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

American Psychiatric Association Political Action Committee

ADDRESS (number and street) ▼

1000 Wilson Boulevard

Suite1825

☐ Check if different than previously reported. (ACC)

Arlington | VA | 22209 –

CITY ▲ STATE ▲ ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼** C C00373696

3. IS THIS REPORT ☒ NEW (N) **OR** ☐ AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- ☐ April 15 Quarterly Report (Q1)
- ☐ July 15 Quarterly Report (Q2)
- ☐ October 15 Quarterly Report (Q3)
- ☐ January 31 Year-End Report (YE)
- ☐ July 31 Mid-Year Report (Non-election Year Only) (MY)
- ☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)	☐ May 20 (M5)	☒ Aug 20 (M8)	☐ Nov 20 (M11) (Non-Election Year Only)
☐ Mar 20 (M3)	☐ Jun 20 (M6)	☐ Sep 20 (M9)	☐ Dec 20 (M12) (Non-Election Year Only)
☐ Apr 20 (M4)	☐ Jul 20 (M7)	☐ Oct 20 (M10)	☐ Jan 31 (YE)

(c) 12-Day **PRE**-Election Report for the: ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R) ☐ Convention (12C) ☐ Special (12S)

Election on MM / DD / YYYY in the State of

(d) 30-Day **POST**-Election Report for the: ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on MM / DD / YYYY in the State of

5. Covering Period 07 / 01 / 2015 through 07 / 31 / 2015

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 Ashley Mild

Signature of Treasurer *Ashley Mild* ***[Electronically Filed]*** Date 08 / 19 / 2015

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

Office Use Only							

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC **Form 3X** (Rev. 02/2003)

Write or Type Committee Name

American Psychiatric Association Political Action Committee

Report Covering the Period: From: 07 / 01 / 2015 To: 07 / 31 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2015		50957.47
(b) Cash on Hand at Beginning of Reporting Period	116010.48	
(c) Total Receipts (from Line 19)	19420.11	156778.74
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	135430.59	207736.21
7. Total Disbursements (from Line 31)	34106.36	106411.98
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	101324.23	101324.23
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

FEC **Form 3X** (Rev. 06/2004)

Write or Type Committee Name

American Psychiatric Association Political Action Committee

Report Covering the Period: From: 07 / 01 / 2015 To: 07 / 31 / 2015

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)	6858.11	81709.64
(ii) Unitemized	12562.00	71582.44
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	19420.11	153292.08
(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) ▶	19420.11	153292.08
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	3486.66
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)) ▶	19420.11	156778.74
20. Total Federal Receipts (subtract Line 18(c) from Line 19) ▶	19420.11	156778.74

DETAILED SUMMARY PAGE
of Disbursements

FEC **Form 3X** (Rev. 02/2003)

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	606.36	3686.98
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶	606.36	3686.98
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	33500.00	102500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(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	0.00	225.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) ▶	0.00	225.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) ▶	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	34106.36	106411.98
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) ▶	34106.36	106411.98

DETAILED SUMMARY PAGE
of Disbursements

FEC **Form 3X** (Rev. 02/2003)

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)	19420.11	153292.08
34. Total Contribution Refunds (from Line 28(d))	0.00	225.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	19420.11	153067.08
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	606.36	3686.98
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	3486.66
38. Net Operating Expenditures (subtract Line 37 from Line 36) ▶	606.36	200.32

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)
[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 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)
American Psychiatric Association Political Action Committee

A. Full Name (Last, First, Middle Initial): Mary Ann Adler Cohen
Mailing Address: 220 W 93rd St Apt 14A
City: New York | State: NY | Zip Code: 10025
FEC ID number of contributing federal political committee: C
Name of Employer: Self Employed | Occupation: Physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 350.00
Date of Receipt: 07 / 17 / 2015
Transaction ID : C3073979
Amount of Each Receipt this Period: 350.00

