
City	State Zip Code	Transaction ID: SA11AI.35954				
Birmingham	AL 35213-2410	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.		150.00				
Name of Employer Dermatopathology Services PC	Occupation Pathologist	1				
Receipt For:	Aggregate Year-to-Date ▼	1				
Primary General Other (specify) ▼	358.00					
SUBTOTAL of Receipte This Page (opti	onal)	500.00				
CODICIAL OF TECCIPIS THIS Fage (Opti						
TOTAL This Period (last page this line n	umber only)					

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	tatements may n	Use separate schedule(s) for each category of the Detailed Summary Page ot be sold or used by any perso	FOR LINE NUMBER: PAGE 7 / 51 (check only one) (check only one) X 11a 11b 11c 12 13 14 15 16 17 on for the purpose of soliciting contributions purpose of soliciting contributions 17
	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) College of American Pathologists Politi			solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) D William Anderson, Dr. Mailing Address Dept of Path			Date of Receipt
	350 W Thomas Rd			12 28 2009
	City	State	Zip Code	Transaction ID: SA11AI.36133
	Phoenix FEC ID number of contributing	AZ	85013-4409	Amount of Each Receipt this Period
	federal political committee.	C		
	Name of Employer St Josephs Hosp and Med	Occupation Pathologist	ł	
	Ctr Receipt For:	, ,	ear-to-Date 🔻	_
	Primary General Other (specify) ▼		250.00]
в.	Full Name (Last, First, Middle Initial) F Dale Andres, Dr.			Date of Receipt
	Mailing Address Lab 1111 6th Ave			1 2 / D D / Y Y Y Y 1 2 0 0 9
	City Des Moines	State IA	Zip Code	Transaction ID: SA11AI.36030
	FEC ID number of contributing federal political committee.	C	50314-2611	Amount of Each Receipt this Period 500.00
	Name of Employer Mercy Med Ctr-Des Moines	Occupation Pathologist	t	
	Receipt For:	Aggregate Y	ear-to-Date 🔻	
	Other (specify)	0 0 0	500.00	
C.	Full Name (Last, First, Middle Initial) G Lee Beckwith, Dr.	I		Date of Receipt
	Mailing Address Dept of Path 1701 Lacey St			M M / D D / Y Y Y Y 12 23 2009
	City	State	Zip Code	Transaction ID: SA11AI.36118
	Cape Girardeau	MO	63701-5230	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Southeast Missouri Hosp	Occupation Pathologis	t	
	Receipt For:	Aggregate Y	ear-to-Date 🔻	
	Other (specify) ▼		300.00	
	SUBTOTAL of Receipts This Page (optional)			850.00
	TOTAL This Period (last page this line number of	only)		

SCHEDULE A	A (FEC Form 3X) CEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8/51 (check only one) 11a 11b 11c 12 13 14 15 16 1
Any information copie or for commercial put	poses, other than using the na	tements may ame and add	y not be sold or used by any person dress of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
College of Ame	erican Pathologists Politic	al Action C	Committee	
A. Biorn Jiri Bedrnice	1			Date of Receipt
Mailing Address	The Pathology Ctr 8303 Dodge St			12 ^M 22 ^P 2009
City	-	State	Zip Code	Transaction ID: SA11AI.36033
<u>Omaha</u>	· · · · ·	NE	68114-4108	Amount of Each Receipt this Period
FEC ID number o federal political co		C		42.00
Name of Employe Methodist Hospita	r al	Occupation Patholog		
Receipt For:		Aggregate	Year-to-Date 🔻	
Primary Other (spec	ify) ▼	0 0	210.00	
Full Name (Last, Full N	First, Middle Initial) Dr.			Date of Receipt
Mailing Address	9815 N 107th St			M M / D P Y
City		State	Zip Code	Transaction ID: SA11AI.36217
Scottsdale		AZ	85258-6090	Amount of Each Receipt this Period
FEC ID number o federal political co		C		208.00
Name of Employe Clin-Path Associa	r ates, P.C.	Occupation Patholog		
Receipt For:	Caparal	Aggregate	Year-to-Date 🔻	
Primary Other (spec	ify) ▼	0 0	832.00	
Full Name (Last, F W. Arthur Bracey, I	First, Middle Initial) Dr.			Date of Receipt
Mailing Address	Department of Pathology 6720 Bertner	y-P125E		M M / D D / Y Y Y Y 12 / 30 / 2009
City		State	Zip Code	Transaction ID: SA11AI.36134
Houston	feetileuties	TX	77030	Amount of Each Receipt this Period
FEC ID number o federal political co		C		1000.00
Name of Employe St. Luke's Episco	r pal Hosp	Occupation Patholog		
Receipt For: Primary	General	Aggregate	Year-to-Date V	_
Other (spec			1000.00	
SUBTOTAL of Rec	eipts This Page (optional)			1250.00
	(last page this line number on			

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9/51 (check only one) 11a X 11a 11b 11c 13 14 15 16 17
or for	nformation copied from such Reports and S r commercial purposes, other than using the AME OF COMMITTEE (In Full)	Statements may e 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
	College of American Pathologists Politi	tical Action (Committee	
A. <u>L</u>	ull Name (Last, First, Middle Initial) ee Clifton Bridges, Dr.			Date of Receipt
Μ	lailing Address 1456 William St			1 2 / D D / Y Y Y Y 1 2 0 0 9
	ity	State	Zip Code	Transaction ID: SA11AI.35960
	eesburg	<u> </u>	34748	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C		1000.00
N D	ame of Employer iagnostic Pathology Asso- iates	Occupation Patholog		
	eceipt For:	1 · · · · · · · · · · · · · · · · · · ·	e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	1000.00]
	ull Name (Last, First, Middle Initial) . James Cash, Dr.			Date of Receipt
_	lailing Address Laboratory 2693 Forest Hills Rd			M M M / D D / Y Y Y Y Y 12 / 15 / 2009
	ity Vilson	State NC	Zip Code	Transaction ID: SA11AI.35963
FI	EC ID number of contributing deral political committee.	C	27893	Amount of Each Receipt this Period
	ame of Employer astern Carolina Patholog- Inc	Occupation Patholog		7
, R	eceipt For:	1 · · · · · · · · · · · · · · · · · · ·	e Year-to-Date	_
	Primary General Other (specify) ▼	0 0	500.00]
	ull Name (Last, First, Middle Initial) Lisa Chandler, Dr.	<u>I</u>		Date of Receipt
	lailing Address 1207 Office Park Dr			1 2 3 1 2 0 0 9
	ity	State	Zip Code	Transaction ID: SA11AI.36068
	Dxford	MS	38655	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C		1000.00
N	ame of Employer xford Pathology, Inc	Occupation Patholog		
R	eceipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) Image: Content of the specific spec		1000.00]
SUF	BTOTAL of Receipts This Page (optional)	I		2250.00
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	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 10 / 51 (check only one)
	ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12
	Any information copied from such Reports and Si or for commercial purposes, other than using the	13 14 15 16 17 In for the purpose of soliciting contributions solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full)		-	
	College of American Pathologists Polit	ical Action	Committee	
Α.	Full Name (Last, First, Middle Initial) C Phillip Collins, Dr.			Date of Receipt
	Mailing Address Pathology Department 12221 N. Mopac Expw			M M / D D / Y Y Y Y 12 29 2009
	City	State	Zip Code	Transaction ID: SA11AI.36060
	Austin	TX	78758	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		200.00
	Name of Employer North Austin Med Ctr	Occupatio Patholog		
	Receipt For:	_ _	e Year-to-Date 🔻	1
	Primary General Other (specify) ▼	0 0	300.00]
- B.	Full Name (Last, First, Middle Initial) Leo James Connolly, Dr.	I		Date of Receipt
	Mailing Address 78 Robinwood Ave			M M / D D / Y Y Y Y 12 31 2009
	City	State	Zip Code	Transaction ID: SA11AI.35907
	Jamaica Plain	MA	02130-2155	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Beth Israel Deaconess Med Ctr	Occupatio Patholog		
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	 Primary General Other (specify) ▼ 	0 0	250.00	
- С.	Full Name (Last, First, Middle Initial) G Stephen Connolly, Dr.			Date of Receipt
	Mailing Address Stockton Path 1800 N California St			M M / D D / Y Y Y Y 12 21 2009
	City	State	Zip Code	Transaction ID: SA11AI.36147
	Stockton	CA	95204-6019	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer St. Joseph's Med Ctr	Occupatio Patholog		
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	 Primary General Other (specify) ▼ 		500.00	
	SUBTOTAL of Receipts This Page (optional)			950.00
	TOTAL This Period (last page this line number	only)	····· •	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	for each ca	te schedule(s) tegory of the Immary Page	FOR LINE NUMBER: PAGE 11 / 51 (check only one) 11a X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or name and address of any po	used by any persor litical committee to s	for the purpose of soliciting contributions
	College of American Pathologists Poli	ical Action Committee		
۹.	Full Name (Last, First, Middle Initial) L Gary Cooper, Dr.			Date of Receipt
	Mailing Address 501 20th St Ste G3			M M / D D / Y Y Y Y 12 28 2009
	City	State Zip Code		Transaction ID: SA11AI.35993
	Knoxville	TN 37916-18	390	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Innovative Pathology Serv- ices	Occupation Pathologist		
	Receipt For:	Aggregate Year-to-Date	▼	-
	Primary General Other (specify) ▼		2000.00	
- 3.	Full Name (Last, First, Middle Initial) Marie Michele Cosgrove, Dr.			Date of Receipt
	Mailing Address Dept of Path 1509 Wilson Terr			12 / 23 / Y Y Y Y 12 23 2009
	City	State Zip Code		Transaction ID: SA11AI.35973
	<u>Glendale</u>	<u>CA 91206-40</u>	198	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1 1	100.00
	Name of Employer Glendale Adventist Med Ctr	Occupation Pathologist		
	Receipt For:	Aggregate Year-to-Date	▼	
	Primary General Other (specify) ▼		300.00	
-	Full Name (Last, First, Middle Initial) L. Jeffrey Craver, Dr.	1		Date of Receipt
	Mailing Address Dept of Pathology 200 Portland St			1 2 / D D / Y Y Y Y 1 2 4 2 4 2 0 0 9
	City	State Zip Code		Transaction ID: SA11AI.35918
	Columbia	MO 65201		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Boyce & Bynum Pathology Labs PC	Occupation Pathologist		
	Receipt For:	Aggregate Year-to-Date	V	
	Primary General Other (specify)		350.00	
Γ	SUBTOTAL of Receipts This Page (optional)	1		1200.00
┢	TOTAL This Period (last page this line number		r	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12/51 (check only one) 11a X 11a 11b 11c 12 13 14 15 16 17
or f	v information copied from such Reports and S or commercial purposes, other than using the NAME OF COMMITTEE (In Full) College of American Pathologists Poli	e name and add	lress of any political committee t	on for the purpose of soliciting contributions
	Full Name (Last, First, Middle Initial) H. Phillip Deos, Dr.			Date of Receipt
-	Mailing Address 2625 Coffee Road			M M / D D / Y Y Y Y 12 11 2 2009
	City Modesto	State CA	Zip Code 95355	Transaction ID: SA11AI.36213 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		
	Name of Employer Yosemite Pathology Med Grp	Occupation Pathologi		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date 600.00	
•	Full Name (Last, First, Middle Initial) A Patricia Devine, Dr. Mailing Address 200 F Main St 302	J		Date of Receipt
	City	State	Zip Code	12222009 Transaction ID: SA11AI.36012
	Stoneham	MA	02180	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		2500.00
	Name of Employer Lowell General Hosp	Occupation Pathologi		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date 2500.00	
	Full Name (Last, First, Middle Initial) D James Faix, Dr.			Date of Receipt
	Mailing Address Stanford Univ School 3375 Hillview Ave # 56			M M / D D / Y Y Y Y 12 17 2009
	City Palo Alto	State CA	Zip Code 94304-1204	Transaction ID: SA11AI.36151 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		99.00
	Name of Employer Stanford Clinical Labs at Hillview	Occupation Pathologi	st	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date 299.00	
SL	IBTOTAL of Receipts This Page (optional)	1		2699.00
	IBTOTAL of Receipts This Page (optional) DTAL This Period (last page this line number			2699.00

