

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 Psychology PAC of American Psychological Association Services Inc.

ADDRESS (number and street) PO Box 15441 Washington DC 20003 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE C C00522094 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X]

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 03 / 01 / 2019 through 03 / 31 / 2019

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Mason, David, , , Type or Print Name of Treasurer

Signature of Treasurer Mason, David, , , [Electronically Filed] Date 04 / 01 / 2019

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Psychology PAC of American Psychological Association Services Inc.

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2019"/>		153641.41
(b) Cash on Hand at Beginning of Reporting Period.....	153101.41	
(c) Total Receipts (from Line 19)	32690.00	34650.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	185791.41	188291.41
7. Total Disbursements (from Line 31).....	11519.50	14019.50
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	174271.91	174271.91
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Psychology PAC of American Psychological Association Services Inc.

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	21325.00	21325.00
(ii) Unitemized	11365.00	13325.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	32690.00	34650.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	32690.00	34650.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. 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 Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	32690.00	34650.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	32690.00	34650.00

DETAILED SUMMARY PAGE

of Disbursements

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Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	19.50	19.50
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	19.50	19.50
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	11000.00	13000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	500.00	1000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	500.00	1000.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	11519.50	14019.50
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	11519.50	14019.50

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	32690.00	34650.00
34. Total Contribution Refunds (from Line 28(d))	500.00	1000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	32190.00	33650.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	19.50	19.50
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	19.50	19.50

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 20
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
Psychology PAC of American Psychological Association Services Inc.

A. Bossolo, Luana, , Ms.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 906 S Washington St
 Apt 203
 City Alexandria State VA Zip Code 22314-4262
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Psychological Association Occupation (for Individual) Communications
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 05 / 2019
Transaction ID : A0AEFF0A2EA6947A0B3E
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Bradstreet, Tyler, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10408 Genoa Ave
 City Lubbock State TX Zip Code 79424-3954
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Texas Tech Athletics Occupation (for Individual) Clinical & Sport Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 09 / 2019
Transaction ID : A2D0005728FD840B6A6A
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Sanders, Gilbert, O, , EdD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12604 Forest Oaks Dr
 City Choctaw State OK Zip Code 73020-6682
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Psychologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 09 / 2019
Transaction ID : AC6934E86C88644879A9
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	750.00
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: (check only one)	PAGE 7 OF 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Psychology PAC of American Psychological Association Services Inc.

A. McKinnie, Michele, C, Dr., PsyD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1648 Ellis St
Ste 302

City Bozeman State MT Zip Code 59715-8811

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self Occupation (for Individual) Psychologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
365.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 09 / 2019

Transaction ID : A0AAF65C3C17C4D4690B

Amount of Each Receipt this Period
365.00

Memo Item

B. Davis, Rosie, Phillips, Dr, PhD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 409C Ball Hall

City Memphis State TN Zip Code 38152-3570

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) University of Memphis Occupation (for Individual) Psychologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 09 / 2019

Transaction ID : AD34CEAD77CDB462482A

Amount of Each Receipt this Period
500.00

Memo Item

C. McLeod, Robin, , Dr, PhD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7582 Currell Blvd
Ste 208

City Woodbury State MN Zip Code 55125-2471

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Counseling Psychologists of Woodbury, Occupation (for Individual) Psychologist

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 09 / 2019

Transaction ID : A49E7F5E0320A44C486E

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1865.00
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: (check only one)	PAGE 8 OF 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Psychology PAC of American Psychological Association Services Inc.

A. Sheras, Peter, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 E South St
 Ste 5
 City Charlottesville State VA Zip Code 22902-5217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 09 / 2019
Transaction ID : A6D850906161E4E76A4B
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. Carter, Jean, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16025 Jerald Rd
 City Laurel State MD Zip Code 20707-2653
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Washington Psychological Center Occupation (for Individual) Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 09 / 2019
Transaction ID : ABB8CA3FC84AC42E0982
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. KAMENA, MARK, , Dr., PhD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 Sagebrush Ct
 City San Rafael State CA Zip Code 94901-1591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Licensed Psychologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 09 / 2019
Transaction ID : A80D1D746A1E94173A9E
 Amount of Each Receipt this Period
 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	2500.00
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: (check only one)	PAGE 9 OF 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Psychology PAC of American Psychological Association Services Inc.

