Image# 14952885289			_		PAGE 1 / 27
	PORT OF R ND DISBURS Other Than An Author	EMENT	s	0#	
1. NAME OF TYP	E OR PRINT V	Example: If typi	ng, type		lse Only
COMMITTEE (in full)		over the lines.		2FE4M5	
American Psychiatric Ass	ociation Political Act				
ADDRESS (number and street)	000 Wilson Boulevard				
	uite1825				
then providually	rlington			VA 2220	9
2. FEC IDENTIFICATION NUMB	ER V CITY	x	ST	ATE 🔺	ZIP CODE
C C00373696	3. IS TI REP		NEW (N) OR	AMENDED (A)	
(Choose One) (a) Quarterly Reports:	b) Monthly Report Due On: Apr 20	(M3)	May 20 (M5) Jun 20 (M6) Jul 20 (M7)	Aug 20 (M8) Sep 20 (M9) Oct 20 (M10)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE)
April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15	(c) 12-Day PRE-Election Report for the:	Primary (12F		General (12G) Special (12S)	Runoff (12R)
Quarterly Report (Q3) January 31 Year-End Report (YE)	Election o	n/	D D / Y	Y Y Y Y	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST -Election Report for the:	General (300	G)	Runoff (30R)	Special (30S)
Termination Report (TER)	Election o	n 11	04 / Y	2014	in the State of VA
5. Covering Period	16 / Y Y Y Y Y 2014	through	M M /		14
I certify that I have examined this R Type or Print Name of Treasurer	eport and to the best of my cott Barnes	knowledge and	belief it is true,	correct and comple	ete.
Signature of Treasurer	es	[Electronicall	y Filed] Dat		⁷ 2014
NOTE: Submission of false, erroneous	, or incomplete information m	ay subject the per	son signing this	Report to the penalt	ies of 2 U.S.C. §437g.
Office Use Only					FORM 3X Rev. 12/2004

12/04/2014 16 : 24

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SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

Page 2

Write or Type Committee Name

FEC Form 3X (Rev. 02/2003)

American Psychiatric Association Political Action Committee

R	eport Covering the Period: From:	10 / D D / Y Y Y Y 16 2014	To: 11 / D D / Y Y Y Y 24 / 2014
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2014		47565.94
	(b) Cash on Hand at Beginning of Reporting Period	26710.16	
	(c) Total Receipts (from Line 19)	31865.85	193886.99
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	58576.01	241452.93
7.	Total Disbursements (from Line 31)	9961.12	192838.04
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	48614.89	48614.89
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

X

	- DE	TAILED SUMMARY PAGE of Receipts	Г
	FEC Form 3X (Rev. 06/2004)		Page 3
	Irite or Type Committee Name		
F	American Psychiatric Association Pol	litical Action Committee	
R	eport Covering the Period: From: 10	/ D D / Y Y Y Y 16 2014 To	b: 11 / 24 / Y Y Y Y Y 2014
	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	14569.99	91302.98
	(i) Itemized (use Schedule A)	14509.39	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	(ii) Unitemized	17204.00	97913.50
	(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	31773.99	189216.48
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees	0.00	0.00
	(such as PACs) (d) Total Contributions (add Lines		7 7 7
	11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	31773.99	189216.48
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)	91.86	3670.51
16.	Refunds of Contributions Made		
	to Federal Candidates and Other Political Committees	0.00	1000.00
17.	Other Federal Receipts		0.00
18.	(Dividends, Interest, etc.) Transfers from Non-Federal and Levin Funds	0.00	
	(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))▶	31865.85	193886.99
20.	Total Federal Receipts		400000.00
	(subtract Line 18(c) from Line 19)►	31865.85	193886.99

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DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)	of Disbursements	Page 4
II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
 Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4) 		Calendar fear-to-Date
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	311.12	30568.04
(c) Total Operating Expenditures		
(add 21(a)(i), (a)(ii), and (b))►	311.12	30568.04
Committees	0.00	0.00
Contributions to Federal Candidates/Committees and Other Political Committees	9500.00	162000.00
Independent Expenditures	0.00	0.00
(use Schedule E) Coordinated Party Expenditures (2 U.S.C. §441a(d))		
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans Made	0.00	0.00
Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	150.00	270.00
	0.00	0.00
(b) Political Party Committees(c) Other Political Committees	0.00	
(such as PACs)	0.00	0.00
(d) Total Contribution Refunds	150.00	270.00
(add Lines 28(a), (b), and (c))►		
Other Disbursements	0.00	0.00
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
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c)).	9961.12	192838.04
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	9961.12	192838.04
from Line 31)	9961.12	192838.0

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DETAILED SUMMARY PAGE

of Disbursements

III. Net Contributions/Operating Ex- penditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date				
 Total Contributions (other than loans) (from Line 11(d), page 3) 	31773.99	189216.48				
 Total Contribution Refunds (from Line 28(d)) 	150.00	270.00				
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	31623.99	188946.48				
 add Line 21(a)(i) and Line 21(b)) 	311.12	30568.04				
 Offsets to Operating Expenditures (from Line 15, page 3) 	91.86	3670.51				
 Net Operating Expenditures (subtract Line 37 from Line 36) 	219.26	26897.53				

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

(check only one)