	SCHEDULE A (FEC Form 3X)		eparate schedule(s)	FOR LINE NUMBER: PAGE 13/51 (check only one)
	TEMIZED RECEIPTS		ch category of the	\overline{X} 11a $\overline{11b}$ 11c $\overline{12}$
		Detail	ed Summary Page	
	Any information copied from such Reports and S or for commercial purposes, other than using the	n for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full)			
	College of American Pathologists Poli	tical Action Committ	tee	
A.	Full Name (Last, First, Middle Initial) Robert Farnham	Date of Receipt		
	Mailing Address 200 Hawthorne Ln			1 2 / D D / Y Y Y Y 1 2 0 0 9
	City		Code	Transaction ID: SA11AI.36095
	Charlotte	NC 282	204-2515	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Presbyterian Hosp	Occupation Pathologist		-
	Receipt For:	Aggregate Year-to-	Date 🔻	
	Primary General		600.00	
_	Other (specify)	0 0 0 0		
	Full Name (Last, First, Middle Initial)			
В.	Michael Christopher Flynn, Dr. Mailing Address 175 College St			Date of Receipt
	City	State Zip	Code	Transaction ID: SA11AI.36109
	Battle Creek	MI 490	17-3432	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer RML Pathologist, PC	Occupation Pathologist		-
	Receipt For:	Aggregate Year-to-	Date 🔻	
	Primary General Other (specify) ▼		1000.00	
– C.	Full Name (Last, First, Middle Initial) Michael Joseph Foley, Dr.			Date of Receipt
•	Mailing Address 2252 E Minton St			
	City	State Zip	Code	Transaction ID: SA11AI.35891
	Mesa	AZ 852	213-1400	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Banner Baywood Med Ctr	Occupation Pathologist		-
	Receipt For:	Aggregate Year-to-	Date 🔻	
	Primary General Other (specify) ▼		500.00	
Γ	SUBTOTAL of Receipts This Page (optional)		····· •	1100.00
F	TOTAL This Period (last page this line number	only)		

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SCHEDULE A (FEC Form 3	Use separate schedule(s)	FOR LINE NUMBER: PAGE 14 / 51 (check only one)
ITEMIZED RECEIPTS	for each category of the	X 11a 11b 11c 12
	Detailed Summary Page	13 14 15 16 17
Any information copied from such Reports or for commercial purposes, other than usir	for the purpose of soliciting contributions	
NAME OF COMMITTEE (In Full)		
College of American Pathologists	Political Action Committee	
Full Name (Last, First, Middle Initial) L. Jean Forest, Dr.		Date of Receipt
Mailing Address 3 Carey Dr		1 2 / D D / Y Y Y Y 1 2 0 0 9
City	State Zip Code	Transaction ID: SA11AI.36229
Ambler	PA 19002-5416	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer unaffiliated	Occupation Pathologist	
Receipt For:	Aggregate Year-to-Date V	1
Primary General		
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) C. Elliott Foucar		Date of Receipt
Mailing Address 14029 Wind Mour	ntain Road NE	12 18 2009
City	State Zip Code	Transaction ID: SA11AI.36230
Albuquerque	NM 87112-6564	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer unaffiliated	Occupation Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	-
Primary General	Aggregate Year-to-Date V	
Other (specify)	250.00	
Full Name (Last, First, Middle Initial) Elizabeth Mary Fowkes, Dr.		Date of Receipt
Mailing Address Apt 8 D 215 E 95th St		12 / 22 / 2009
City	State Zip Code	Transaction ID: SA11AI.36053
New York	NY 10128	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer Mt Sinai Schl of Med	Occupation Pathologist]
Receipt For:	Aggregate Year-to-Date V	
Primary General Other (specify) ▼	800.00	
SUBTOTAL of Receipts This Page (option	nal)	550.00
	на) Р	
TOTAL This Period (last page this line nu	mber only)	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 51 (check only one) 11a 11b 11c 12 X 11a 11b 11c 12 13 14 15 16 17		
	or for commercial purposes, other than using the	ny information copied from such Reports and Statements may not be sold or used by any person r for commercial purposes, other than using the name and address of any political committee to s				
	NAME OF COMMITTEE (In Full) College of American Pathologists Poli	tical Action	Committee			
۹.	Full Name (Last, First, Middle Initial) S. Robert Freedman Mailing Address Department of Patholo	Date of Receipt				
	815 Pollard Rd	Jgy				
	City	State	Zip Code	Transaction ID: SA11AI.35967		
	Los Gatos	CA	95032	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		250.00		
	Name of Employer Los Gatos Community Hosp	Occupation Patholog				
	Receipt For:	Aggregate	e Year-to-Date 🔻			
	Other (specify) \bigtriangledown	0 0	250.00			
- 3.	Full Name (Last, First, Middle Initial) N. Jack Gay, Dr.	•		Date of Receipt		
	Mailing Address 1102 Palm View Ave		12 / ^D ^D / ^Y ^Y ^Y ^Y ^Y			
	City	State	Zip Code	Transaction ID: SA11AI.35959		
	Belleair	<u> </u>	33756-1013	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		250.00		
	Name of Employer Diagnostic Clinic	Occupation Patholog	jist			
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻			
	Other (specify)		250.00			
-	Full Name (Last, First, Middle Initial) M Paul Gibbs, Dr.	1		Date of Receipt		
	Mailing Address 2308 Sandridge Dr			12 / ^D ^D / ^Y ^Y ^Y ^Y ^Y		
	City	State	Zip Code	Transaction ID: SA11AI.35945		
	Dayton	OH	45439-1856	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		1000.00		
	Name of Employer CompuNet Clinical Labs	Occupation Patholog	gist			
	Receipt For: Primary General	Aggregate	e Year-to-Date V 1000.00	1		
_	Other (specify)			1		
ſ	SUBTOTAL of Receipts This Page (optional)			1500.00		
	TOTAL This Period (last page this line number	only)				