B. Full Name (Last, First, Middle Initial): Kenneth Z Altshuler
Mailing Address: 5323 Harry Hines Blvd
City: Dallas | State: TX | Zip Code: 75390-7201
FEC ID number of contributing federal political committee: C
Name of Employer: Univ of Texas Southwestern Medical Ctr | Occupation: Physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 07 / 02 / 2015
Transaction ID : C3072844
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial): Arlene Parsons Bennett
Mailing Address: 1 Chesney Ln
City: Erdenheim | State: PA | Zip Code: 19038-7801
FEC ID number of contributing federal political committee: C
Name of Employer: Self Employed | Occupation: Physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 365.00
Date of Receipt: 07 / 02 / 2015
Transaction ID : C3072846
Amount of Each Receipt this Period: 165.00

SUBTOTAL of Receipts This Page (optional) ▶ 1015.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Psychiatric Association Political Action Committee

A. Full Name (Last, First, Middle Initial): Louise I. Buhrmann
Mailing Address: 3960 Lake Mira Drive, Ste 1454
City: Orlando State: FL Zip Code: 32817-1646
FEC ID number of contributing federal political committee: C
Name of Employer: Self Employed
Occupation: Physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 865.00
Date of Receipt: 07/02/2015
Transaction ID : C3072843
Amount of Each Receipt this Period: 365.00

B. Full Name (Last, First, Middle Initial): Charles Peter Ciolino
Mailing Address: 36 Smithfield Ct
City: Basking Ridge State: NJ Zip Code: 07920-2779
FEC ID number of contributing federal political committee: C
Name of Employer: Self Employed
Occupation: Physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 07/24/2015
Transaction ID : C3073504
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial): L Rodger Currie
Mailing Address: 1000 Wilson Blvd., Suite 1825
City: Arlington State: VA Zip Code: 22207
FEC ID number of contributing federal political committee: C
Name of Employer: American Psychiatric Association
Occupation: Chief of Government Relations
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2916.62
Date of Receipt: 07/15/2015
Transaction ID : C3073410
Amount of Each Receipt this Period: 416.66

SUBTOTAL of Receipts This Page (optional) ▶ 1031.66

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Psychiatric Association Political Action Committee

A. Full Name (Last, First, Middle Initial): Joseph P D'Apice
Mailing Address: 545 Mill Plain Rd
City: Fairfield State: CT Zip Code: 06824-5049
FEC ID number of contributing federal political committee: C
Name of Employer: Self Employed
Occupation: Physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 350.00
Date of Receipt: 07 / 20 / 2015
Transaction ID : C3073474
Amount of Each Receipt this Period: 350.00

B. Full Name (Last, First, Middle Initial): Brian Bowles Doyle
Mailing Address: 1325 18th St NW Ste 209
City: Washington State: DC Zip Code: 20036-6501
FEC ID number of contributing federal political committee: C
Name of Employer: Self Employed
Occupation: Physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 07 / 17 / 2015
Transaction ID : C3073973
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial): Erica Fasano
Mailing Address: 501 Bishop Ln N
City: Mobile State: AL Zip Code: 36608
FEC ID number of contributing federal political committee: C
Name of Employer: Altapointe Health Systems Inc.
Occupation: Physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 230.00
Date of Receipt: 07 / 10 / 2015
Transaction ID : C3072817
Amount of Each Receipt this Period: 200.00

SUBTOTAL of Receipts This Page (optional) ▶ 800.00

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

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ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Psychiatric Association Political Action Committee

A. Full Name (Last, First, Middle Initial): Benedict Leo Gierl
Mailing Address: 610 S Maple Ave, Ste 3000
City: Oak Park State: IL Zip Code: 60304-1099
FEC ID number of contributing federal political committee: C
Name of Employer: Self Employed
Occupation: Physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 07 / 02 / 2015
Transaction ID : C3072837
Amount of Each Receipt this Period: 50.00

B. Full Name (Last, First, Middle Initial): Benedict Leo Gierl
Mailing Address: 610 S Maple Ave, Ste 3000
City: Oak Park State: IL Zip Code: 60304-1099
FEC ID number of contributing federal political committee: C
Name of Employer: Self Employed
Occupation: Physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 07 / 08 / 2015
Transaction ID : C3072852
Amount of Each Receipt this Period: 50.00