PAGE 6 OF

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of solicitized committees. 13 14 15 16 17 NAME OF COMMITTEE (in Full) American Psychiatric Association Political Action Committee 500.001 0010000000000000000000000000000000000				Detailed Summary Page	×	11a		11b	11c		12	
ar for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF CONMITTEE (in First, Middle Initial) A. William Arroyo Mailing Address 4034 Witzel Dr City State Zip Code PEC ID number of contributing federal political committee. Receipt For: General Other (specify) ↓ State B. Lama Bazzi Aggregate Vear-to-Date ▼ Mailing Address 9 Cedar Dr Other (specify) ↓ FEC ID number of contributing federal political committee. Date of Receipt Interventibuling federal political committee. B. Lama Bazzi Mailing Address 114 Prospect Pl Act 1 City Approach Receipt For: General Primary General City B. Lama Bazzi Date of Receipt Interventibuling federal political committee. Date of Receipt Interventibuling federal political committee. Receipt For: Qagregate Vear-to-Date ▼ Date of Receipt Interventibuling federal political committee. Name of Employer Occupation State Zip Code Mailing Address 9 Cedar Dr Mailing Address 9 Cedar Dr Date of Receipt Interventibuling federal political committee. City	Ar	y information copied from such Reports and S	statements ma	ay not be sold or used by any p	erson	13 for the	pur	14 pose of	15 soliciting		16 ntribut	17 ions
American Psychiatric Association Political Action Committee Full Name (Last, First, Middle Initial) A. William Arroyo Mailing Address 4034 Wirzel Dr City State Seff Engloyer Poccupation Primary General Other (specify) ▼ Buildy Address 9 Code (specify) ▼ Full Name (Last, First, Middle Initial) B. Larma Bazzi Mailing Address 114 Prospect Pl City State Biotkyn NY Mailing Address 9 Coder Dr City State Brockyn NY Primary General Other (specify) ▼ Occupation Receipt For: Aggregate Year-to-Date ▼ Other (specify) ▼ Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Occupation Name of Employer Occupation Nume of Employer Occupation State Zip Code Mailing Address 9 Coder Dr 10 City State Zip Code Mailing Address 9 Coder Dr	or	for commercial purposes, other than using the	e name and a	ddress of any political committee	e to so	licit cor	ntrib	outions f	rom such	со	mmitt	ee.
Full Name (Last, First, Middle Initial) Date of Receipt A. William Arroyo Mailing Address 4034 Witzel Dr Transaction D: C2874157 City State Zip Code Sherman Oaks CA 91423-4612 FEC ID number of contributing federal political committee. Occupation Name of Employeed Physician Receipt For: Aggregate Year-to-Date ▼ Other (speoty) ▼ 1300.00 FeI Name (Last, First, Middle Initial) Date of Receipt B. Lama BAzzzi Mailing Address 114 Prospect PI Apt.1 C City State Zip Code Brooklyn NY 11217 FEC ID number of contributing federal political committee. C Name of Employeer Occupation SUNV Downstate Physician Receipt For: Aggregate Year-to-Date ▼ Other (speotfy) ▼ Occupation SUNV Downstate Physician Receipt For: Aggregate Year-to-Date ▼ Other (speotfy) ▼ General Other (speotfy) ▼ State City State City State	\backslash	. ,										
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Mailing Address 4034 Witzel Dr 21 2014 City State Zip Code Transaction ID: C2874157 Sherman Caks C 91423-4612 Amount of Each Receipt Inis Period FEC ID number of contributing federal political committee. Occupation Aggregate Year-to-Date ▼ Date of Receipt Inis Period B. Larna Bazzi Mailing Address 114 Prospect PI Aggregate Year-to-Date ▼ Date of Receipt Inis Period City State Zip Code Transaction ID: C2874159 Amount of Each Receipt Inis Period B. Larna Bazzi Mailing Address 114 Prospect PI Aggregate Year-to-Date ▼ Date of Receipt Mailing Address 9 Cectar Dr Occupation NY 11217 Fec Di number of contributing federal political committee. Date of Receipt Name of Employer Occupation Occupation S50.00 Amount of Each Receipt Inis Period City State Zip Code Transaction ID: C2874059 Amount of Each Receipt Inis Period City Grant Neck NY 11217 Fee Di number of contributing federal political committee. Aggregate Year-to-Date ▼ Date of Receipt Mailing Address 9 Cectar Dr C State Zip Code	٨					Date of	Re	ceint				
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Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

(check only one)

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			Detailed Summary Page		11a		11b	11c	12	<u> </u>
An	y information copied from such Reports and	Statements ma	l ay not be sold or used by any p	berson f	13 or the	pur	14 pose of s	15 oliciting	16 contribu	utions
or	for commercial purposes, other than using t	the name and a	ddress of any political committe	e to sol	icit coi	ntrib	outions fro	om such	o commit	ttee.
\backslash	NAME OF COMMITTEE (In Full)									
/	American Psychiatric Associa	tion Politica	al Action Committee							
Δ.	Full Name (Last, First, Middle Initial) Jules Henry Bohnn				Date of	f Re	eceipt			
	Mailing Address 1215 Barkdull St				M M	_		/ Y	Y Y	Y
	<u></u>	Otata	Zin Onde	_	10	ι,	20		2014	_
	City Houston	State TX	Zip Code 77006-6403				ion ID : C			J
					Amourn		Each Re	ceipt in	IS Fello	1
	FEC ID number of contributing federal political committee.	C					7	9		0.00
	Name of Employer	Occupation Physician								
	Self Employed Receipt For:									
	Primary General	Aggregate	Year-to-Date ▼							
	Other (specify)		100.00							
	Full Name (Last, First, Middle Initial) Stephen Eugene Buie				Date of	f Re	eceipt			
	Mailing Address 158 Zillicoa St				M M		21	/ Y	2014	Y
	City	State	Zip Code			acti	ion ID : C	287417		
	Asheville	NC	28801-1079	A			Each Re			ł
	FEC ID number of contributing federal political committee.	C						7	250	0.00
	Name of Employer Self Employed	Occupation Physician								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00]						
	Full Name (Last, First, Middle Initial) L Rodger Currie				Date of	f Re	ceint			
	Mailing Address 1000 Wilson Blvd. Suite 1825				M M M	_	20	/ Y	2014	Y
	City	State	Zip Code		Trans	act	ion ID : C	287414		
	Arlington	VA	22207	A	mount	t of	Each Re	ceipt th	is Period	ł
	FEC ID number of contributing federal political committee.	С					,	7	41	6.66
	Name of Employer	Occupation								
	American Psychiatric Association		vernment Relations							
	Receipt For:	Aggregate	Year-to-Date ▼							
	Primary General	33 - 3-10								
	Other (specify)		1833.32							
s	UBTOTAL of Receipts This Page (optional).				_		5	- 7	816	5.66
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SCHEDULE A (FEC Form 3X) _ _ _ _