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S	SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 16/51				
r	TEMIZED RECEIPTS	for each category of the	(check only one)				
		Detailed Summary Page	X 11a 11b 11c 12				
_			13 14 15 16 17				
A C	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 Polit	ical Action Committee					
∠ A.	Full Name (Last, First, Middle Initial) F. Eric Glassy, Dr.		Date of Receipt				
	Mailing Address 19951 Mariner Ave Ste	160	M M / D D / Y Y Y Y 12 16 2009				
	City	State Zip Code	Transaction ID: SA11AI.35878				
	Torrance	CA 90503-1738	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.		500.00				
	Name of Employer	Occupation					
	Little Company of Mary Ho- sp-Torrance	Pathologist					
	Receipt For:	Aggregate Year-to-Date ▼	1				
	Primary General						
	Other (specify) ▼	1250.00					
	Full Name (Last, First, Middle Initial) P Steven Goetz, Dr.		Date of Receipt				
	Mailing Address Dept of Path						
		State Zip Code	1 2 0 8 2 0 0 9 Transaction ID: SA11AI.36031				
	Mason City	· · ·					
	Mason City	IA 50401-2800	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	500.00				
	Name of Employer Mercy Med Ctr-North Iowa	Occupation	7				
		Pathologist					
	Receipt For:	Aggregate Year-to-Date 🔻					
	Primary General	750.00					
	Other (specify) v	750.00					
	Full Name (Last, First, Middle Initial) D. Jeffrey Goldstein, Dr.		Date of Receipt				
- 1	Mailing Address Dept of Pathology						
	800 Prudential Dr		12 02 2009				
	City	State Zip Code	Transaction ID: SA11AI.35894				
	Jacksonville	FL 32207	Amount of Each Receipt this Period				
	FEC ID number of contributing						
	federal political committee.		300.00				
	Name of Employer Baptist Med Ctr/Wolfson	Occupation					
	Baptist Med Ctr/Wolfson Children's Hos	Pathologist					
	Receipt For:	Aggregate Year-to-Date ▼	1				
	Primary General						
	Other (specify)	600.00					
Γ	SUBTOTAL of Receipts This Page (optional)		1300.00				
⊢	COLOTAL OF RECEIPTS THIS Taye (Optional)	P					
	TOTAL This Period (last page this line number of	only)					

SCHEDULE A (FEC Form 3		FOR LINE NUMBER: PAGE 17 / 51 (check only one)				
ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17				
Any information copied from such Reports a or for commercial purposes, other than usir	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					
NAME OF COMMITTEE (In Full)						
College of American Pathologists	Political Action Committee					
Full Name (Last, First, Middle Initial) Jacqueline Granese						
Mailing Address 240 Bent Creek D	r	M M / D D / Y Y Y Y 12 31 2009				
City	State Zip Code	Transaction ID: SA11AI.36179				
Bowling Green	KY 42103	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	500.00				
Name of Employer Univ of Tennessee HSC	Occupation Pathologist]				
Receipt For:	Aggregate Year-to-Date V]				
Other (specify)	500.00					
Full Name (Last, First, Middle Initial) F Kenneth Grant, Dr.		Date of Receipt				
Mailing Address Dept of Path Taylor at Marion		M M / D D / Y Y Y Y Y 12 / 11 / 2009				
City	State Zip Code	Transaction ID: SA11AI.36072				
Columbia	SC 29220	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	250.00				
Name of Employer Palmetto Hith Baptist	Occupation Pathologist					
Receipt For:	Aggregate Year-to-Date ▼					
Other (specify) ▼	350.00					
Full Name (Last, First, Middle Initial) G Donald Guinee, Dr.	I	Date of Receipt				
Mailing Address Dept of Path 1100 9th Ave # C6		12 ^{//} 23 [/] 2009				
City	State Zip Code	Transaction ID: SA11AI.36201				
Seattle	WA 98101-2756	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	250.00				
Name of Employer Virginia Mason Medical Ce- nter	Occupation Pathologist]				
Receipt For:	Aggregate Year-to-Date ▼					
PrimaryGeneralOther (specify) ▼	250.00					
SUBTOTAL of Receipts This Page (option	nal)	1000.00				
	mber only)					

SCHEDULE A (FEC Fo ITEMIZED RECEIPTS	rm 3X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18/51 (check only one) 11a 11b 11c 12 X 11a 11b 11c 12 13 14 15 16 17		
Any information copied from such Re or for commercial purposes, other th	ny information copied from such Reports and Statements may not be sold or used by any persor r for commercial purposes, other than using the name and address of any political committee to s				
NAME OF COMMITTEE (In Full) College of American Patholo		Committee			
Full Name (Last, First, Middle Init E Richard Halbert, Dr.	ial)		Date of Receipt		
Mailing Address 1801 16th S	t # DEPART		1 2 1 1 2 0 0 9		
City	State	Zip Code	Transaction ID: SA11AI.36061		
Greeley	CO	80631-5154	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		250.00		
Name of Employer North Colorado Med Ctr	Occupation Patholog				
Receipt For:	Aggregate	e Year-to-Date 🔻			
Other (specify)	0 0	750.00			
Full Name (Last, First, Middle Init D. Jeff Harvell, Dr.			Date of Receipt		
1730 Elton F			1 2 / D D / Y Y Y Y 2 2 0 0 9		
City Silver Caring	State	Zip Code	Transaction ID: SA11AI.35909		
Silver Spring FEC ID number of contributing federal political committee.	C	20903	Amount of Each Receipt this Period		
Name of Employer unaffiliated	Occupation Patholog				
Receipt For:	Aggregate	Year-to-Date 🔻			
Other (specify)	0 0	250.00			
Full Name (Last, First, Middle Init C. Randall Hastedt, Dr.	ial)		Date of Receipt		
Mailing Address 8144 Linden	Leaf Circle		M · M / D · D / Y · Y · Y · Y Y 12 13 2009		
City	State	Zip Code	Transaction ID: SA11AI.36048		
Columbus	OH	43235-4617	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		250.00		
Name of Employer Mount Carmel St. Ann's Ho- sp	Occupatio Patholog				
Receipt For:	Aggregate	Year-to-Date 🔻			
Other (specify)	0 0	250.00			
SUBTOTAL of Receipts This Page	(optional)		750.00		
TOTAL This Period (last page this					

	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 19/51 (check only one)			
	TEMIZED RECEIPTS		for each category of the	X 11a 11b 11c 12			
			Detailed Summary Page				
	ny information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions r for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.						
Γ	NAME OF COMMITTEE (In Full)						
	College of American Pathologists Polit	tical Action	Committee				
Ą.	Full Name (Last, First, Middle Initial) E James Haswell, Dr.	Date of Receipt					
	Mailing Address 11 Greystone Farm Ln	1		M M / D / Y			
	City	State	Zip Code	Transaction ID: SA11AI.35980			
	Westport	СТ	06880-2750	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		1000.00			
	Name of Employer Griffin Hosp	Occupatio		_			
	Receipt For:	Patholog					
	Primary General	Aggregate	e Year-to-Date 🔻	-			
	Other (specify)	0 0	1000.00				
- 3.	Full Name (Last, First, Middle Initial) L. Ryan Hendren, Dr.			Date of Receipt			
	Mailing Address 1923 S Utica Ave			M M / D D / Y Y Y Y 12 11 2009			
	City	State	Zip Code	Transaction ID: SA11AI.36127			
	Tulsa	OK	74104	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		400.00			
	Name of Employer St John Med Ctr	Occupatio					
	Receipt For:	Patholog	•	_			
	Primary General	Aggregate	e Year-to-Date 🔻	-			
	Other (specify)	8 0	400.00				
-).	Full Name (Last, First, Middle Initial) N. Gene Herbek, Dr.	1		Date of Receipt			
	Mailing Address The Pathology Center 8303 Dodge St			M M / D D / Y Y Y Y 12 22 2009			
	City	State	Zip Code	Transaction ID: SA11AI.36035			
	<u>Omaha</u>	NE	68114	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		350.00			
	Name of Employer Methodist Hospital	Occupation Patholog					
	Receipt For:	Aggregate	e Year-to-Date 🔻				
	Primary General Other (specify) ▼	0 0	1750.00]			
Γ	SUBTOTAL of Receipts This Page (optional)	I	•	1750.00			
┢			J				
	TOTAL This Period (last page this line number	only)					