A. Nguyen, Annie, Ha, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 640
 City Kailua State HI Zip Code 96734-0640
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-employed Occupation (for Individual) Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 10 / 2019
Transaction ID : A79E4A5F21E774286898
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. Vroman Stokes, Lisa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7148 Windcrest St SE
 City Grand Rapids State MI Zip Code 49546-6848
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Spectrum Health System Occupation (for Individual) Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 10 / 2019
Transaction ID : A4C416F8B7D5E415A8B2
 Amount of Each Receipt this Period
 365.00
 Memo Item

C. McLeod, Robin, , Dr, PhD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7582 Currell Blvd Ste 208
 City Woodbury State MN Zip Code 55125-2471
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Counseling Psychologists of Woodbury, Occupation (for Individual) Psychologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 10 / 2019
Transaction ID : A290BAD9E74744DA4BA0
 Amount of Each Receipt this Period
 150.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	615.00
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: (check only one)	PAGE 10 OF 20
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Psychology PAC of American Psychological Association Services Inc.

A. Bufka, Lynn, F, Dr., PhD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12902 Ruxton Rd
 City Silver Spring State MD Zip Code 20904-5278
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Psychological Association Occupation (for Individual) Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 10 / 2019
Transaction ID : A704AE59FC0D54A81B98
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. McPherson, Susan, Eileen, Dr,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4805 Drew Ave S
 City Minneapolis State MN Zip Code 55410-1741
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Neuropsychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 10 / 2019
Transaction ID : A0581631DE7474628B34
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. McGuire, Katherine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 606 Tyson Dr
 City Falls Church State VA Zip Code 22046-3650
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APA Occupation (for Individual) Chief Advocacy Officer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 10 / 2019
Transaction ID : AA62F774C2B6C4FB4A9D
 Amount of Each Receipt this Period
 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1000.00
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: (check only one)	PAGE 11 OF 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Psychology PAC of American Psychological Association Services Inc.

A. Shullman, Sandra, L, Dr., PhD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 268 Croswell Rd
 City Columbus State OH Zip Code 43214-3010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SLS Executive Development Occupation (for Individual) Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 10 / 2019
Transaction ID : A6258BF268FA54A7F9EC
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Berry, Sharon, L, Dr, PhD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address DEPT OF PSYCHOLOGY CHILDREN'S HOSP & CLINICS OF MN
 City MINNEAPOLIS State MN Zip Code 55404-4518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Children's Minnesota Occupation (for Individual) Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 10 / 2019
Transaction ID : A0FB19580195B4D5E846
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Diaz-Granados, Jim, , Dr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 750 1st St NE FI 1-7
 City Washington State DC Zip Code 20002-4242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Psychological Association Occupation (for Individual) Deputy Chief Executive Officer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 10 / 2019
Transaction ID : A8B1E379566D74413AA2
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	2500.00
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: (check only one)	PAGE 12 OF 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Psychology PAC of American Psychological Association Services Inc.

A. Puente, Antonio, , Dr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1508 Military Cutoff Rd
Ste 202

City Wilmington State NC Zip Code 28403-5730

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self Occupation (for Individual) Psychologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 365.00

Date of Receipt 03 / 10 / 2019
Transaction ID : A6FD121B2FC854423B95

Amount of Each Receipt this Period 365.00

Memo Item

B. Colwell, James, Travis, , PhD
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 12274

City Jacksonville State NC Zip Code 28546-2274

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VA Occupation (for Individual) Psychologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 11 / 2019
Transaction ID : A9DD2BE2E09B949A89A8

Amount of Each Receipt this Period 250.00

Memo Item

c. Hahn Oh, Katharine, Jo, Dr., PhD
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16800 Van Aken Blvd
Apt 215

City Shaker Heights State OH Zip Code 44120-3650

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Cleveland State U. Occupation (for Individual) Psychologist, Director

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 03 / 11 / 2019
Transaction ID : A165C2308D90441ABAE4

Amount of Each Receipt this Period 200.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	815.00
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: (check only one)	PAGE 13 OF 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Psychology PAC of American Psychological Association Services Inc.