C. Full Name (Last, First, Middle Initial): Jeffrey J Kellams
Mailing Address: 850 N Meridian St
City: Indianapolis State: IN Zip Code: 46204-1098
FEC ID number of contributing federal political committee: C
Name of Employer: Midtown Mental Health Center
Occupation: Physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 07 / 17 / 2015
Transaction ID : C3073462
Amount of Each Receipt this Period: 300.00

SUBTOTAL of Receipts This Page (optional) ▶ 400.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Psychiatric Association Political Action Committee

A. Full Name (Last, First, Middle Initial): Edward Thomas Lewis
Mailing Address: 45 Sycamore Avenue, Unit 1421
City: Charleston State: SC Zip Code: 29407
FEC ID number of contributing federal political committee: C
Name of Employer: Self Employed
Occupation: Physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 313.70
Date of Receipt: 07/02/2015
Transaction ID : C3072849
Amount of Each Receipt this Period: 45.45

B. Full Name (Last, First, Middle Initial): Laurence S Lorefice
Mailing Address: 39 Ballwood Rd
City: Old Greenwich State: CT Zip Code: 06870-2332
FEC ID number of contributing federal political committee: C
Name of Employer: Self Employed
Occupation: Physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 07/17/2015
Transaction ID : C3073447
Amount of Each Receipt this Period: 400.00

C. Full Name (Last, First, Middle Initial): Susan A Minchin
Mailing Address: 225 S Meramec Ave, Ste 1221T
City: Clayton State: MO Zip Code: 63105-3521
FEC ID number of contributing federal political committee: C
Name of Employer: Self Employed
Occupation: Physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 07/29/2015
Transaction ID : C3073521
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 945.45

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Psychiatric Association Political Action Committee

A. Full Name (Last, First, Middle Initial): Stephen Lee Patt
Mailing Address: 1716 N Crilly Ct
City: Chicago State: IL Zip Code: 60614-5700
FEC ID number of contributing federal political committee: C
Name of Employer: Advocate Medical Group
Occupation: Physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 07 / 08 / 2015
Transaction ID : C3072853
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial): Vivian Blotnick Pender
Mailing Address: 145 W 86th St Apt 1C
City: New York State: NY Zip Code: 10024-3421
FEC ID number of contributing federal political committee: C
Name of Employer: Self Employed
Occupation: Physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 07 / 15 / 2015
Transaction ID : C3073412
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial): David Arnold Perry
Mailing Address: 217 Hudson St
City: Cornwall on Hudson State: NY Zip Code: 12520
FEC ID number of contributing federal political committee: C
Name of Employer: Self Employed
Occupation: Physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 07 / 20 / 2015
Transaction ID : C3073481
Amount of Each Receipt this Period: 300.00

SUBTOTAL of Receipts This Page (optional) ▶ 800.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Psychiatric Association Political Action Committee

A. Full Name (Last, First, Middle Initial): Muhamad Aly Rifai
Mailing Address: 2545 Schoenersville Rd, Fl 5
City: Bethlehem State: PA Zip Code: 18017-7300
FEC ID number of contributing federal political committee: C
Name of Employer: Lehigh Valley Hospital
Occupation: Physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 365.00
Date of Receipt: 07/08/2015
Transaction ID : C3072850
Amount of Each Receipt this Period: 365.00

B. Full Name (Last, First, Middle Initial): Nimesh B Shah
Mailing Address: 3206 Taylorsville Hwy
City: Statesville State: NC Zip Code: 28625-2965
FEC ID number of contributing federal political committee: C
Name of Employer: Self Employed
Occupation: Physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 251.00
Date of Receipt: 07/18/2015
Transaction ID : C3072813
Amount of Each Receipt this Period: 251.00

C. Full Name (Last, First, Middle Initial): John J Wernert
Mailing Address: 1776 Summerlakes Ct
City: Carmel State: IN Zip Code: 46032-9679
FEC ID number of contributing federal political committee: C
Name of Employer: Indiana Geriatric Associates
Occupation: Physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 07/24/2015
Transaction ID : C3073495
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ▶ 1616.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Psychiatric Association Political Action Committee