	CHEDULE A (FEC Form 3X)		
п		Use separate schedule(s)	FOR LINE NUMBER: PAGE 20/51
		for each category of the	(check only one)
		Detailed Summary Page	X 11a 11b 11c 12
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the	on for the purpose of soliciting contributions o solicit contributions from such committee.	
∇	NAME OF COMMITTEE (In Full)		
	College of American Pathologists Poli	tical Action Committee	
<u>بر</u> ۸.	Full Name (Last, First, Middle Initial) Michael Kevin Herzog, Dr.	Date of Receipt	
	Mailing Address 5265 Swallow Ave		M M / D D / Y Y Y Y 12 11 2 2009
	City	State Zip Code	Transaction ID: SA11AI.35921
	Kalamazoo	MI 49009-4562	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	175.00
	Name of Employer	Occupation	-
	Name of Employer Bronson Methodist Hosp	Pathologist	
	Receipt For:	Aggregate Year-to-Date V	
	Primary General		-
	Other (specify)	375.00	
_			
	Full Name (Last, First, Middle Initial) Edward Charles Hill, Dr.		Date of Receipt
	Mailing Address Department of Patholo		
	1364 Clifton Rd NE Ri	12 23 2009	
	City	State Zip Code	Transaction ID: SA11AI.35968
	Atlanta	GA 30322-1059	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	100.00
	Name of Employer	Occupation	
	Emory Univ Hośp	Pathologist	
	Receipt For:	Aggregate Year-to-Date 🔻	
	Primary General	300.00	1
	Other (specify)		
	Full Name (Last, First, Middle Initial) Dwight Gordon Honda, Dr.		Date of Receipt
•	Mailing Address 305 Park Creek Dr		
	maning real cool 500 Tark Oreek Dr		12 16 2009
	City	State Zip Code	Transaction ID: SA11AI.36082
	Clovis	CA 93611-4426	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Pathology Associates	Occupation Pathologist	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	250.00]
Γ	SUBTOTAL of Receipts This Page (optional)		525.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 51 (check only one) 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	on for the purpose of soliciting contributions solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full) College of American Pathologists Polit	tical Action (Committee	
∠ A.	Full Name (Last, First, Middle Initial) Young Hi Hong, Dr.	Date of Receipt		
	Mailing Address Department of Patholo 410 Dewey St	1 2 / D D / Y Y Y Y 2 2 2 2 0 0 9		
	City	State	Zip Code	Transaction ID: SA11AI.36112
	Wisconsin Rapids FEC ID number of contributing federal political committee.	C	54494-4715	Amount of Each Receipt this Period
	Name of Employer Riverview Hosp	Occupatio Patholog		
	Receipt For: Primary General Other (specify) ▼	_ _	P Year-to-Date ▼ 250.00]
– В.	Full Name (Last, First, Middle Initial) H. Lydia Howard, Dr.			Date of Receipt
	Mailing Address Pathology Department 4300 Alton Road		7.0.1	1 2 / D D / Y Y Y Y 1 2 0 0 9 2 0 0 9
	City Miami Beach	State FL	Zip Code 33140	Transaction ID: SA11AI.36051 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Mt. Sinai Med Ctr	Occupatio Patholog	ist	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 900.00]
– c.	Full Name (Last, First, Middle Initial) L Jerry Hudson, Dr.			Date of Receipt
	Mailing Address 7026 Edgewater Dr			M M / D D / Y Y Y Y 12 31 2009
	City	State	Zip Code	Transaction ID: SA11AI.36117
	Mandeville FEC ID number of contributing federal political committee.	LA	70471-7415	Amount of Each Receipt this Period 1500.00
	Name of Employer Slidell Memorial Hosp	Occupatio Patholog		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 1500.00]
Γ	SUBTOTAL of Receipts This Page (optional)			2250.00
F	TOTAL This Period (last page this line number	only)	······	

~			FOR LINE NUMBER: PAGE 22/51
	CHEDULE A (FEC Form 3X)	Use separate schedul	e(s) (check only one)
П	TEMIZED RECEIPTS	for each category of th Detailed Summary Pag	
			9 13 14 15 16 17
A	ny information copied from such Reports and S r for commercial purposes, other than using the	ny person for the purpose of soliciting contributions nittee to solicit contributions from such committee.	
Ν	NAME OF COMMITTEE (In Full)		
	College of American Pathologists Polit	ical Action Committee	
Α.	Full Name (Last, First, Middle Initial) S. Mehraboon Irani, Dr.	Date of Receipt	
	Mailing Address 1100 Central Ave S.E.		M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0
	City	State Zip Code	Transaction ID: SA11AI.36096
	Albuquerque	NM 87106	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer Presbyterian Hosp	Occupation Pathologist	
	Receipt For:	Aggregate Year-to-Date V	
	Primary General	1000.	00
_	Other (specify)		
в.	Full Name (Last, First, Middle Initial) F Peter Jelsma, Dr.		Date of Receipt
	Mailing Address 4220 Harding Pike		M M / D D / Y Y Y Y 12 22 2009
	City	State Zip Code	Transaction ID: SA11AI.36140
	Nashville	TN 37205-2095	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	300.00
	Name of Employer St. Thomas Hosp	Occupation Pathologist	
	Receipt For:	Aggregate Year-to-Date V	
	Primary General Other (specify) ▼	300.	00
— C.	Full Name (Last, First, Middle Initial) R.P. Gareth Johnson, Dr.		Date of Receipt
0.	Mailing Address 13111 E 57th Street		
	City	State Zip Code	Transaction ID: SA11AI.36234
	Kansas City	MO 64133	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Unaffiliated	Occupation Pathologist	
	Receipt For:	Aggregate Year-to-Date 🔻	
	Other (specify)	250.	00
	SUBTOTAL of Receipts This Page (optional)		1550.00
	TOTAL This Period (last page this line number	only)	

	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 23 / 51		
	ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)		
			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 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 for 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 Politic	tical Action	Committee			
Α.	Full Name (Last, First, Middle Initial) G. Megha Joshi, Dr.	Date of Receipt				
	Mailing Address 2 Dana Ave			1 2 / D D / Y Y Y Y 2 0 0 9		
	City	State	Zip Code	Transaction ID: SA11AI.36008		
	Winchester	MA	01890-1010	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		38.00		
	Name of Employer Lawrence General Hosp	Occupation Patholog				
	Receipt For:	Aggregate	e Year-to-Date 🔻			
	Primary General Other (specify) ▼	0 0	380.00]		
- B.	Full Name (Last, First, Middle Initial) Ernst Christian Keller, Dr.	I		Date of Receipt		
	Mailing Address VC14-215 622 W 168Th St			M M / D D / Y Y Y Y Y 12 30 2009		
	City	State	Zip Code	Transaction ID: SA11AI.36058		
	New York	NY	10032-3725	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		250.00		
	Name of Employer New York Presb Hosp/Colum-	Occupatio				
	bia Presb Receipt For:	Patholog	•			
	Primary General	Aggregat	e Year-to-Date 🔻	1		
	Other (specify)	0 0	250.00			
- С.	Full Name (Last, First, Middle Initial) D Mark Kolins, Dr.	•		Date of Receipt		
	Mailing Address 3601 W. 13 Mile Road			M M / D D / Y Y Y Y Y 12 08 2009		
	City	State	Zip Code	Transaction ID: SA11AI.36211		
	Royal Oak	MI	48073-6769	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		500.00		
	Name of Employer William Beaumont Hosp	Occupation Patholog				
	Receipt For:	Aggregat	e Year-to-Date 🔻			
	Other (specify)	0 0	500.00			
ſ	SUBTOTAL of Receipts This Page (optional)	I		788.00		
┝						
	TOTAL This Period (last page this line number	only)				

			FOR LINE NUMBER: PAGE 24/51				
	SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	(check only one)				
	ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12				
1		13 14 15 16 17					
		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 s					
	NAME OF COMMITTEE (In Full)						
	College of American Pathologists Politic	cal Action Committee					
A .	Full Name (Last, First, Middle Initial) A. Laurel Krause, Dr.	Date of Receipt					
	Mailing Address 20305 Manor Rd		M M / D D / Y Y Y Y 12 21 2009				
	City	State Zip Code	Transaction ID: SA11AI.35876				
	Shorewood	MN 55331-8783	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.		250.00				
	Name of Employer United Hosp of St Paul	Occupation	-				
		Pathologist	_				
	Receipt For:	Aggregate Year-to-Date ▼					
	Other (specify)	250.00					
		0 0 0 0 0 0 0 0 0					
в.	Full Name (Last, First, Middle Initial) L Kathryn Lane, Dr.		Date of Receipt				
	Mailing Address Ste 108	M M / D D / Y Y Y Y					
	2904 Westcorp Blvd SW						
	City Huntsville	State Zip Code AL 35805-6436	Transaction ID: SA11AI.36083				
			_ Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.		200.00				
	Name of Employer Pathology Associates PC	Occupation	7				
		Pathologist	_				
	Receipt For: Primary General	Aggregate Year-to-Date 🔻					
	Other (specify) ▼	450.00					
~	Full Name (Last, First, Middle Initial)						
C.	L. Rosanna Lapham, Dr. Mailing Address 101 East Wood Street		Date of Receipt				
			12 28 2009				
	City	State Zip Code	Transaction ID: SA11AI.35931				
	<u>Spartanburg</u>	SC 29303	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	250.00				
	Name of Employer Spartanburg Pathology Ass-	Occupation	7				
	ociates, PA Receipt For:	Pathologist	_				
	Primary General	Aggregate Year-to-Date					
	Other (specify)	750.00					
	SUBTOTAL of Receipts This Page (optional)	•••••	700.00				
	TOTAL This Period (last page this line number of	nly) 🕨					

