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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines College of American Pathologists Political Action Committee 1350 I Street, NW ADDRESS (number and street) Suite 590 Check if different than previously Washington DC 20005 reported. (ACC) FEC IDENTIFICATION NUMBER STATE. CITY A ZIPCODE A IS THIS **AMENDED** NEW C00274944 Х REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Χ Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: Termination Report (TER) in the Election on State of 09 0 1 2006 09 30 2006 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Dr. Alfred Wray Campbell Type or Print Name of Treasurer Electronically Filed by Dr. Alfred Wray Campbell 10 20 2006 Signature of Treasurer Date 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 **FEC FORM 3X** Use (Rev. 02/2003) Only

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name College of American Pathologists Political Action Committee [®] D " D 09 0 1 2006 0.9 3 0 2006 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand [°]2006 46180.02 January 1 (b) Cash on Hand at 46944.62 Begining of Reporting Period 42770.80 275687.80 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 89715.42 321867.82 6(a) and 6(c) for Column B) 64549.50 296701.90 Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 25165.92 25165.92 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 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. 02/2003) Page 3

Write or Type Committee Name

(subtract Line 18(c) from Line 19)

College of American Pathologists Political Action Committee

0 1 3^D0 М М м м 0 9 2006 2006 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 30160.00 179905.00 (i) Itemized (use Schedule A) 12610.80 95782.80 (ii) Unitemized (iii) TOTAL (add 42770.80 275687.80 Lines 11(a)(i) and (ii) 0.00 0.00 (b) Political Party Committees Other Political Committees 0.00 0.00 (such as PACs) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 42770.80 275687.80 Totals to Line 33, page 5) 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees 17. Other Federal Receipts 0.00 0.00 (Dividends, Interest, etc.) 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3) 0.00 0.00 (b) Levin Funds (from Schedule H5) 0.00 0.00 (c) Total Transfer (add 18(a) and 18(b)). 19. Total Receipts (add Lines 11(d), 42770.80 275687.80 12, 13, 14, 15, 16, 17, and 18(c)) 20. Total Federal Receipts 42770.80 275687.80

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)
Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures: (a) Shared Federal/Non-Federal		
Activity (from Schedule H4)	0.00	0.00
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	549.50	4501.90
(c) Total Operating Expenditures		
(add 21(a)(i), (a)(ii) and (b))	549.50	4501.90
Committees	0.00	0.00
Contributions to Federal Candidates/Committees and Other Political Committees	64000.00	292200.00
4. Independent Expenditure		
(use Schedule E)5. Coordinated Expenditures Made by Party	0.00	0.00
Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
6. Loan Repayments Made	0.00	0.00
7. Loans Made	0.00	0.00
Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	0.00	0.00
	0.00	0.00
(b) Political Party Committees(c) Other Political Committees	0.00	0.00
(such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
9. Other Disbursements	0.00	0.00
 Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity 		
(from Schedule H6)	0.00	0.00
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
1. Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	64549.50	296701.90
2. Total Federal Disbursements		
(subtract Line 21(a)(ii) from Line 30(a)(ii)	04540.50	000704 00
from Line 31)	64549.50	296701.90

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	42770.80	275687.80
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	42770.80	275687.80
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	549.50	4501.90
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	549.50	4501.90

S	CHEDULE A (FEC Form 3X)		Llas concrete achadula(a)	FOR LINE NUMBER: PAGE 6 / 45
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
II EIVIIZED RECEIP 13			Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	College of American Pathologists Politic	al Action (Committee	
A.	Full Name (Last, First, Middle Initial) Bruce C Alexander, Dr.			Date of Receipt
	Mailing Address Department of Pathology 619 South 19th St	/		09 / 22 / Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.22282
	Birmingham	AL	35249-7331	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Univ of Alabama at Birmin- gham	Occupation Patholog		7
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		250.00	1
	Other (specify) ▼		230.00	J
— В.	Full Name (Last, First, Middle Initial) Jeffrey Mark Barcelo, Dr.			Date of Receipt
	Mailing Address Department of Pathology 36000 Euclid Avenue	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: SA11A1.22125
	Willoughby	OH	44094-4625	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Lake Hosp System - Lakewe- st	Occupation Patholog		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		250.00	1
	Other (specify)	0 0	230.00	J
_	Full Name (Last, First, Middle Initial)			<u> </u>
C.	Joseph Karl Blessinger, Dr.			Date of Receipt
	Mailing Address Department of Pathology 172 4th Street SE			09 / 29 / 2006
	City	State	Zip Code	Transaction ID: SA11A1.22114
	Huron	SD	57350	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Huron Regional Med Ctr	Occupation Patholog		7
	Receipt For:		e Year-to-Date ▼	1
	Primary General	35 3		1
	Other (specify) ▼		250.00]
<u> </u>	UBTOTAL of Receipts This Page (optional)			750.00
1 3	or recouple this rage (optional)			

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 7 / 45 (check only one)
IT	EMIZED RECEIPTS		or each category of the	X 11a 11b 11c 12
			Detailed Summary Page	13 14 15 16 17
	y information copied from such Reports and Sta for commercial purposes, other than using the n			
\setminus	NAME OF COMMITTEE (In Full)			
	College of American Pathologists Politic	cal Action (Committee	
A.	Full Name (Last, First, Middle Initial) J. David Blomberg, Dr.			Date of Receipt
	Mailing Address 1314 South Ridge Rd			09 22 2006
	City	State	Zip Code	Transaction ID: SA11A1.22043
	Duluth	MN	55804	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Arrowhead Pathologists PA	Occupation Patholog		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	500.00	
— В.	Full Name (Last, First, Middle Initial) T John Braun, Dr.			Date of Receipt
	Mailing Address Department of Patholog 827 Linden Ave 2nd Fl	У		09 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.22132
	Baltimore	MD	21201	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Maryland General Hosp	Occupation Patholog		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		300.00	
<u> </u>	Full Name (Last, First, Middle Initial) W. Jeff Byrd, Dr.			Date of Receipt
Mailing Address Laboratory Gordon Ave at Mimosa Dr PO Box 101				09 14 2006
	City	State	Zip Code	Transaction ID: SA11A1.22120
	Thomasville	GA	31799-1018	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer John D. Archbold Memorial	Occupation		
	Hosp	Patholog		_
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	1
	Other (specify)	0 0	300.00	
s	UBTOTAL of Receipts This Page (optional)			1100.00