A.
Full Name (Last, First, Middle Initial): Patrick G Young
Mailing Address: 1126 Turner Ave
City: Dallas State: TX Zip Code: 75208-3742
FEC ID number of contributing federal political committee: C
Name of Employer: Self Employed
Occupation: Physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 250.00
Date of Receipt: 07 / 24 / 2015
Transaction ID : C3073490
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
FEC ID number of contributing federal political committee: C
Name of Employer: Occupation:
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼:
Date of Receipt: M M / D D / Y Y Y Y
Amount of Each Receipt this Period:

C.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
FEC ID number of contributing federal political committee: C
Name of Employer: Occupation:
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼:
Date of Receipt: M M / D D / Y Y Y Y
Amount of Each Receipt this Period:

SUBTOTAL of Receipts This Page (optional) ▶ 250.00

TOTAL This Period (last page this line number only) ▶ 6858.11

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
American Psychiatric Association Political Action Committee

A. Full Name (Last, First, Middle Initial): Bank of America N.A.
Mailing Address: PO Box 27025
City: Richmond State: VA Zip Code: 23261-7025
Purpose of Disbursement: Merchant Fees
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 07 / 02 / 2015
Transaction ID : D167889
Amount of Each Disbursement this Period: 503.32

B. Full Name (Last, First, Middle Initial): Bank of America N.A.
Mailing Address: PO Box 27025
City: Richmond State: VA Zip Code: 23261-7025
Purpose of Disbursement: Bank Fees
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 07 / 15 / 2015
Transaction ID : D167890
Amount of Each Disbursement this Period: 43.09

C. Full Name (Last, First, Middle Initial): PayPal, Inc.
Mailing Address: 2145 Hamilton Ave
City: San Jose State: CA Zip Code: 95125-5905
Purpose of Disbursement: Credit Card Processing Fees
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 07 / 03 / 2015
Transaction ID : D167891
Amount of Each Disbursement this Period: 59.95

SUBTOTAL of Disbursements This Page (optional) ▶ 606.36

TOTAL This Period (last page this line number only) ▶ 606.36

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
American Psychiatric Association Political Action Committee

A. Full Name (Last, First, Middle Initial): Friends of Joe Heck
Mailing Address: PO Box 753908
City: Las Vegas State: NV Zip Code: 89136
Purpose of Disbursement: Contribution
Candidate Name: Joe Heck
Office Sought: ☐ House ☒ Senate ☐ President
State: NV District:
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Category/Type:
Date of Disbursement: 07 / 15 / 2015
Transaction ID : D167900
Amount of Each Disbursement this Period: 2500.00

B. Full Name (Last, First, Middle Initial): GUTHRIE FOR CONGRESS
Mailing Address: PO Box 9639
City: Bowling Green State: KY Zip Code: 42102
Purpose of Disbursement: Contribution
Candidate Name: Rep. Brett Guthrie
Office Sought: ☒ House ☐ Senate ☐ President
State: KY District: 02
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Category/Type:
Date of Disbursement: 07 / 15 / 2015
Transaction ID : D167898
Amount of Each Disbursement this Period: 2500.00

C. Full Name (Last, First, Middle Initial): PASCRELL FOR CONGRESS
Mailing Address: P.O. Box 640
City: Totowa State: NJ Zip Code: 07511
Purpose of Disbursement: Contribution
Candidate Name: Mr. William J. Pascrell Jr.
Office Sought: ☒ House ☐ Senate ☐ President
State: NJ District: 09
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Category/Type:
Date of Disbursement: 07 / 15 / 2015
Transaction ID : D167897
Amount of Each Disbursement this Period: 1500.00

SUBTOTAL of Disbursements This Page (optional) ▶ 6500.00

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
American Psychiatric Association Political Action Committee

A. Full Name (Last, First, Middle Initial)
CHARLES BOUSTANY JR. MD FOR CONGRESS, INC.

Mailing Address PO Box 80126

City: Lafayette State: LA Zip Code: 70598

Purpose of Disbursement: Contribution

Candidate Name: Rep. Charles Boustany Jr.