	SCHEDULE A (FEC Form 3X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 51 (check only one) (check only one) X 11a 11b 11c 12 13 14 15 16 17
	or for commercial purposes, other than using th	Statements may not be sold or used by any person e 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) College of American Pathologists Pol	itical Action Committee	
۷ A.	Full Name (Last, First, Middle Initial) Antonio Manuel Leal, Dr.		Date of Receipt
	Mailing Address Department of Pathol 131 SW 15th St	ogy	12 / D D / Y Y Y Y 16 2009
	City	State Zip Code	Transaction ID: SA11AI.36054
	Ocala	FL 34471-6529	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	100.00
	Name of Employer Munroe Regional Med Ctr	Occupation Pathologist	
	Receipt For:	Aggregate Year-to-Date V	
	 Primary General Other (specify) ▼ 	350.00]
- В.	Full Name (Last, First, Middle Initial) Edgar John Lewis, Dr.		Date of Receipt
	Mailing Address 7412 Perfect Dr		M M / D D / Y Y Y Y 12 22 2009
	City	State Zip Code	Transaction ID: SA11AI.36160
	Durant	OK 74701-8449	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		500.00
	Name of Employer Texoma Pathology Associat- es	Occupation Pathologist	
	Receipt For: Primary General	Aggregate Year-to-Date V	_
	Other (specify) ▼	500.00	
- C.	Full Name (Last, First, Middle Initial) P Rodger Lewis, Dr.		Date of Receipt
	Mailing Address PO Box 870 1209 Bishop ST		M M / D D / Y Y Y Y Y 12 28 2009
	City Union City	State Zip Code TN 38281-0870	Transaction ID: SA11AI.35895
	FEC ID number of contributing federal political committee.	TN 38281-0870	Amount of Each Receipt this Period 250.00
	Name of Employer Baptist Memorial Hosp-Uni-	Occupation Pathologist	
	on City Receipt For:	Aggregate Year-to-Date V	_
	Primary General Other (specify) ▼	750.00]
ſ	SUBTOTAL of Receipts This Page (optional)		850.00
ŀ	TOTAL This Period (last page this line numbe		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 51 (check only one) (check 112) X 11a 11b 11c 12 13 14 15 16 17
	or for commercial purposes, other than using th	Statements may not be sold or used by any perso e name and address of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) College of American Pathologists Pol	itical Action Committee	
A.	Full Name (Last, First, Middle Initial) Claire Susan Loeffel, Dr.		Date of Receipt
	Mailing Address Dept of Path 715 N Saint Joseph A	ve	1 2 2 3 Y Y Y Y 1 2 3 2 0 0 9
	City	State Zip Code	Transaction ID: SA11AI.36017
	Hastings	NE 68901-4451	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Mary Lanning Memorial Hosp	Occupation Pathologist	
	Receipt For:	Aggregate Year-to-Date V	
	 Primary General Other (specify) ▼ 	250.00	
- В.	Full Name (Last, First, Middle Initial) David Daniel Mais, Dr.		Date of Receipt
	Mailing Address Lab 111 Dallas St		M M / D D / Y Y Y Y 12 12 2009
	City	State Zip Code	Transaction ID: SA11AI.35893
	San Antonio FEC ID number of contributing federal political committee.	TX 78205-1201	Amount of Each Receipt this Period
	Name of Employer Baptist Med Ctr	Occupation Pathologist	
	Receipt For:	Aggregate Year-to-Date ▼	
	Other (specify)	500.00]
- C.	Full Name (Last, First, Middle Initial) H Richard Marshall, Dr.		Date of Receipt
	Mailing Address Dept Of Path 1401 Foucher St		M M / D D / Y Y Y Y Y 12 30 2009
	City	State Zip Code	Transaction ID: SA11AI.36165
	New Orleans	LA 70115-3515	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		250.00
	Name of Employer Touro Infirmary	Occupation Pathologist	
	Receipt For:	Aggregate Year-to-Date ▼	
	 Primary General Other (specify) ▼ 	250.00	
ſ	SUBTOTAL of Receipts This Page (optional).	L	1000.00
	TOTAL This Period (last page this line numbe		

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A C	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Ν	NAME OF COMMITTEE (In Full)		
	angle College of American Pathologists Poli	itical Action Committee	
A.	Full Name (Last, First, Middle Initial) E John Maxwell, Dr.		Date of Receipt
	Mailing Address 109 Circle Dr		1 2 / D D / Y Y Y Y 2 2 / 2 0 0 9
	City	State Zip Code	Transaction ID: SA11AI.35900
	West Monroe	LA 71291-5303	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Bayou Pathology, APMC	Occupation Pathologist	
	Receipt For:	Aggregate Year-to-Date V	
	Primary General	250.00	
	Other (specify)		
в	Full Name (Last, First, Middle Initial) Adalberto Mendoza		Date of Receipt
В.	Mailing Address PO Box 10729		$\begin{array}{c c} & \text{Date of Receipt} \\ \hline \\ & 12 \end{array} / \begin{array}{c} D & D \\ 11 \end{array} / \begin{array}{c} Y & Y & Y \\ 2 & 0 & 0 \end{array}$
	City	State Zip Code	Transaction ID: SA11AI.36041
	Ponce	PR 00732	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	100.00
	Name of Employer Southern Pathology Servic- es Inc	Occupation Pathologist	
	Receipt For:	Aggregate Year-to-Date V	
	Primary General Other (specify) ▼	450.00	
– c.	Full Name (Last, First, Middle Initial) R. James Miller, Dr.		Date of Receipt
0.	Mailing Address 2916 S Brentwood Blv	/d	1 2 0 9 2 0 0 9
	City	State Zip Code	Transaction ID: SA11AI.36089
	Brentwood	MO 63144	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	125.00
	Name of Employer Pathology Services	Occupation Pathologist	
	Receipt For:	Aggregate Year-to-Date V	
	Primary General Other (specify) ▼	325.00	
	SUBTOTAL of Receipts This Page (optional)	·	475.00
	TOTAL This Period (last page this line number	·	

