

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

1 / 6
06/19/2000 16 : 45

1. NAME OF COMMITTEE (in full) College of American Pathologists Political Action Committee		2. FEC IDENTIFICATION NUMBER C00274944
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1350 I Street, NW Suite 500	3. <input type="checkbox"/> This committee has qualified as a multi-candidate committee (see FEC Form 1M)	
CITY, STATE, and ZIP CODE Washington DC 20005		

4. TYPE OF REPORT

- (a) April 15 Quarterly Report
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report
- July 31 Mid-Year Report (Non-election Year Only)
- Termination report
- Monthly Report Due On:
- | | | |
|--------------------------------------|---|--------------------------------------|
| <input type="checkbox"/> February 20 | <input checked="" type="checkbox"/> June 20 | <input type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31 |
- Twelfth day report preceding _____
(election type) _____
election on _____ In the State of _____
- Thirtieth day report following the General Election
on _____ In the State of _____
- (b) Is this Report an Amendment YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>05/01/2000</u> through <u>05/31/2000</u>		
6. (a) Cash on Hand, January 1, <u>2000</u>		92496.57
(b) Cash on Hand at Beginning of Reporting Period	133486.79	
(c) Total Receipts (from line 19)	2775.00	71687.25
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	136271.79	164165.82
7. Total Disbursements (from line 30)	15784.35	43678.38
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	120487.44	120487.44
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct, and complete.		
Type or Print Name of Treasurer Electronically Filed by John H. Scott		
Signature of Treasurer	Date 06/19/2000	

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

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FEC FORM 3X
(revised 9/98)

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

(PAGE 2, FEC FORM 3X)

(revised 1/1/91)

NAME OF COMMITTEE College of American Pathologists Political Action Committee		REPORT COVERING PERIOD FROM 05/01/2000 TO: 05/31/2000	
I. Receipts		COLUMN A Total This Period	COLUMN B Calendar Year
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	1500.00	35050.00	11.a.i.
ii. Unitemized	1275.00	36617.25	11.a.ii.
iii. Total	2775.00	71667.25	11.a.iii.
b. Political Party Committees	0.00	0.00	11.b.
c. Other Political Committees (such as PACs)	0.00	0.00	11.c.
d. Total Contributions	2775.00	71667.25	11.d.
12. Transfers From Affiliated/Other Party Committees	0.00	0.00	12.
13. All Loans Received	0.00	0.00	13.
14. Loan Repayments Received	0.00	0.00	14.
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00	15.
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees ..	0.00	0.00	16.
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00	17.
18. Transfers From Nonfederal Account for Joint Activity	0.00	0.00	18.
19. Total Receipts	2775.00	71667.25	19.
20. Total Federal Receipts	2775.00	71667.25	20.
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	0.00	0.00	21.a.i.
ii. Non-Federal Share	0.00	0.00	21.a.ii.
b. Other Federal Operating Expenditures	284.35	1428.38	21.b.
c. Total Operating Expenditures	284.35	1428.38	21.c.
22. Transfers to Affiliated/Other Party Committees	0.00	0.00	22.
23. Contributions to Federal Candidates/Committees and Other Political Committees	15500.00	42250.00	23.
24. Independent Expenditures (use Schedule E)	0.00	0.00	24.
25. Coordinated Expenditures Made by Party Committees (2 U.S.C 441a(d)) (use Sch. F)	0.00	0.00	25.
26. Loan Repayments Made	0.00	0.00	26.
27. Loans Made	0.00	0.00	27.
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees	0.00	0.00	28.a.
b. Political Party Committees	0.00	0.00	28.b.
c. Other Political Committees (such as PACs)	0.00	0.00	28.c.
d. Total Contributions Refunds	0.00	0.00	28.d.
29. Other Disbursements	0.00	0.00	29.
30. Total Disbursements	15784.35	43678.38	30.
31. Total Federal Disbursements	15784.35	43678.38	31.
III. Net Contributions / Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)	2775.00	71667.25	32.
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33.
34. Net Contributions (other than loans) (subtract line 33 from 32)	2775.00	71667.25	34.
35. Total Federal Operating Expenditures	284.35	1428.38	35.
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00	36.
37. Net Operating Expenditures	284.35	1428.38	37.

SCHEDULE A	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	3 / 6
			FOR LINE NUMBER 11A1

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, Mailing Address, and ZIP Code Cynthia Foss Bowman, MD 45 Knox Street Thomaston ME 04861 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Employed	Date (month, day, year) 05/08/2000	Amount of Each Receipt this Period 500.00
	Occupation Pathologist		
	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code George Branam, MD 1138 Warwick Road Muncie IN 47304 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Pathologists Associates	Date (month, day, year) 05/22/2000	Amount of Each Receipt this Period 500.00
	Occupation Pathologist		
	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code M. Elizabeth Hammond, MD 488 12th Avenue Salt Lake City UT 84103 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Utah Pathology Services, Inc.	Date (month, day, year) 05/22/2000	Amount of Each Receipt this Period 500.00
	Occupation Pathologist		
	Aggregate Year-to-Date > \$ 500.00		

SUBTOTALS of Receipts This Page (Optional)	
TOTALS This Period (last page this line number only)	1500.00