Category/Type

Office Sought: ☒ House ☐ Senate ☐ President

State: LA District: 03

Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 07 / 15 / 2015

Transaction ID : D167895

Amount of Each Disbursement this Period: 2500.00

B. Full Name (Last, First, Middle Initial)
UPTON FOR ALL OF US

Mailing Address P.O. Box 490

City: St. Joseph State: MI Zip Code: 49085

Purpose of Disbursement: Contribution

Candidate Name: Rep. Fred Upton

Category/Type

Office Sought: ☒ House ☐ Senate ☐ President

State: MI District: 06

Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 07 / 15 / 2015

Transaction ID : D167902

Amount of Each Disbursement this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
BILIRAKIS FOR CONGRESS

Mailing Address PO BOX 606

City: TARPON SPRINGS State: FL Zip Code: 34688

Purpose of Disbursement: Contribution

Candidate Name: Rep. Gus Bilirakis

Category/Type

Office Sought: ☒ House ☐ Senate ☐ President

State: FL District: 12

Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 07 / 17 / 2015

Transaction ID : D167905

Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 4500.00

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)
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
American Psychiatric Association Political Action Committee

A. Full Name (Last, First, Middle Initial): FRIENDS OF JOE PITTS
Mailing Address: PO BOX 775
City: Unionville State: PA Zip Code: 19375
Purpose of Disbursement: Contribution
Candidate Name: Rep. Joe Pitts
Office Sought: ☒ House ☐ Senate ☐ President
State: PA District: 16
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Category/Type:
Date of Disbursement: 07 / 15 / 2015
Transaction ID : D167894
Amount of Each Disbursement this Period: 1000.00

B. Full Name (Last, First, Middle Initial): JOE KENNEDY FOR CONGRESS
Mailing Address: PO BOX 590464
City: NEWTON CENTER State: MA Zip Code: 02459
Purpose of Disbursement: Contribution
Candidate Name: Rep. Joseph P. Kennedy III
Office Sought: ☒ House ☐ Senate ☐ President
State: MA District: 04
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Category/Type:
Date of Disbursement: 07 / 22 / 2015
Transaction ID : D167909
Amount of Each Disbursement this Period: 2500.00

C. Full Name (Last, First, Middle Initial): KEVIN MCCARTHY FOR CONGRESS
Mailing Address: PO Box 12667
City: Bakersfield State: CA Zip Code: 93389
Purpose of Disbursement: Contribution
Candidate Name: Rep. Kevin McCarthy
Office Sought: ☒ House ☐ Senate ☐ President
State: CA District: 23
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Category/Type:
Date of Disbursement: 07 / 15 / 2015
Transaction ID : D167901
Amount of Each Disbursement this Period: 2500.00

SUBTOTAL of Disbursements This Page (optional) ▶ 6000.00

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)
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
American Psychiatric Association Political Action Committee

A. Full Name (Last, First, Middle Initial): MARSHA BLACKBURN FOR CONGRESS INC.
Mailing Address: PO Box 3750
City: Brentwood State: TN Zip Code: 37024
Purpose of Disbursement: Contribution
Candidate Name: Rep. Marsha Blackburn
Category/Type:
Office Sought: ☒ House ☐ Senate ☐ President
State: TN District: 07
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 15 / 2015
Transaction ID : D167903
Amount of Each Disbursement this Period: 1000.00

B. Full Name (Last, First, Middle Initial): MIKE KELLY FOR CONGRESS
Mailing Address: PO BOX 476
City: LYNDORA State: PA Zip Code: 16045
Purpose of Disbursement: Contribution
Candidate Name: Rep. Mike Kelly
Category/Type:
Office Sought: ☒ House ☐ Senate ☐ President
State: PA District: 03
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 22 / 2015
Transaction ID : D167910
Amount of Each Disbursement this Period: 1000.00

C. Full Name (Last, First, Middle Initial): MIKE THOMPSON FOR CONGRESS
Mailing Address: 5429 Madison Avenue
City: Sacramento State: CA Zip Code: 95841
Purpose of Disbursement: Contribution
Candidate Name: Rep. Mike Thompson
Category/Type:
Office Sought: ☒ House ☐ Senate ☐ President
State: CA District: 05
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 15 / 2015
Transaction ID : D167899
Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 3000.00