	2V)	FOR LINE NUMBER: PAGE 28 / 51
SCHEDULE A (FEC Form	3X) Use separate schedule(s) for each category of the	(check only one)
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NAME OF COMMITTEE (In Full)		
College of American Pathologist	s Political Action Committee	
Full Name (Last, First, Middle Initial) Gerald Minkowitz		Date of Receipt
Mailing Address 904 49th St		12 06 YYYYY 12009
City	State Zip Code	Transaction ID: SA11AI.36037
Brooklyn	NY 11219	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		500.00
Name of Employer Minkowitz Consultant Path-	Occupation Pathologist	-
ology Receipt For:	Aggregate Year-to-Date V	1
Primary General		
Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) J. Michael Mitchell, Dr.	1	Date of Receipt
Mailing Address 89 Puritan Rd		M M / D D / Y Y Y Y 12 31 2009
City	State Zip Code	Transaction ID: SA11AI.36171
Newton	MA 02468-1705	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		1000.00
Name of Employer UMass Mem Hith Care	Occupation Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	_
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial)		Data of Dessist
W. Dwight Morrow, Dr. Mailing Address Department of P	athology	Date of Receipt
801 S Washingto	on	12 29 2009
City	State Zip Code	Transaction ID: SA11AI.35966
Naperville	IL 60566-7060	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Edward Hosp	Occupation Pathologist]
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	600.00	
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14 Prospect St State Zip Code Millord MA 01757 FEC: ID number of contributing federal policial committee. C Transaction ID: SA11A1.36036 Name of Employer Millord/Whillins/le Reg Occupation Pathologist Aggregate Year-to-Date Image: Second	<i>ہ</i> ے ۹.				Date of Receipt
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	NAME OF COMMITTEE (In Full)		
	College of American Pathologists Poli		
, А.	Full Name (Last, First, Middle Initial) Walter Brian Olsen, Dr.		Date of Receipt
	Mailing Address Department of Patholo 401 W Greenlawn	ду	12 / J 2 / J 2 0 0 9
	City	State Zip Code	Transaction ID: SA11AI.35992
	Lansing	MI 48910	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Ingham Reg Med Ctr	Occupation Pathologist	_
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General	250.00	
_	Other (specify)		
в.	Full Name (Last, First, Middle Initial) A Drew Olsen, Dr.		Date of Receipt
	Mailing Address Dept of Path 718 Teaneck Rd		1 2 / D D / Y Y Y Y 1 2 0 0 9
	City	State Zip Code	Transaction ID: SA11AI.35989
	Teaneck	NJ 07666	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Holy Name Hosp	Occupation Pathologist	_
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	250.00	
C.	Full Name (Last, First, Middle Initial) A Drew Olsen, Dr.	1	Date of Receipt
С.	Mailing Address Dept of Path 718 Teaneck Rd		1 2 3 0 2 0 0 9
	City	State Zip Code	Transaction ID: SA11AI.35990
	Teaneck	NJ 07666	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	400.00
	Name of Employer Holy Name Hosp	Occupation Pathologist	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	650.00	
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Z	College of American Pathologists Polit	Ical Action Committe	ee	
Α.	Full Name (Last, First, Middle Initial) P Scott Otteson, Dr.			Date of Receipt
	Mailing Address Dept of Path 801 W Maple St			12 ^M 21 ^Y YYY 2009
	City	State Zip 0		Transaction ID: SA11AI.36166
	Farmington	NM 8740	01	Amount of Each Receipt this Period
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	Receipt For:	Aggregate Year-to-I	Date 🔻	
	Primary General Other (specify) ▼		500.00	
— В.	Full Name (Last, First, Middle Initial) N. Ronald Padgett, Col			Date of Receipt
	Mailing Address Acadiana Path 419 E Prudhomme St			12 ^{// Y} Y Y Y Y 12 ^{// 30} / 2009
	City	State Zip (Transaction ID: SA11AI.36091
		LA 705	71	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			1000.00
	Name of Employer Pecot & Padgett APMC	Occupation Pathologist		
	Receipt For: Primary General Other (specify) ♥	Aggregate Year-to-I	Date 1000.00	
	Full Name (Last, First, Middle Initial) Norman Robert Page, Dr.			Date of Receipt
	Mailing Address 315 Erin Dr			M M / D D / Y Y Y Y 12 09 2009
	City	State Zip C		Transaction ID: SA11AI.36000
	Knoxville	<u>TN 379</u>	19-6202	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Knoxville Dermatopathology Laboratorie	Occupation Pathologist		
	Receipt For: Primary General Other (specify) ♥	Aggregate Year-to-I	Date V 1000.00	
Γ	SUBTOTAL of Receipts This Page (optional)			1750.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 32 / 51 (check only one)
I			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
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	NAME OF COMMITTEE (In Full)			
	College of American Pathologists Poli	tical Action C	Jommittee	
۸.	Full Name (Last, First, Middle Initial) Soo Moon Park, Dr.			Date of Receipt
	Mailing Address 3101 Diamond Head F	Rd		12 21 2009
	City	State	Zip Code	Transaction ID: SA11AI.35943
	Honolulu	HI	96815-4719	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Clinical Lab of Hawaii	Occupation Patholog		
	Receipt For:	- I	Year-to-Date V	-
	Primary General Other (specify) ▼		500.00]
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3.	Full Name (Last, First, Middle Initial) A. James Paulson, Dr.			Date of Receipt
	Mailing Address 425 Anthwyn Road			M M / D D / Y Y Y Y 12 11 2 2009
	City	State	Zip Code	Transaction ID: SA11AI.36016
	Narberth	PA	19072-2301	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Lankenau Hosp	Occupation Patholog		
	Receipt For:	Aggregate	Year-to-Date V	
	Primary General Other (specify) ▼		500.00]
_	Full Name (Last, First, Middle Initial) A Luke Perkocha, Dr.	1		Date of Receipt
	Mailing Address Dept of Pathology Mailbox 1785			12 30 2009
	City	State	Zip Code	Transaction ID: SA11AI.36170
	San Francisco	CA	94143-1785	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		350.00
	Name of Employer UCSF Mount Zion Medical Center Clin	Occupation Patholog		
	Receipt For:	Aggregate	Year-to-Date V	
	Primary General Other (specify) ▼		350.00]
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	College of American Pathologists Polit	ical Action Comm	ittee	
∠ A.	Full Name (Last, First, Middle Initial) C. Alan Peterson, Dr.	Date of Receipt		
	Mailing Address 1225 Highland Ave			M M / D D / Y Y Y Y Y 12 30 2009
	City		p Code	Transaction ID: SA11AI.36079
	Clarkston	WA 99	9403	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Pathologists Regional Lab	Occupation		1
	Receipt For:	Pathologist		
	Primary General	Aggregate Year-t	1 1 1 1 1 1	
	Other (specify)	0 0 0 0	250.00	
- В.	Full Name (Last, First, Middle Initial) Abraham Philip	1		Date of Receipt
	Mailing Address Department of Patholo 10500 Montgomery Ro			M M / D D / Y Y Y Y 12 22 2009
	City		p Code	Transaction ID: SA11AI.35910
	Cincinnati	<u>OH 4</u>	5242-4402	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Bethesda North Hosp	Occupation		7
	Receipt For:	Pathologist Aggregate Year-te		
	Primary General	Aggregate rear-to		
	Other (specify)		800.00	
– C.	Full Name (Last, First, Middle Initial) C. Gary Ponto, Dr.	1		Date of Receipt
	Mailing Address 300 Oak View Ln			1 2 3 0 2 0 0 9
	City		p Code	Transaction ID: SA11AI.36114
	Santa Barbara	CA 93	3111-2546	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Santa Barbara Pathology Lab	Occupation Pathologist		
	Receipt For:	Aggregate Year-t	o-Date 🔻	
	Primary General Other (specify) ▼		250.00	
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	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 / 51 (check only one) 11c 12 X 11a 11b 11c 12 13 14 15 16 17
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	NAME OF COMMITTEE (In Full) College of American Pathologists Politi	ical Action	Committee	
⊻ A.	, Full Name (Last, First, Middle Initial) J. Robert Poppiti, Dr.			Date of Receipt
	Mailing Address Department of Patholog 4300 Alton Road	ду		M · M / D · D Y Y · Y · Y Y 1 2 2 2 2 0 0 9 2 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 1 2 1 2 1 1 2 1 1 2 1<
	City	State	Zip Code	Transaction ID: SA11AI.36052
	Miami Beach FEC ID number of contributing federal political committee.	FL C	33140	Amount of Each Receipt this Period
	Name of Employer Mt Sinai Med Ctr	Occupatio Patholog		-
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 500.00	
- В.	Full Name (Last, First, Middle Initial) Cheng John Pui, Dr. Mailing Address Dept of Path			Date of Receipt
	32669 W Warren Ste 1 City	0 State	Zip Code	12 22 2009
	Garden City	MI	48135	Transaction ID: SA11AI.35988 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Hilbrich Dermatopathology Laboratory	Occupation Patholog	jist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 🔻 500.00]
- C.	Full Name (Last, First, Middle Initial) H. Michael Reilly, Dr.			Date of Receipt
	Mailing Address Department of Patholog 223 N. Van Dien Avenu	gy ie		M M / D D / Y Y Y Y 12 07 2009
	City Ridgewood	State NJ	Zip Code 07450-2736	Transaction ID: SA11AI.36196 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		
	Name of Employer Valley Hosp	Occupation Patholog		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 500.00]
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Detailed Summary Page 113 1		SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 35/51 (check only one) X 11a 11b 11c 12
or for commercial jupposes, 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, Freis, Middle Initia) Hiddaws Department of Pathology City State City State Recipt For: Occupation Pathologist Pathologist Recipt For: Occupation Pathologist Agerogate Year-to-Date Maing Address Dept of Pathology State Zip Code Maing Address Bept of Pathology State Zip Code Maing Address Bept of Pathology State Zip Code Maing Address Beon of Receipt City				Detailed Summary Page	
College of American Pathologists Political Action Committee Full Name (Last, First, Middle Initia) Mailing Address Department of Pathology Z23 N. Van Dien Avenue City State Pathologist Mailing Address Deato of Receipt Tassaction ID: SA11AL36007 Numer (Last, First, Middle Initia) City State Primary Cocupation Pathology Pathology Pathologist Pathology City State Primary Conorral Other (specify) T <th></th> <th>Any information copied from such Reports and St or for commercial purposes, other than using the</th> <th>atements ma name and ad</th> <th>y not be sold or used by any perso dress of any political committee to</th> <th>on for the purpose of soliciting contributions solicit contributions from such committee.</th>		Any information copied from such Reports and St or for commercial purposes, other than using the	atements ma name and ad	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.
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Other (specify) ▼ 600.00 B. Full Name (Last, First, Middle Initial) Date of Receipt Year Source & Memorial Hosp CT 06320-4700 Preceipt For: C 750.00 Name of Employee Armount of Each Receipt this Period City State Zip Code Name of Employee Armount of Each Receipt this Period City State Zip Code Name of Employee Aggregate Year-to-Date ▼ Transaction ID: SA11AL 35984 Armount of Each Receipt this Period 12 0 0 9 Transaction ID: SA11AL 35984 Amount of Each Receipt This Period State Zip Code Mailing Address 6000 Hospital Dr Mode G3401 FEC ID number of contributing tederal political committee. C Amount of Each Receipt this Period FEC ID number of contributing tederal political committee. C Amount of Each Receipt this Period FEC ID number of contributing tederal political committee. C Amount of Each Receipt this Period FEC ID number of contributing tederal political committee. C State State State State State State State State State <			¥		1
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	NAME OF COMMITTEE (In Full) College of American Pathologists Polit			
Z	Full Name (Last, First, Middle Initial)			
۹.	T. David Rowlands, Dr. Mailing Address 13804 Cypress Village	e Circle		Date of Receipt
	City	State	Zip Code	Transaction ID: SA11AI.36255
	<u>Tampa</u>	FL	33618-8406	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Unaffiliated	Occupation Pathologist	1	
	Receipt For:	Aggregate Y	ear-to-Date 🔻	_
	Primary General Other (specify) ▼		250.00]
	Full Name (Last, First, Middle Initial) L Rachel Rucker-Schmidt, Dr.	1		Date of Receipt
	Mailing Address 3413 Southwestern Blv	vd		12 18 Y Y Y Y 12 18 2009
	City	State	Zip Code	Transaction ID: SA11AI.36023
	Dallas	TX	75225-7656	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer MD Pathology	Occupation Pathologist	t	
	Receipt For: Primary General	Aggregate Y	ear-to-Date 🔻	
	Other (specify)		500.00	
;.	Full Name (Last, First, Middle Initial) Kathie Schlesinger			Date of Receipt
	Mailing Address Central Bldg Rm 312 111 E 210th St			1 2 / D D / Y Y Y Y 2 0 0 9
	City	State	Zip Code	Transaction ID: SA11AI.35882
	Bronx	NY	10467-2401	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Montefiore Med Ctr	Occupation Pathologist	t	
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	ear-to-Date 300.00]
	SUBTOTAL of Receipts This Page (optional)	<u> </u>		850.00
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	SCHEDULE A (FEC Form 3X)		Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 37 / 51 (check only one)						
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	NAME OF COMMITTEE (In Full) College of American Pathologists Polit	tical Action	Committee							
∠ A.	Full Name (Last, First, Middle Initial) C. William Silberman, Dr.			Date of Receipt						
	Mailing Address 30 Orchard Cove Ln			M M / D D / Y Y Y Y 12 16 2009						
	City	State	Zip Code	Transaction ID: SA11AI.36258						
	Callao	VA	22435	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		100.00						
	Name of Employer unaffiliated	Occupation Patholog								
	Receipt For: Primary General	Aggregat	te Year-to-Date 🔻							
	Other (specify) v		600.00							
- В.	Full Name (Last, First, Middle Initial) E. Charles Slonaker, Dr.			Date of Receipt						
	Mailing Address 24410 Oaklawn Planta	ation Rd		12 18 Y Y Y Y 12 18 2009						
	City	State	Zip Code	Transaction ID: SA11AI.36028						
	Pass Christian	MS	39571	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		1000.00						
	Name of Employer Garden Park Medical Center	Occupation Patholog	gist							
	Receipt For: Primary General Other (specify) ▼	Aggregat	te Year-to-Date 2000.00							
- C.	Full Name (Last, First, Middle Initial) M Gregory Smith, Dr.			Date of Receipt						
	Mailing Address 712 S Cascade St			M M / D D / Y Y Y Y 12 01 2009						
	City	State	Zip Code	Transaction ID: SA11AI.36006						
	Fergus Falls	MN	56537-2913	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		100.00						
	Name of Employer Lake Region Hosp	Occupation Patholog								
	Receipt For: Primary General Other (specify)	Aggregat	te Year-to-Date ▼ 350.00							
Г										
	SUBTOTAL of Receipts This Page (optional)			▶ <u>1200.00</u>						
	TOTAL This Period (last page this line number	only)								