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11	EMIZED RECEIPTS		for each category of the Detailed Summary Page		< 11a 13		11b 14	11c 15	12	Γ	17
	y information copied from such Reports and Si for commercial purposes, other than using the							soliciting	g contrib		ns
$\left\rangle$	NAME OF COMMITTEE (In Full) American Psychiatric Associatio	n Politica	al Action Committee								
Α.					Date of	f Re	ceipt				
	Mailing Address 7922 Long Meadow Rd				M M	/	21	/ Y	2014		
	City Pikesville	State MD	Zip Code 21208-3022					C28741 eceipt th	73 nis Perio	bd	
	FEC ID number of contributing federal political committee.	С					3			0.00	0
	Name of Employer	Occupation									
	Fuse Health Strategies	Physician		_							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00								
	Full Name (Last, First, Middle Initial) Russell William Denea				Date of	f Ro	coint				
υ.	Mailing Address 268 Broadway Ste 202				10 ¹⁰	/	17	/ Y	ү ү 2014	Y	
	City Saratoga Springs	State NY	Zip Code 12866-4271	-				C28740	85 his Perio		
	FEC ID number of contributing federal political committee.	С								00.00)
	Name of Employer Self Employed	Occupation Physician									
	Receipt For:		Year-to-Date ▼								
	Primary General Other (specify) ▼		1000.00								
<u>с.</u>	Full Name (Last, First, Middle Initial) Heather M Fretwell				Date of	f Re	ceipt				
	Mailing Address 2919 S Post Rd				м м 10	/	27	/ Y	2014	Y	1
	City	State IN	Zip Code					C28741			
	Indianapolis	IIN	46239-9118	-	Amoun	t of	Each R	eceipt th	nis Perio	bd	_
	FEC ID number of contributing federal political committee.	С					7	7	Ę	50.0	0
	Name of Employer	Occupation									
	Self Employed	Physician		_							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 450.00								
s	UBTOTAL of Receipts This Page (optional)			<u> </u>				1 4	155	50.00)
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			Detailed Summary Page		11a		11b 14	11c	12	17
	y information copied from such Reports and St for commercial purposes, other than using the				for the		pose of	soliciting	g contrib	utions
<u> </u>	NAME OF COMMITTEE (In Full) American Psychiatric Associatio						2.010			
A.	Full Name (Last, First, Middle Initial) Heather M Fretwell				Date of	of Re	eceipt			
	Mailing Address 2919 S Post Rd				M 11	И /	24) / Y	ү ү 2014	Y
	City Indianapolis	State IN	Zip Code 46239-9118					C287418 Receipt th		d
	FEC ID number of contributing federal political committee.	С					7		5	0.00
	Name of Employer Self Employed	Occupation Physician								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 450.00							
B.	Full Name (Last, First, Middle Initial) Richard Lesesne Frierson Mailing Address 2738 Wheat St				Date o				V	V
	City	State	Zip Code		10		17		2014	Ŷ
	Columbia	SC	29205-2539					C287408 Receipt th		d
	FEC ID number of contributing federal political committee.	С					7		25	0.00
	Name of Employer Self Employed	Occupation Physician								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00							
c.	Full Name (Last, First, Middle Initial) Alex Glijansky				Date of	of Re	eceipt			
	Mailing Address 1579 Old York Rd				м 10	И /	D 16) / Y	ү ү 2014	Y
	City Abington	State PA	Zip Code 19001-1807					C287500 Receipt th		d
	FEC ID number of contributing federal political committee.	С					7		10	0.00
	Name of Employer	Occupation								
	Self Employed Receipt For:	Physician								
	Primary General	Aggregate	Year-to-Date ▼	_						
	Other (specify)		300.00							
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			Detailed Summary Page		11a		11b	11c	12	r	_ 4-
	ny information copied from such Reports and									butic	
or	for commercial purposes, other than using th	ne name and a	ddress of any political committee	e to so	olicit co	ntrib	outions f	rom such	comm	nitte	Э.
\rangle	American Psychiatric Associati	ion Politica	al Action Committee								
Α.	Full Name (Last, First, Middle Initial) Roger L Greiger				Date of	f Re	eceipt				
	Mailing Address 100 Evelyn Rd				м м 10	/	24	/ Y	2014	(-) •	
	City Waban	State MA	Zip Code 02468-1021					C287410 eceipt thi		bd	
	FEC ID number of contributing federal political committee.	С					7	7	2	50.0	0
	Name of Employer Self Employed	Occupation Physician									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00								
B.	Full Name (Last, First, Middle Initial) Edward Scott Hartmann				Date of	f Re	eceipt				
	Mailing Address 28 E 73rd St	Chatta	Zin Oode		1 <u>1</u>	/	24		2014	Y	
	City New York	State NY	Zip Code 10021-4143	-				C287421: eceipt thi		hd	
	FEC ID number of contributing federal political committee.	C					1		-	50.0	0
	Name of Employer Self Employed	Occupation Physician									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00								
C.	Full Name (Last, First, Middle Initial) Mark Alan Haygood	1			Date of	f Re	eceipt				
	Mailing Address 513 Lincoln St				M M	/	03	/ Y	2014		
	City Gadsden	State AL	Zip Code 35904-2224					C287414 eceipt thi		bd	
	FEC ID number of contributing federal political committee.	С					<u>т</u>	7		25.0	0
	Name of Employer	Occupation									
	Self Employed	Physician									
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	_							
	Other (specify) ▼		275.00								
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			Detailed Summary Page		-		11b	11c		12					
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	y information copied from such Reports and s for commercial purposes, other than using the														
	NAME OF COMMITTEE (In Full)		,			-	-								
\rangle	American Psychiatric Associatio	on Politica	al Action Committee												
A.	Full Name (Last, First, Middle Initial) Barry Keith Herman				Date of	Re	eceipt								
	Mailing Address 277 Upper Gulph Rd			11 21 2014											
	City	State	Zip Code		Trans	act	ion ID :	C2874	156						
	Radnor	PA	19087-2417		Amount	of	Each F	Receipt	this F	Period					
	FEC ID number of contributing federal political committee.	С					7			1000.	00				
	Name of Employer	Occupation													
	Self Employed	Physician													
	Receipt For:	Aggregate	Year-to-Date ▼												
	Primary General Other (specify)		1100.00]											
в.	Full Name (Last, First, Middle Initial) Edward Richard Herman				Date of	Re	eceipt								
	Mailing Address 6 Butternut Rd				M M	1	21			у 014	Y				
	City	State	Zip Code					C2874							
	Briarcliff	NY	10510-2222		Amount	t of	Each F	Receipt	this F	Period					
	FEC ID number of contributing federal political committee.	С					7			250.	00				
	Name of Employer Self Employed	Occupation Physician													
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00												
C.	Full Name (Last, First, Middle Initial) Justin Bailey Hunt				Date of	Re	eceipt								
	Mailing Address 33 Bristol Ct				M M 11	1	D 21			ү 014	Y				
	City	State AR	Zip Code					C2874							
	Little Rock	AK	72211-2163		Amount	t of	Each F	Receipt	this F	Period					
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	Name of Employer	Occupation													
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	y information copied from such Reports and S for commercial purposes, other than using the							solicitin		ntribut	ions
\backslash	NAME OF COMMITTEE (In Full)										
	American Psychiatric Association	on Politica	al Action Committee								
Α.	Full Name (Last, First, Middle Initial) Fructuoso R Irigoyen-Rascon				Date of	Re	ceipt				
	Mailing Address 2116 E Griffin Pkwy				M M	/	DI	о / Y		Y	Υ
	City Ste A	State	Zip Code	_	10 T rong		17	000740		014	
	Mission	TX	78572-3225					C28740 Receipt tl		Period	
	FEC ID number of contributing federal political committee.	С					,	,		150.	.00
	Name of Employer	Occupation	1								
	Self Employed	Physician									
	Receipt For:	Aggregate	Year-to-Date ▼								
	Other (specify)		300.00								
в.	Full Name (Last, First, Middle Initial) Carol Ann Kuchmak				Date of	Re	ceipt				
	Mailing Address 3331 Baywood Ln				м м 10	/	21) / Y	2(y 014	Y
	City	State	Zip Code		Trans	acti	on ID :	C28750	53		
	Napa	CA	94558-3109		Amount	t of	Each F	Receipt th	nis P	'eriod	
	FEC ID number of contributing federal political committee.	С					7		_	300.	00
	Name of Employer Self Employed	Occupation Physician									
	Receipt For:	Aggregate	Year-to-Date ▼								
	Other (specify)		300.00								
<u>с.</u>	Full Name (Last, First, Middle Initial) Larry Charles Lawrence				Date of	Re	ceipt				
	Mailing Address 828 Bath St. D				M M	/	24			ү 014	Y
	City	State	Zip Code		Trans	act	ion ID :	C28741	88		
	Santa Barbara	CA	93101		Amount	t of	Each F	Receipt tl	nis F	'eriod	
	FEC ID number of contributing federal political committee.	С					7	7	_	500	.00
	Name of Employer	Occupation	1								
	Self Employed	Physician									
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General	00 0		11							
	Other (specify)	<u> </u>	500.00								
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			Detailed Summary Page		11a 13		11b	11c 15	12	17
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	for commercial purposes, other than using the	ne name and a	ddress of any political committe	e to sol	icit cor	ntrib	outions fro	om such	i commi	ttee.
\backslash	NAME OF COMMITTEE (In Full)									
/	American Psychiatric Associat	ion Politica	al Action Committee							
Α.	Full Name (Last, First, Middle Initial) Charles Alan Lester				Date of	f Re	eceipt			
	Mailing Address PO Box 678				м м 10	/	16	/ Y	2014	Y
	City	State	Zip Code		Trans	act	ion ID : C	287505		
	Muskogee	OK	74402-0678	A	mount	t of	Each Re	ceipt th	is Perio	d
	FEC ID number of contributing federal political committee.	С					7	3		0.00
	Name of Employer Self Employed	Occupation Physician								
	Receipt For:		Veerste Detr	_						
	Primary General	Aggregate	Year-to-Date ▼							
	Other (specify) ▼		400.00							
	Full Name (Last, First, Middle Initial) Edward Thomas Lewis	·			Date of	f Re	eceipt			
	Mailing Address 45 Sycamore Avenue Unit 1421				™ M 1_1	/	03	/ Y	y y 2014	Y
	City	State	Zip Code		Trans	acti	ion ID : C	287414	7	
	Charleston	SC	29407	A	mount	t of	Each Re	ceipt th	is Perio	d
	FEC ID number of contributing federal political committee.	С					,	7	1	5.00
	Name of Employer Self Employed	Occupation Physician								
	Receipt For:	Aggregate	Year-to-Date ▼							
	Primary General			1						
	Other (specify) ▼		217.00							
c.	Full Name (Last, First, Middle Initial) Howard M Maziar	·			Date of	f Re	eceipt			
	Mailing Address 5470 New Wellington Close	NW			м м 11	/	D D 21	/ Y	y y 2014	Y
	City	State	Zip Code		Trans	act	ion ID : C	287416	64	
	Atlanta	GA	30327-4875	A	mount	t of	Each Re	ceipt th	is Perio	d
	FEC ID number of contributing federal political committee.	С					,	7	25	0.00
	Name of Employer	Occupation		_						
	Self Employed	Physician								
	Receipt For:		Year-to-Date ▼							
	Primary General	, iggi oguto		1						
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			Detailed Summary Page		11a 13		11b 14	11c	12	17
	y information copied from such Reports and St for commercial purposes, other than using the				for the		pose of	soliciting	g contrib	utions
<u> </u>	NAME OF COMMITTEE (In Full) American Psychiatric Associatio									
A.	Full Name (Last, First, Middle Initial) John S McIntyre Mailing Address 205 Grosvenor Road				Date o		· ·			- V
					м м 10		17		2014	Y
	City Rochester	State NY	Zip Code 14610-2551					C287408 leceipt th		d
	FEC ID number of contributing federal political committee.	С					7		8	3.33
	Name of Employer	Occupation								
	Self Employed Receipt For:	Physician	Veer te Dete 🗮	_						
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 916.63]						
В.	Full Name (Last, First, Middle Initial) John S McIntyre				Date o	f Re	eceipt			
	Mailing Address 205 Grosvenor Road				^M M	/	20	/ Y	2014	Y
	City	State	Zip Code					C287414		
	Rochester	NY	14610-2551	'	Amoun	t of	Each R	leceipt th	is Perio	d
	FEC ID number of contributing federal political committee.	С					7		8	3.33
	Name of Employer Self Employed	Occupation Physician								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 916.63]						
c.	Full Name (Last, First, Middle Initial) Michael John McManus				Date o	f Re	eceipt			
	Mailing Address PO Box 1017				M M	/	24) / Y	2014	Y
	City Theodore	State AL	Zip Code 36590-1017					C287420 leceipt th		d
	FEC ID number of contributing federal political committee.	С					1			i0.00
	Name of Employer	Occupation		-						
	Self Employed	Physician								
	Receipt For: Primary General	Aggregate	Year-to-Date ▼							
	Other (specify) ▼		250.00] _						
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SCHEDULE A (FEC Form 3X)