A. Sanders, Gilbert, O, , EdD
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12604 Forest Oaks Dr

City Choctaw	State OK	Zip Code 73020-6682
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self	Occupation (for Individual) Psychologist
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	11	/	2019

Transaction ID : A6846E01514AB40B6AB4

Amount of Each Receipt this Period
1000.00

Memo Item

B. Hahn Oh, Katharine, Jo, Dr., PhD
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16800 Van Aken Blvd
Apt 215

City Shaker Heights	State OH	Zip Code 44120-3650
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Cleveland State U.	Occupation (for Individual) Psychologist, Director
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	12	/	2019

Transaction ID : A4604C200DE8A4A6986C

Amount of Each Receipt this Period
30.00

Memo Item

C. Evans, Arthur, C, Dr, Jr
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 750 1st St NE
Apt 630

City Washington	State DC	Zip Code 20002-4241
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) American Psychological Association	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	12	/	2019

Transaction ID : A00D5CB45725B46D1841

Amount of Each Receipt this Period
2000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	3030.00
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: (check only one)	PAGE 14 OF 20
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Psychology PAC of American Psychological Association Services Inc.

A. Metzl, Marilyn, N, Dr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8080 Ward Pkwy
Ste 115

City Kansas City State MO Zip Code 64114-2020

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) APA Division 39 - Psychoanalysis Occupation (for Individual) Psychologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 18 / 2019
Transaction ID : A925CBACE8EB8423A8E9

Amount of Each Receipt this Period 250.00

Memo Item

B. Waters, Virginia, , Dr, PhD
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8 Central Ave

City Cranford State NJ Zip Code 07016-2103

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self Employed Occupation (for Individual) Psychologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 18 / 2019
Transaction ID : A23A3ED49C8FC449AA40

Amount of Each Receipt this Period 1000.00

Memo Item

C. Sammons, Morgan, T, , PhD
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1200 New York Ave NW
Ste 800

City Washington State DC Zip Code 20005-6142

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self Employed Occupation (for Individual) Psychologist

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 18 / 2019
Transaction ID : A99B3881647CD42279D5

Amount of Each Receipt this Period 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	2250.00
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: (check only one)	PAGE 15 OF 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Psychology PAC of American Psychological Association Services Inc.

A. Siegel, Alex, M, Dr., PhD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 915 Montgomery Ave
 Ste 210
 City Penn Valley State PA Zip Code 19072-1550
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Psychologist/Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 18 / 2019
Transaction ID : AB4665E9BE9FD43B19B7
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Stark, Trisha, A, Dr, PhD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 47 Groveland Ter
 City Minneapolis State MN Zip Code 55403-1104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 18 / 2019
Transaction ID : A59DCA819F7C640A59C9
 Amount of Each Receipt this Period 5000.00
 Memo Item

C. Ottaviano, Deanne M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 Hesketh St
 City Chevy Chase State MD Zip Code 20815-4224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APA Occupation (for Individual) Lawyer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 18 / 2019
Transaction ID : AA17158FDE474448082B
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	6000.00
TOTAL This Period (last page this line number only).....	21325.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Psychology PAC of American Psychological Association Services Inc.

Full Name (Last, First, Middle Initial)

A. BB&T

Mailing Address 300 S Washington St

City
Alexandria

State
VA

Zip Code
22314-5403

Purpose of Disbursement
Bank fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	1		2	0	1	9

FEC Identification Number

C

Transaction ID : B71014914A
Amount of Each Disbursement this Period

1	9	.	5	0
---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

--	--	--	--	--

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

--	--	--	--	--

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

1	9	.	5	0
---	---	---	---	---

1	9	.	5	0
---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Psychology PAC of American Psychological Association Services Inc.