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X) Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 / 51 (check only one) (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports a or for commercial purposes, other than using	Ind Statements may not be sold or used by any person g the name and address of any political committee to s	n for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) College of American Pathologists	Political Action Committee	
Full Name (Last, First, Middle Initial) Grazia Maria Sparacino, Dr.		Date of Receipt
Mailing Address PO Box 187		12 ^{//} 22 [/] 2009
City	State Zip Code	Transaction ID: SA11AI.35913
Cleveland	MS 38732-0187	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Bolivar County Hospital	Occupation Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) O. V. Speights, Dr.	1	Date of Receipt
Mailing Address Department of Pat 2401 S. 31st Stree	t	12 / D D / Y Y Y Y 12 07 2009
City	State Zip Code	Transaction ID: SA11AI.36115
Temple	TX 76508-6508	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Scott and White Memorial Hosp Receipt For:	Occupation Pathologist Aggregate Year-to-Date	-
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) F. Janet Stastny, Dr.	I	Date of Receipt
Mailing Address 2400 Susannah St PO Box 2484		M M / D / Y
City	State Zip Code	Transaction ID: SA11AI.36066
Johnson City	TN 37601	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Outpatient Cytopathology Ctr	Occupation Pathologist	
Receipt For:	Aggregate Year-to-Date 🔻	
Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (option	al)	2000.00
	nber only)	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	X) Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 39 / 51 (check only one) (check only one) X 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports a or for commercial purposes, other than usin	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 a							
NAME OF COMMITTEE (In Full) College of American Pathologists	Political Action Committee							
Full Name (Last, First, Middle Initial) L John Stavinoha, Dr.		Date of Receipt						
Mailing Address Department of Pat 7600 Beechnut St	thology FL2							
City	State Zip Code	Transaction ID: SA11AI.36029						
Houston	TX 77074-4302	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C	500.00						
Name of Employer Memorial Hermann SW Hosp	Occupation Pathologist							
Receipt For:	Aggregate Year-to-Date V							
Other (specify) ▼	500.00							
Full Name (Last, First, Middle Initial) M. Susan Strate, Dr.		Date of Receipt						
Mailing Address 2627 San Simeon		M M / D D / Y Y Y Y 12 29 2009						
City	State Zip Code	Transaction ID: SA11AI.35998						
Wichita Falls	TX 76308	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C	1000.00						
Name of Employer Kell West Regional Hosp	Occupation Pathologist							
Receipt For:	Aggregate Year-to-Date 🔻							
Other (specify) ▼	2000.00							
Full Name (Last, First, Middle Initial) Stuart Jonathan Strauss, Dr.		Date of Receipt						
Mailing Address Lab 4230 Burnham Av	e Ste 165	M M / D D / Y Y Y Y 12 22 2009						
City	State Zip Code	Transaction ID: SA11AI.36106						
Las Vegas	NV 89119-5410	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.		500.00						
Name of Employer Quest Diagnostics Incorpo- rated	Occupation Pathologist	_						
Receipt For: Primary General	Aggregate Year-to-Date ▼							
Other (specify) ▼	500.00							
SUBTOTAL of Receipts This Page (option	nal)	2000.00						
	mber only)							

	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 40 / 51 (check only one)
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	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may n e name and addre	ot be sold or used by any perso ass of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) College of American Pathologists Politi			
Z A.	Full Name (Last, First, Middle Initial) R Arthur Summerlin, Dr.			Date of Receipt
	Mailing Address Path Lab Assoc PO Box 813			M M / D D / Y Y Y Y 12 30 2009
	City	State	Zip Code	Transaction ID: SA11AI.36088
	Dothan	AL	36302-0813	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Pathology Lab Assoc	Occupation Pathologist	l	
	Receipt For:	Aggregate Y	ear-to-Date 🔻	_
	Primary General Other (specify) ▼		250.00	
- 3.	Full Name (Last, First, Middle Initial) J Michael Teaford, Dr.	1		Date of Receipt
	Mailing Address Dept of Path 10 Medical Park Dr			M M / D D Y
	City Asheville	State NC	Zip Code 28803	Transaction ID: SA11AI.36078
	FEC ID number of contributing federal political committee.	C	20003	Amount of Each Receipt this Period
	Name of Employer Pathologists Med Lab PA	Occupation Pathologist	t	
	Receipt For:	Aggregate Y	ear-to-Date 🔻	
	Primary General Other (specify) ▼		500.00]
– C.	Full Name (Last, First, Middle Initial) S Venancio Teves, Dr.			Date of Receipt
	Mailing Address 3135 Hyde Park Pl			M M / D D / Y Y Y Y Y 12 21 2009
	City	State	Zip Code	Transaction ID: SA11AI.35970
	Pensacola	FL	32503-5845	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Illinois Valley Cmnty Hosp	Occupation Pathologist	t	
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	ear-to-Date 300.00]
Γ	SUBTOTAL of Receipts This Page (optional)		·····	800.00
F	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 41 / 51 (check only one) (check only one) X 11a 11b 11c 12 13 14 15 16 17						
	or for commercial purposes, other than using the	Any information copied from such Reports and Statements may not be sold or used by any person r for commercial purposes, other than using the name and address of any political committee to so								
	NAME OF COMMITTEE (In Full) College of American Pathologists Polit	NAME OF COMMITTEE (In Full) College of American Pathologists Political Action Committee								
۷ A.	Full Name (Last, First, Middle Initial) Olguta Diana Treaba, Dr.			Date of Receipt						
	Mailing Address 630 Smithfield Rd Apt 1201			1 2 / 3 0 / Y Y Y Y 1 2 / 3 0 / 2 0 0 9						
	City N Providence	State RI	Zip Code 02904	Transaction ID: SA11AI.36110						
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period						
	Name of Employer PhenoPath Labs	Occupation Patholog								
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 250.00]						
- B.	Full Name (Last, First, Middle Initial) S John VanHoose, Dr. Mailing Address 830 W Bayou Pines Di	r		Date of Receipt						
	City	State	Zip Code	Transaction ID: SA11AI.36075						
	Lake Charles	LA	70601-7077	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		2000.00						
	Name of Employer Path Lab	Occupation Patholog	jist							
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 2000.00]						
- C.	Full Name (Last, First, Middle Initial) Timothy Charles Via, Dr.			Date of Receipt						
	Mailing Address 1826 Greenwood Rd S	SW		12 / D D / Y Y Y Y 12 31 2009						
	City	State	Zip Code	Transaction ID: SA11AI.35929						
	Roanoke FEC ID number of contributing federal political committee.	VA C	24015-2820	Amount of Each Receipt this Period 1000.00						
	Name of Employer Carilion Clinic	Occupation Patholog								
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 1000.00]						
	SUBTOTAL of Receipts This Page (optional)	·		3250.00						
	TOTAL This Period (last page this line number	only)								

g	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 42/51						
			arate schedule(s) category of the	(check only one)						
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	Any information copied from such Reports and S or for commercial purposes, other than using the	atements may not be sold name and address of any	or used by any perso political committee to	n for the purpose of soliciting contributions						
	NAME OF COMMITTEE (In Full)									
	College of American Pathologists Polit	ical Action Committee								
Α.	Full Name (Last, First, Middle Initial) J. Michael Waldron, Dr.			Date of Receipt						
	Mailing Address Department of Patholo 8267 Elmbrook			12 / 10 / Y Y Y Y 12 10 2009						
	City	State Zip Coo		Transaction ID: SA11AI.36099						
	Dallas	TX 75247-	5247	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		100.00						
	Name of Employer Propath Laboratory, Inc.	Occupation Pathologist								
	Receipt For:	Aggregate Year-to-Dat	e 🔻							
	Primary General Other (specify)		600.00							
– В.	Full Name (Last, First, Middle Initial) Lewis Leslie Walters, Dr.			Date of Receipt						
	Mailing Address 5604 Banister Ct			12 ^{//} 07 [/] 2009						
	City	State Zip Coo		Transaction ID: SA11AI.36026						
	Plano	TX 75093-	4227	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		675.00						
	Name of Employer Medical City Dallas Hosp	Occupation Pathologist								
	Receipt For:	Aggregate Year-to-Dat	e 🔻							
	Primary General Other (specify)		675.00							
- с.	Full Name (Last, First, Middle Initial) Sue Deborah Wayler, Dr.			Date of Receipt						
	Mailing Address 29 Washington GRN			M + M / D - D / Y - Y - Y Y 1 2 2 1 2 0 0 9 2 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 1 2 1 2 1 1 1 2 1<						
	City	State Zip Coo		Transaction ID: SA11AI.35905						
	East Walpole	MA 02032-	1166	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		250.00						
	Name of Employer Beth Israel Deaconess Hosp Needham	Occupation Pathologist								
	Receipt For:	Aggregate Year-to-Dat	e 🔻							
	Primary General Other (specify)		250.00							
ſ	SUBTOTAL of Receipts This Page (optional)			1025.00						
F	TOTAL This Period (last page this line number	only)								