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	ny information copied from such Reports and S for commercial purposes, other than using the			erson for	the		ose of	soliciting	g contri	ibutio	ns
$\left\rangle$	NAME OF COMMITTEE (In Full) American Psychiatric Associatio	on Politica	al Action Committee								
Α.	Full Name (Last, First, Middle Initial) George Wiles Middlekauff Mailing Address PO Box 1426 City Roseburg FEC ID number of contributing federal political committee. Name of Employer Self Employed	State OR C Occupation Physician	Zip Code 97470-0343	T		actie	20 0n ID :	/ Y C28749 Receipt th	his Peri	4	0
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 300.00]							
в.	Full Name (Last, First, Middle Initial) Theresa M Miskimen Mailing Address 11 Graham Place			Da	ite of	Red	ceipt 24	/ Y	2014	Y Y	1
	City Millstone Township FEC ID number of contributing	State NJ	Zip Code 08535					C287419 leceipt th		iod	_
	federal political committee. Name of Employer Rutgers Medical Center Receipt For: Primary General Other (specify) ▼	C Occupation Physician Aggregate	Year-to-Date ▼ 250.00				7		2	250.00	
C.	Full Name (Last, First, Middle Initial) Mary S Nobilski-Plaskov Mailing Address 9 Meadowbrook Rd			_	ite of		ceipt) / Y	Ý	Y Y	1
	City Arkport FEC ID number of contributing federal political committee. Name of Employer Self Employed Receipt For: □ Primary □ General Other (specify) ▼	State NY C Occupation Physician Aggregate	Zip Code 14807-9548 Year-to-Date ▼ 250.00				-	C28740 leceipt th	his Peri		0
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		Detailed Summary Page	×	11a 13	-	11b 14	11c	12	17
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NAME OF COMMITTEE (In Full) American Psychiatric Assoc	-								
Full Name (Last, First, Middle Initial) A. Paul J O'Leary				Date of	Re	eceipt			
Mailing Address 1225 50th St S				м м 11	/	03) / Y	2014	Y
City Birmingham	State AL	Zip Code 35222-3915	A				C287414 Receipt th	45 his Period	_
FEC ID number of contributing federal political committee.	С					,		50	0.00
Name of Employer Self Employed	Occupation Physician								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 550.00]						
Full Name (Last, First, Middle Initial) B. Roger Peele	1			Date of	Re	eceipt			
Mailing Address 413 King Farm Blvd Apt				™ = M 11	/	24) / Y	2014	Y
City Rockville	State MD	Zip Code 20850-6680					C287418 Receipt th	34 nis Period	
FEC ID number of contributing federal political committee.	С					7		1000	_
Name of Employer Self Employed	Occupation Physician								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1200.00							
Full Name (Last, First, Middle Initial) C. Edmond Hsin T Pi				Date of	Re	eceipt			
Mailing Address 2010 Zonal Ave Opd Building, Suite 1P-	12			м м 11	1	D 24		2014	Y
City Los Angeles	State CA	Zip Code 90089-0121	A				C28741	87 nis Period	
FEC ID number of contributing federal political committee.	С					,	7	1000	_
Name of Employer	Occupation		_						
USC School of Medicine/Dept of Psych Receipt For:	Physician	Veer to Deta 🗮	_						
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1000.00							
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SCHEDULE A (FEC Form 3X)