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
American Psychiatric Association Political Action Committee

A. Full Name (Last, First, Middle Initial): RYAN FOR CONGRESS
Mailing Address: P. O. Box 1919
City: Janesville State: WI Zip Code: 53547
Purpose of Disbursement: Contribution
Candidate Name: Rep. Paul D. Ryan
Office Sought: ☒ House ☐ Senate ☐ President
State: WI District: 01
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Category/Type:
Date of Disbursement: 07 / 15 / 2015
Transaction ID : D167893
Amount of Each Disbursement this Period: 2500.00

B. Full Name (Last, First, Middle Initial): FRIENDS OF ROSA DELAURO
Mailing Address: 12 TRUMBULL STREET
City: NEW HAVEN State: CT Zip Code: 06511
Purpose of Disbursement: Contribution
Candidate Name: Rep. Rosa DeLauro
Office Sought: ☒ House ☐ Senate ☐ President
State: CT District: 03
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Category/Type:
Date of Disbursement: 07 / 15 / 2015
Transaction ID : D167896
Amount of Each Disbursement this Period: 1000.00

C. Full Name (Last, First, Middle Initial): TIM MURPHY FOR CONGRESS
Mailing Address: P.O. BOX 24551
City: PITTSBURGH State: PA Zip Code: 15234
Purpose of Disbursement: Contribution
Candidate Name: Rep. Tim Murphy
Office Sought: ☒ House ☐ Senate ☐ President
State: PA District: 18
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Category/Type:
Date of Disbursement: 07 / 15 / 2015
Transaction ID : D167892
Amount of Each Disbursement this Period: 1500.00

SUBTOTAL of Disbursements This Page (optional) ▶ 5000.00

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)
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NAME OF COMMITTEE (In Full)
American Psychiatric Association Political Action Committee

A. Full Name (Last, First, Middle Initial): PRICE FOR CONGRESS
Mailing Address: P.O. Box 425
City: Roswell State: GA Zip Code: 30077
Purpose of Disbursement: Contribution
Candidate Name: Rep. Tom Price
Category/Type:
Office Sought: ☒ House ☐ Senate ☐ President
State: GA District: 06
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 22 / 2015
Transaction ID : D167907
Amount of Each Disbursement this Period: 4000.00

B. Full Name (Last, First, Middle Initial): PRICE FOR CONGRESS
Mailing Address: P.O. Box 425
City: Roswell State: GA Zip Code: 30077
Purpose of Disbursement: Contribution
Candidate Name: Rep. Tom Price
Category/Type:
Office Sought: ☒ House ☐ Senate ☐ President
State: GA District: 06
Disbursement For: 2016 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 07 / 22 / 2015
Transaction ID : D167908
Amount of Each Disbursement this Period: 1000.00

C. Full Name (Last, First, Middle Initial): BEN CARDIN FOR SENATE, INC.
Mailing Address: P.O. BOX 21093
City: CATONSVILLE State: MD Zip Code: 21228
Purpose of Disbursement: Contribution
Candidate Name: Sen. Benjamin L. Cardin
Category/Type:
Office Sought: ☐ House ☒ Senate ☐ President
State: MD District:
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 17 / 2015
Transaction ID : D167906
Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 6000.00

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)
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
American Psychiatric Association Political Action Committee

A.
Full Name (Last, First, Middle Initial): FRIENDS OF JOHN THUNE
Mailing Address: PO BOX 841
City: SIOUX FALLS State: SD Zip Code: 57101
Purpose of Disbursement: Contribution
Candidate Name: Sen. John Thune
Category/Type:
Office Sought: ☐ House ☒ Senate ☐ President
State: SD District:
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: M M 07 / D D 15 / Y Y Y Y 2015
Transaction ID : D167904
Amount of Each Disbursement this Period: 2500.00

B.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: M M / D D / Y Y Y Y
Amount of Each Disbursement this Period:

C.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: M M / D D / Y Y Y Y
Amount of Each Disbursement this Period:

SUBTOTAL of Disbursements This Page (optional) ▶ 2500.00

TOTAL This Period (last page this line number only) ▶ 33500.00