Full Name (Last, First, Middle Initial)

A. GEORGIANS FOR ISAKSON

Mailing Address 1111 19th St., NW
Suite 1100

City
Washington

State
DC

Zip Code
20036-3621

Purpose of Disbursement
Contribution to committee

Candidate Name

Isakson, Johnny, , Sen.,

Office Sought: House
 Senate
 President

Disbursement For: 2022
 Primary General
 Other (specify) ▼

State: GA District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	3		0	1		2	0	1	9	0	

FEC Identification Number

C C00384693

Transaction ID : B049695EE7/

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. FRIENDS OF ROY BLUNT

Mailing Address PO BOX 10178

City
COLUMBIA

State
MO

Zip Code
65205-4002

Purpose of Disbursement
Contribution to committee

Candidate Name

Blunt, Roy, D., Sen.,

Office Sought: House
 Senate
 President

Disbursement For: 2022
 Primary General
 Other (specify)

State: MO District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	3		0	1		2	0	1	9	0	

FEC Identification Number

C C00304758

Transaction ID : BAC96D373E

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. JASON SMITH FOR CONGRESS

Mailing Address 213 Ashby St.

City
Alexandria

State
VA

Zip Code
22305-2902

Purpose of Disbursement
Contribution to committee

Candidate Name

Smith, Jason, T., Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: MO District: 08

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	3		1	4		2	0	1	9	0	

FEC Identification Number

C C00541862

Transaction ID : B32982B713!

Amount of Each Disbursement this Period

1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

4000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Psychology PAC of American Psychological Association Services Inc.

Full Name (Last, First, Middle Initial)

A. BILL CASSIDY FOR US SENATE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	22	/	2019

Mailing Address 1006 Pendelton St.

FEC Identification Number

C C00543983

Transaction ID : B3511474971

Amount of Each Disbursement this Period

5000.00

Memo Item

City
Alexandria

State
VA

Zip Code
22314-1837

Purpose of Disbursement
Contribution to committee

Category/Type

Candidate Name

Cassidy, Bill, , Sen.,

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: LA District:

Full Name (Last, First, Middle Initial)

B. BILL CASSIDY FOR US SENATE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	22	/	2019

Mailing Address 1006 Pendelton St.

FEC Identification Number

C C00543983

Transaction ID : B996A7EEC2

Amount of Each Disbursement this Period

1000.00

Memo Item

City
Alexandria

State
VA

Zip Code
22314-1837

Purpose of Disbursement
Contribution to committee

Category/Type

Candidate Name

Cassidy, Bill, , Sen.,

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify)

State: LA District:

Full Name (Last, First, Middle Initial)

C. LUCILLE ROYBAL-ALLARD FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	25	/	2019

Mailing Address 6 E STREET, SE

FEC Identification Number

C C00259143

Transaction ID : B30236642F

Amount of Each Disbursement this Period

1000.00

Memo Item

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
Contribution to committee

Category/Type

Candidate Name

Roybal-Allard, Lucille, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: CA District: 40

SUBTOTAL of Disbursements This Page (optional).....▶

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

7000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Psychology PAC of American Psychological Association Services Inc.

A. Howard, Bruce, A, Dr., PhD

Full Name (Last, First, Middle Initial)

Mailing Address 1460 7th St
Ste 300

City Santa Monica State CA Zip Code 90401-2632

Purpose of Disbursement Refund

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 21 / 2019

FEC Identification Number: C

Transaction ID : B4901394803

Amount of Each Disbursement this Period: 250.00

Memo Item

B. Lawrence, Charles, E, , PhD

Full Name (Last, First, Middle Initial)

Mailing Address 1109 Poplar Hill Rd

City Baltimore State MD Zip Code 21210-1225

Purpose of Disbursement Refund

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 21 / 2019

FEC Identification Number: C

Transaction ID : B975116D960

Amount of Each Disbursement this Period: 250.00

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	500.00