SCHEDULE B	ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	4 / 6
			FOR LINE NUMBER 21B
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NAME OF COMMITTEE (In Full) College of American Pathologists Political Action Committee			
Full Name, Mailing Address, and ZIP Code Crestar Bank 1455 New York Avenue Washington DC 20005	Purpose of Disbursement Bank Charges Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 05/02/2000	Amount of Each Disbursement This Period 284.35
SUBTOTALS of Disbursements This Page (Optional)			
TOTALS This Period (last page this line number only)			284.35

SCHEDULE B ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the Detailed Summary Page	5 / 6 FOR LINE NUMBER 23
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NAME OF COMMITTEE (In Full) College of American Pathologists Political Action Committee			
Full Name, Mailing Address, and ZIP Code berkley 349 Keating Street Henderson NV 89014	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 05/01/2000	Amount of Each Disbursement This Period 1000.00
Full Name, Mailing Address, and ZIP Code DAVID VITTER FOR CONGRESS 2520 METAIRIE ROAD METAIRIE LA 70002	Purpose of Disbursement (House - LA - 01) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 05/01/2000	Amount of Each Disbursement This Period 1000.00
Full Name, Mailing Address, and ZIP Code KENNEDY FOR SENATE 2000 426 C Street, NE Rear Building Washington DC 20002	Purpose of Disbursement (Senate - MA - 00) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 05/01/2000	Amount of Each Disbursement This Period 1000.00
Full Name, Mailing Address, and ZIP Code FRIENDS OF JENNIFER B DUNN P.O. Box 70513 Washington DC 20024	Purpose of Disbursement (House - WA - 08) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 05/12/2000	Amount of Each Disbursement This Period 1000.00
Full Name, Mailing Address, and ZIP Code JIM TURNER FOR CONGRESS COMMITTEE 205 C Street, SE Washington DC 20003	Purpose of Disbursement (House - TX - 02) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 05/12/2000	Amount of Each Disbursement This Period 500.00
Full Name, Mailing Address, and ZIP Code MINGE FOR CONGRESS PO Box 71 GRANITE FALLS MN 56241	Purpose of Disbursement (House - MN - 02) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 05/12/2000	Amount of Each Disbursement This Period 1000.00
Full Name, Mailing Address, and ZIP Code NUSSLE FOR CONGRESS PO BOX 324 MANCHESTER IA 52057	Purpose of Disbursement (House - IA - 02) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 05/12/2000	Amount of Each Disbursement This Period 1000.00
Full Name, Mailing Address, and ZIP Code PEOPLE FOR GANSKE 521 E LOCUST 2ND FLOOR DES MOINES IA 50309	Purpose of Disbursement (House - IA - 04) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 05/12/2000	Amount of Each Disbursement This Period 500.00
Full Name, Mailing Address, and ZIP Code TOM ALLEN FOR CONGRESS P.O. Box 17766 PORTLAND ME 04112-8766	Purpose of Disbursement (House - ME - 01) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 05/12/2000	Amount of Each Disbursement This Period 500.00
SUBTOTALS of Disbursements This Page (Optional)			
TOTALS This Period (last page this line number only)			

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER
23

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NAME OF COMMITTEE (In Full)
College of American Pathologists Political Action Committee

Full Name, Mailing Address, and ZIP Code UPTON FOR ALL OF US 4451 Brookfield Corporate Drive Suite 200 Chantilly VA 20151	Purpose of Disbursement (House - MI - 06)	Date (month, day, year) 05/12/2000	Amount of Each Disbursement This Period 1000.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Full Name, Mailing Address, and ZIP Code ANDREWS FOR CONGRESS COMMITTEE P.O. Box 295 Oaklyn NJ 08107	Purpose of Disbursement (House - NJ - 01)	Date (month, day, year) 05/26/2000	Amount of Each Disbursement This Period 1000.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Full Name, Mailing Address, and ZIP Code BOB MATSUI FOR CONGRESS COMMITTEE 729 15th Street, NW 3rd Floor Washington DC 20005	Purpose of Disbursement (House - CA - 05)	Date (month, day, year) 05/26/2000	Amount of Each Disbursement This Period 1000.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Full Name, Mailing Address, and ZIP Code CRANE FOR CONGRESS COMMITTEE PO BOX 8534 ROLLING MEADOWS IL 60008	Purpose of Disbursement (House - IL - 08)	Date (month, day, year) 05/26/2000	Amount of Each Disbursement This Period 1000.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Full Name, Mailing Address, and ZIP Code HASTERT FOR CONGRESS COMMITTEE PO BOX 625 BATAVIA IL 60510	Purpose of Disbursement (House - IL - 14)	Date (month, day, year) 05/26/2000	Amount of Each Disbursement This Period 1000.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Full Name, Mailing Address, and ZIP Code HATCH ELECTION COMMITTEE P.O. Box 1480 Washington DC 20013-1480	Purpose of Disbursement (Senate - UT - 00)	Date (month, day, year) 05/26/2000	Amount of Each Disbursement This Period 2000.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Full Name, Mailing Address, and ZIP Code JOHN LEWIS FOR CONGRESS 729 15th Street, NW Suite 300 Washington DC 20005	Purpose of Disbursement (House - GA - 05)	Date (month, day, year) 05/26/2000	Amount of Each Disbursement This Period 1000.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		

SUBTOTALS of Disbursements This Page (Optional)

TOTALS This Period (last page this line number only)

15500.00