SCHEDULE A (FEC Fo ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 43 / 51 (check only one) (check 112 X 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such F or for commercial purposes, other th	Reports and Statements may not be sold or used by any per nan using the name and address of any political committee	son for the purpose of soliciting contributions						
	NAME OF COMMITTEE (In Full) College of American Pathologists Political Action Committee							
Full Name (Last, First, Middle In Lee Robert West, Dr.	itial)	Date of Receipt						
Mailing Address Department 7S-10 Brod	t of Path & Lab Med	12 30 Y Y Y Y 12 30 2009						
City	State Zip Code	Transaction ID: SA11AI.35920						
Greenville	NC 27834	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C	250.00						
Name of Employer East Carolina Univ	Occupation Pathologist							
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00							
Full Name (Last, First, Middle In Quincy James Whitaker, Dr.		Date of Receipt						
Mailing Address PO Box 234 1606 Watso	on Blvd	1 2 / 3 0 / Y Y Y Y 3 0 / 2 0 0 9						
City Warner Robins	State Zip Code GA 31099-2343	Transaction ID: SA11AI.36074 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.		5000.00						
Name of Employer Middle Georgia Lab, Inc	Occupation Pathologist							
Receipt For: Primary General	Aggregate Year-to-Date ▼							
Other (specify)	5000.00							
Full Name (Last, First, Middle In J Valerie White, Dr.	itial)	Date of Receipt						
Mailing Address 227 Church	St Apt 13G	12 22 2009						
City	State Zip Code	Transaction ID: SA11AI.35999						
New Haven	CT 06510-1823	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C	50.00						
Name of Employer Kings Daughters Med Ctr	Occupation Pathologist							
Receipt For: Primary General Other (specify) v	Aggregate Year-to-Date ▼ 250.00							
SUBTOTAL of Receipts This Page	e (optional)	5300.00						
TOTAL This Period (last page this	line number only)	•						

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and 3 or for commercial purposes, other than using th NAME OF COMMITTEE (In Full) College of American Pathologists Pol	e name and add	dress of any political committe	FOR LINE NUMBER: PAGE 44 / 51 (check only one) (check only one) X 11a 11b 11c 12 13 14 15 16 17 erson for the purpose of soliciting contributions at to solicit contributions from such committee. 10 10
Α.	Full Name (Last, First, Middle Initial) W Howard Wright, Dr. Mailing Address 4864 Jackson St			Date of Receipt
	City	State	Zip Code	Transaction ID: SA11AI.35962
	Monroe	LA	71202-6400	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer EA Conway Med Ctr	Occupatio Patholog		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
в.	Full Name (Last, First, Middle Initial) Bill Huiwen Xie, Dr.			Date of Receipt
	Mailing Address 8000 Wolf River Blvd	# 100		M M / D D / Y Y Y Y 12 16 2009
	City	State	Zip Code	Transaction ID: SA11AI.36086
	Germantown	TN	38138	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Pathology Group of the Mi- dsouth	Occupatio Patholog		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	►	500.00
TOTAL This Period (last page this line number only)	►	54562.00

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 45 / 51									51	
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	×	x X	ck onl 21b 27	y one) 22 28a	\square	23 28b	F	24 28c	\square	25 29	
Any Information copied from such Reports and Stater r for commercial purposes, other than using the nam			iy p	erson	for the p		se of	solio	citing co		outions	
NAME OF COMMITTEE (In Full) College of American Pathologists Political	Action Committee											
Full Name (Last, First, Middle Initial) Sun Trust Bank							i on II isbur:		SB211	3.36	284	
Mailing Address P.O. Box 85024					[™] 2	М	/ D	02		ź	٥òs	θĭ
City Richmond	StateZip CodeVA23285				Amo	unt o	f Eac	ch D	isburse	-		
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	ement For:	Cate Ty	ego ype	у/ 								
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Full Name (Last, First, Middle Initial) Sun Trust Bank							isbur	sem		3.36	285	
Mailing Address P.O. Box 85024												
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Purpose of Disbursement Suntrust Analysis Fee					L.						50.50)
Candidate Name Office Sought: House Disburs	ement For:	Cate Ty	ego ype	у/ ,								
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City Richmond	StateZip CodeVA23285				Amo	unt o	f Eac	ch D	isburse		-	
Purpose of Disbursement American Express Charge										48.72	2	
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		y Information copied from such Reports a for commercial purposes, other than using																			
	$\left \right\rangle$	NAME OF COMMITTEE (In Full) College of American Pathologists	Political A	Action C	ommitt	ee															
Α.		Full Name (Last, First, Middle Initial) Sun Trust Bank Mailing Address P.O. Box 85024									-	of D	isburs	-	SB21B ent / Y		287 0 ð 9	Y			
		City Richmond	-	State VA	Zip C 232						Amou	unt o	f Each	ו Dis	burser	-					
		Purpose of Disbursement American Express Charge									L.						55.13				
		Candidate Name						ateg Typ	-												
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		State: District:																			

	SUBTOTAL of Disbursements This Page (optional)	Þ	55.13
	TOTAL This Period (last page this line number only)	►	297.35
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		Detailed S	Summary Page			eck only 21b 27	22 28a		23 28b	24 28		25 29	
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Full Name (Last FRIENDS OF	, First, Middle Initial) DAN MAFFEI						Date o		burse				Y
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City Syracuse		State NY	Zip Code 13214				Amou	nt of	Each	Disbur		nt this F	
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Office Sought: State: NY	X House Senate President District: 25	Disbursement For: X Primary Other (spe	2010 General ccify) ▼		Type								
Full Name (Last	, First, Middle Initial) ERIK PAULSEN						Date o	of Dis	burse			-	
Mailing Address	P.O. Box 44369 250 Prairie Cente	er Drive					^M 2	M /	2	1 /	Ŷ	źoòs) Y
City Eden Prairie		State MN	Zip Code 55344				Amou	nt of	Each	Disbur	seme	nt this F	Perio
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	CHEDULE B (FEC Form 3X)	Use separate schedule	e(s)		-	R LINE	E NUMBER: PAGE 48 / 51									
	EMIZED DISBURSEMENTS	for each category of th Detailed Summary Pag	e je	Ē		21b 27	22 28a			23 28b	F		Bc		25 29	
	y Information copied from such Reports and State for commercial purposes, other than using the nar															6
	NAME OF COMMITTEE (In Full)															
$ \rangle$	College of American Pathologists Politica	I Action Committee														
<u> </u>	Full Name (Last, First, Middle Initial) FRIENDS OF JOHN BOEHNER						-			on ID sburs		SB2 nent	23.3	362	83	
	Mailing Address 7908-I Cincinnati Dayto	n Road					[™] 1		1		2	D /	Y	ž	٥òs) Y
	City West Chester	StateZip CodeOH45069					Am	ount	t of	Eac	h D	Disbu	rsei	-		Period
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	State: OH District: 08															
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	Mailing Address 509 MADISON AVE SU	IITE 1902					1	2	<i>'</i>	D	2	D /	Y	ž	0 ò s) ^Y
	City NEW YORK	StateZip CodeNY10022					Am	ount	t of	Eac	h C	Disbu	rsei		-	Period
	Purpose of Disbursement													25	00.00)
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	City WASHINGTON	State Zip Code DC 20002					Am	ount	t of	Eac	h C	Disbu	rsei	nen	t this I	Period
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City ATLANTA		State Zip Code GA 30325				Amou	nt of E	ach	Dis	burse	-	-	-	iod	
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City New Smyrna Beach		State Zip Code FL 32170				Amou	nt of E	ach	Dis	burse	-			iod	
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Candidate Name				tegory/ Гуре											
	enate resident	Dursement For: 2010 X Primary General Other (specify) V													
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City Washington		State Zip Code DC 20036				Amou	nt of E	ach	Dis	burse	-			iod	
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ITEN		SBURSEMENT	S		category of the Summary Page			21b 27	2	.) 2 8a	X	23 28b	-	24 28			25 29	2 3
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