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\rangle	American Psychiatric Associatio	n Politica	I Action Committee							
A.	Full Name (Last, First, Middle Initial) Mary Anne Pryzma				Date of	Receipt				
	Mailing Address 8330 Naab Rd Ste 305				м м 10	/ D 17	D / Y	2014	Y	
	City Indianapolis	State IN	Zip Code 46260-1932	_			: C28740 Receipt th	39 nis Period		
	FEC ID number of contributing federal political committee.	С				-		250	0.00	
	Name of Employer Self Employed	Occupation Physician								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00							
в.	Full Name (Last, First, Middle Initial) Donald Reeves				Date of	Receipt				
	Mailing Address 112 Raymond Ave	_			м м 10	/ D 16	D / Y 6	у у 2014	Y	
	City South Orange	State NJ	Zip Code 07079-2340				: C28750 Receipt th	66 nis Period		
	FEC ID number of contributing federal political committee.	С						100	_	
	Name of Employer Self Employed	Occupation Physician								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00							
	Full Name (Last, First, Middle Initial)		7	+						_
C.	Charles F Reynolds Mailing Address 3811 Ohara St				Date of	Receipt		2014	Y	
	City Pittsburgh	State PA	Zip Code 15213-2593				: C28741	27 his Period		
	FEC ID number of contributing federal political committee.	С				,	10001011		0.00	
	Name of Employer	Occupation								
	University of Pittsburgh School of Med Receipt For:	Physician	Year-to-Date ▼	_						
	Primary General Other (specify) ▼		250.00							
s	UBTOTAL of Receipts This Page (optional)			•		-		600	.00	
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			Detailed Summary Page		11a 13		11b 14	11c	12	17
	r information copied from such Reports and St or commercial purposes, other than using the				or the		pose of	soliciting	contribu	tions
\ \	NAME OF COMMITTEE (In Full) American Psychiatric Associatio	n Politica	al Action Committee							
	Full Name (Last, First, Middle Initial) Robert Paul Roca				Date o	f Re	eceipt			
ľ	Mailing Address 6501 N Charles St				м м 11	/	21) / Y	у у 2014	Y
	City Baltimore	State MD	Zip Code 21204-6819					C287417 Receipt th		
	EC ID number of contributing ederal political committee.	С					,		365	.00
5	Name of Employer Self Employed	Occupation Physician								
F	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 365.00							
B	Full Name (Last, First, Middle Initial) Jo-Ellyn M Ryall Mailing Address 10 Ladue Crest Ln				Date o		D D) / Y	Y Y	Y
	City Saint Louis	State MO	Zip Code 63124-1543					C287499 Receipt th		
	FEC ID number of contributing ederal political committee.	С					,		100	.00
S	Name of Employer Self Employed	Occupation Physician								
F	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00							
	Full Name (Last, First, Middle Initial) Mary Ann Schaepper				Date o	f Re	eceipt			
_	Mailing Address 1686 Barton Rd				м м 11	/	D 21) / Y	ү ү 2014	Y
	City Redlands	State CA	Zip Code 92373-1488					C287417 Receipt th		
	FEC ID number of contributing ederal political committee.	С					,		365	5.00
	Name of Employer	Occupation								
_	Self Employed Receipt For:	Physician	Year-to-Date ▼							
	Primary General Other (specify)	Aggregate	365.00							
	JBTOTAL of Receipts This Page (optional)						y	7	830	.00
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Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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PAGE 19 OF

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or	for commercial purposes, other than using the	e name and a	ddress of any political committee	e to so	licit cor	htrib	outions f	rom such		mmitt	e.
	NAME OF COMMITTEE (In Full)										
2	American Psychiatric Association	on Politica	Action Committee								
Α.	Full Name (Last, First, Middle Initial) Alan David Schmetzer				Date of	Re	eceipt				
	Mailing Address 4170 Central Ave				M M 10	1	27	/ Y) 014	Y
	City	State	Zip Code			act		C287413			
	Indianapolis	IN	46205-2605	/	Amount	of	Each R	eceipt thi	is P	eriod	
	FEC ID number of contributing federal political committee.	С				_	,			83	34
	Name of Employer	Occupation									
	Self Employed Receipt For:	Physician		_							
	Primary General	Aggregate	Year-to-Date ▼								
	Other (specify)		666.72								
В.	Full Name (Last, First, Middle Initial) Shaun Snyder				Date of	Re	eceipt				
	Mailing Address 3901 Cathedral Ave NW				M M	1	21	/ Y) 14	Y
	City	State	Zip Code		Trans	acti	ion ID :	C287415	4		
	Washington	DC	20016	/	Amount	t of	Each R	eceipt thi	is P	Period	
	FEC ID number of contributing federal political committee.	С				_	7	7		250.	00
	Name of Employer	Occupation									
	American Psychiatric Association	Chief Strate	gy Officer								
	Receipt For: Primary General	Aggregate	Year-to-Date ▼								
	Other (specify)		250.00]							
С.	Full Name (Last, First, Middle Initial) Maurice Andrew Sprenger				Date of	Re	eceipt				
	Mailing Address 203 Hoohana St Ste 303				M M 11	1	24	/ Y)14	Ŷ
	City Kahului	State HI	Zip Code 96732-2476					C287419 eceipt thi		Period	
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	Name of Employer	Occupation		\neg							
	Self Employed	Physician									
	Receipt For:		Year-to-Date ▼								
	Primary General			11							
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PAGE 20 OF

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	AME OF COMMITTEE (In Full)		Action Committee								
<u> </u>	merican Psychiatric Associatio										
Fu A. S	III Name (Last, First, Middle Initial) Shannon T Suo			1	Date of	Re	ceipt				
	ailing Address 8254 Prairie Star Ct				M M	_		/ Y	Y	Y	Y
	k	Otota	Zin Oada	41	11		21			014	
Ci S	ty acramento	State CA	Zip Code 95829-8136	<u> </u>			ion ID : C			lorio-	
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	EC ID number of contributing deral political committee.	С					7	7		250.	00
	ame of Employer	Occupation									
	elf Employed	Physician									
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	III Name (Last, First, Middle Initial) ane M Theobald				Date of	Re	eceipt				
	ailing Address 8303 Dodge St				M M	/	21	/ Y	₽ Y 20) 14	Y
Ci	ty	State	Zip Code			acti	on ID : C	287416		.14	
0	maha	NE	68114-4108				Each Re			eriod	
	EC ID number of contributing deral political committee.	С					,	J		250.	00
	ame of Employer ethodist Estabrook Cancer Center	Occupation Physician									
Re	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00								
	III Name (Last, First, Middle Initial) Maria L. Tiamson-Kassab				Date of	Re	eceipt				
Ma	ailing Address 8025 Hagans Circle				M M	/	D D D 21	/ Y)14	Y
Ci		State	Zip Code				ion ID : C				
	an Diego	CA	92126-2784	/	Amount	of	Each Re	ceipt th	is P	eriod	
	EC ID number of contributing deral political committee.	С					7	3		250.	00
Na	ame of Employer	Occupation		\neg							
	elf Employed	Physician									
Re	eceipt For:	Aggregate	Year-to-Date ▼								
_	Primary General Other (specify) ▼		250.00								
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SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER:

PAGE 21 OF

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11	EMIZED RECEIPTS		for each category of the Detailed Summary Page		X 11a 13		11b	11c	12		17
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\setminus	NAME OF COMMITTEE (In Full)										
\vee	American Psychiatric Association	on Politica	al Action Committee								
Α.	Full Name (Last, First, Middle Initial) Felix E Torres				Date of	Re	ceipt				
	Mailing Address PO Box 205189 Sunset Station				M M	1	D D D	/ Y	2014		1
	City	State	Zip Code			acti		C287416			
	Brooklyn	NY	11220-7189	_	Amount	of	Each Re	eceipt th	is Perio	bd	
	FEC ID number of contributing federal political committee.	С					,	7	2	50.00	D
	Name of Employer	Occupation									
	Self Employed	Physician									
	Receipt For: Primary General	Aggregate	Year-to-Date ▼								
	Other (specify)		250.00								
				<u> </u>							
в.	Full Name (Last, First, Middle Initial) Steven Jay Wein				Date of	Re	ceipt				
	Mailing Address 10 W 86th St #1B				м м 10	1	16	/ Y	2014		1
	City #1B	State	Zip Code			acti		C287501			
	New York	NY	10024-3606				-	eceipt th		bd	
	FEC ID number of contributing federal political committee.	С					7	7	1(00.00)
	Name of Employer Self Employed	Occupation									
	Receipt For:	Physician	· · · · · ·								
	Primary General	Aggregate	Year-to-Date ▼								
	Other (specify)		550.00	4							
c.	Full Name (Last, First, Middle Initial) Eric R Williams				Date of	Re	ceipt				
	Mailing Address 708 Cottontail Ct S				м м 10	/	D ■ D 31	/ Y	2014	Y	1
	City	State	Zip Code			acti		C287413	_		
	Columbia	SC	29229-9485		Amount	of	Each Re	eceipt th	is Perio	bd	
	FEC ID number of contributing federal political committee.	С					7			83.3	3
	Name of Employer	Occupation									
	Self Employed	Physician									
	Receipt For: Primary General	Aggregate	Year-to-Date ▼								
	Other (specify)		583.31								
s	UBTOTAL of Receipts This Page (optional)			•			3	- 1	43	33.33	}
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SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER:

PAGE 22 OF

177			Use separate schedule(s)	(cł	neck onl	y or	ne)				
116	EMIZED RECEIPTS		for each category of the Detailed Summary Page		X 11a		11b 14	11c		12	47
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<u> </u>	NAME OF COMMITTEE (In Full)										
	American Psychiatric Associatic	n Politica	I Action Committee								
A .	Full Name (Last, First, Middle Initial) Deeann Wong				Date of	f Re	ceipt				
	Mailing Address 345 Saxony Rd Ste 201				м м 10	/	27	/ Y	201	Y 14	ſ
-	City Encinitas	State CA	Zip Code 92024-2787					C28750 eceipt th		riod	
	FEC ID number of contributing federal political committee.	С					7			150.0	00
	Name of Employer	Occupation									
	Self Employed	Physician									
	Receipt For:	Aggregate	Year-to-Date 🔻								
	Primary General Other (specify)		400.00	11							
			1 1	4							
	Full Name (Last, First, Middle Initial) Mark S Wright				Date of	f Re	ceipt				
	Mailing Address 1062 Wellington Way				M M	/	21	/ Y	201	4	
	City	State	Zip Code			acti		C28741			
-	Lexington	KY	40513-1200		Amoun	t of	Each R	eceipt th	nis Pe	riod	
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с.	Full Name (Last, First, Middle Initial)				Date of	f Re	ceipt				
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	City	State	Zip Code		Amoun	t of	Each R	eceipt th	nis Pe	riod	
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	Name of Employer	Occupation									
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼]							
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PAGE 23 OF

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NAME OF COMMITTEE (In Full)									
American Psychiatric Associa	ation Politica	al Action Committee							
Full Name (Last, First, Middle Initial) American Psychiatric Association				Date of	Re	ceipt			
Mailing Address 1000 Wilson Blvd Ste 1825				M M 1_1	/	D 13		ү ү 2014	Y
City	State	Zip Code				-	: C287592	-	
Arlington	VA	22209-3924	—	Amount	of	Each	Receipt th	is Period	
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Name of Employer	Occupation								
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SC	CHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 24 OF 27								7							
IT	EMIZED DISBURSEMENTS	Use sepa for each	(C		k on 21b	-	ne) 22	25	2 6									
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	y information copied from such Reports and Stater for commercial purposes, other than using the nan																	
\setminus	NAME OF COMMITTEE (In Full)																	
	American Psychiatric Association F	Political	Action Com	mitte	e		_											
Δ	Full Name (Last, First, Middle Initial) Bank of America N.A.			Date of Disbursement														
Π.	Bank of America N.A.							M					Y	Y Y	Y			
	Mailing Address PO Box 27025		Zip Code	11 17 2014														
	City S Richmond	State VA	Transaction ID : D162952															
	Purpose of Disbursement Bank Fees		23261-7025			1	Amount of Each Disbursement this Period											
	Candidate Name		ry/						87.75									
	Office Sought: House Disburser	ment For:		1	ype		-			7	1	7				1		
	Senate President	Primary Other (spe	General															
	State: District:	Other (ope	ony) V															
_	Full Name (Last, First, Middle Initial)																	
В.	Bank of America N.A.							Date o										
	Mailing Address PO Box 27025							11 03 Y Y Y Y Y 2014						Y				
	City S Richmond	State VA		Transaction ID : D162953														
	Purpose of Disbursement Credit Card Processing Fees							Amount of Each Disbursement this Period										
	Candidate Name			Cat	ego	ry/		163.42										
	Office Sought: House Disburser	ment For:		Т	уре		_	<u> </u>		7				100	0.42	1		
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_	Full Name (Last, First, Middle Initial)						T	Dete		abura	~ ~~	ont						
С.	PayPal, Inc.							Date of	_	spurse			Y	Y Y	Y			
	Mailing Address 2145 Hamilton Ave							11			06			2014				
	5	State	Zip Code					Tran	sact	tion ID):	D1629	951					
	San Jose CA 95125-5905 Purpose of Disbursement																	
	Credit Card Processing Fees Candidate Name	Cat	ego ype		Amount of Each Disbursement this Period 59.95									1				
	Office Sought: House Disburser									3								
	Senate President	Primary	General															
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SCHI	EDULE B	(FEC Form	1 3X)			F	OR		NU	MBER:				PAGE	25	OF 27				
ITEM		BURSEMEN	TS	for each	arate schedule(s) category of the			k only			X	23	2		25	26				
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	ME OF COMMI	TTEE (In Full)																		
\checkmark		ychiatric Ass	ociation F	Political	Action Com	mitte	e													
-	Full Name (Last, First, Middle Initial) AMI BERA FOR CONGRESS									Date of Disbursement										
Mai	ling Address PC	OST OFFICE BOX	582496							10 / Y Y Y Y 23 2014										
City	1			State	Zip Code															
	(GROVE			CA	95758				Transaction ID : D162948											
	pose of Disburs	ement							Amount of Each Disbursement this Period											
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	ep. Amerish	n Bera					ype			1500.00										
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		rst, Middle Initial)																		
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Mai	ling Address P	.O. BOX 24551								10 23 2014						T				
	TSBURGH		ç	State PA	Zip Code 15234		Transaction ID : D162947													
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	· · ·	rst, Middle Initial) NFOR SEN	ATE 2014						I	Date of	Dis	burse	ment							
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	INEAPOLIS			MN	55458					Trans	acti	on ID	: D162	2950						
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SC	CHEDULE B (FEC Form 3X)			F	OR	LIN	E NI	UMBER	:			P	AGE	26	OF	27			
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\backslash	NAME OF COMMITTEE (In Full)			• · · ·															
	American Psychiatric Association F	Political	Action Com	mitte	e														
	Full Name (Last, First, Middle Initial)				Date of Disbursement														
		INC						M	/	D		/	Y Y	Y	Y				
	Mailing Address 228 S WASHINGTON STREET SU	IITE 115												014					
	City S ALEXANDRIA	State VA	Zip Code 22314					Transaction ID : D162949											
	Purpose of Disbursement	•/	22314	_			Amount of Each Disbursement this Period 2500.00												
	Contribution			L.,															
	Candidate Name Sen. Lamar Alexander			Cat	ego ype	,													
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SCHEDULE B (FEC Form 3X)		FC	RI		NUMBE	R:			PA	GE 27	OF 27						
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(ch	necł	c only 21b	y one)						26						
	Detailed Summary Page		_	210	X 28		28	b	24 28c	29							
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NAME OF COMMITTEE (In Full)		•															
American Psychiatric Association	Political Action Comm	nitte	e														
Full Name (Last, First, Middle Initial) A. Jules Henry Bohnn					Date	of D	isbur	ser	nent								
Mailing Address 1215 Barkdull St																	
					_												
City Houston	StateZip CodeTX77006-6403				Tra	insac	tion	ID :	D16298	1							
Purpose of Disbursement Refund of 10/20/2014 Contribution					Amount of Each Disbursement this Period												
Candidate Name		Cate Tv	gor pe	y/				T		1	50.00						
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼	.,	<u>po</u>														
State: District:																	
Full Name (Last, First, Middle Initial) B.					Date	of D	lisbur	ser	nent								
Mailing Address					M M / D D / Y Y Y Y Y												
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