			500 - W5 - W - D500 - C - C - C - C - C - C - C - C - C -
SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 8 / 45
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Any information copied from such Reports and S or for commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	in for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
College of American Pathologists Polit	tical Action (Committee	
	iloui 7 lotioi 1		
Full Name (Last, First, Middle Initial)			5
W. Jeff Byrd, Dr.			Date of Receipt
Mailing Address Laboratory Gordon Ave at Mimosa	Dr PO Boy	101	09 28 2006
City	State	Zip Code	Transaction ID: SA11A1.22121
Thomasville	GA	31799-1018	Amount of Each Receipt this Period
FEC ID number of contributing			
federal political committee.	C		20.00
Name of Employer	Ossunatio		_
John D. Archbold Memorial	Occupation Pathologo		
Hosp Receipt For:		e Year-to-Date V	-
Primary General	, iggi ogai	o roanto Bato V	1
Other (specify)		320.00	
			4
Full Name (Last, First, Middle Initial)			B (B .) .
Wray Alfred Campbell, Dr.			Date of Receipt
Mailing Address Dept of Path 101 E Wood St	09 29 2006		
City	State	Zip Code	Transaction ID: SA11A1.22229
Spartanburg	SC	29303	Amount of Each Receipt this Period
FEC ID number of contributing			1750.00
federal political committee.	C		1750.00
Name of Employer	Occupatio	n	-
Name of Employer Spartanburg Regional Med Ctr	Patholog		
Receipt For:	, ' <u> </u>	e Year-to-Date ▼	
Primary General			1
Other (specify)		1750.00	
Full Name (Last, First, Middle Initial) C. R Brian Carlson, Dr.			Date of Receipt
Mailing Address 4733 Andrew Jackson	Pkwy Ste G	i1	M M / D D / Y Y Y Y
City	State	Zip Code	09 29 2006
Hermitage	TN	37076	Transaction ID: SA11A1.22190 Amount of Each Receipt this Period
FEC ID number of contributing		5.6.6	
federal political committee.	C		250.00
Name of Employer	Occupatio	n .	_
Pathologists Laboratory, PC	Patholog		
Receipt For:		e Year-to-Date ▼	
Primary General			1
Other (specify)		250.00	
			2020.00
SUBTOTAL of Receipts This Page (optional)		······	2020.00

S	CHEDULE A (FEC Form 3X)		Harris and a sale and date (a)	FOR LINE NUMBER: PAGE 9 / 45
	· ·		Use separate schedule(s) or each category of the	(check only one)
Ш	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
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An	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may	not be sold or used by any perso	on for the purpose of soliciting contributions
or		name and add	aress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	College of American Pathologists Politic	cal Action C	Jommittee	
Α.	Full Name (Last, First, Middle Initial) Victor John Carlson, Dr.			Data of Possint
Α.	Mailing Address Pathology Prof Srvcs In			Date of Receipt
	200 Portland St	C		09 15 2006
	City	State	Zip Code	Transaction ID: SA11A1.22057
	Columbia	MO	65201	Amount of Each Receipt this Period
	FEC ID number of contributing			250.00
	federal political committee.	C		250.00
	Name of Employer Boyce & Bynum PS Inc	Occupation		7
		Pathologi		
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)	' '	250.00	
	and (opcomy) V			1
В.	Full Name (Last, First, Middle Initial) K. David Carter, Dr.			Date of Receipt
	Mailing Address Department of Patholog	V		M M / D D / Y Y Y Y
	407 E. 3rd St.			09 08 2006
	City	State	Zip Code	Transaction ID: SA11A1.22260
	Duluth	MN	55805	Amount of Each Receipt this Period
	FEC ID number of contributing	C		500.00
	federal political committee.	0		
	Name of Employer	Occupation		
	St. Mary's/Duluth Clinic Health System	Pathologi		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		500.00	
	Other (specify) ▼	0 0		
_	Full Name (Last, First, Middle Initial)			Date of Descire
C.	L. Lisa Chandler, Dr. Mailing Address Laboratory			Date of Receipt
	Mailing Address Laboratory PO Box 279			09 07 2006
	City	State	Zip Code	Transaction ID: SA11A1.22184
	Oxford	MS	38655	Amount of Each Receipt this Period
	FEC ID number of contributing			500.00
	federal political committee.	C		300.00
	Name of Employer Oxford Pathology, Inc	Occupation		
		Pathologi		_
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify)		500.00	
	Cirici (Specify)	-	0 0 0 0 0 0	1
	L			
s	UBTOTAL of Receipts This Page (optional)		_	1250.00
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SC	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 10 / 45
	•		Use separate schedule(s) or each category of the	(check only one)
ITEMIZED RECEIPTS			Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Any or f	r information copied from such Reports and State or commercial purposes, other than using the na	ements may me and add	not be sold or used by any perso ress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full)			
\rangle	College of American Pathologists Politica	al Action C	ommittee	
	Full Name (Last, First, Middle Initial) A. Kim Collins, Dr.			Date of Receipt
	Mailing Address Forensic & Autopsy Patho 165 Ashley Ave	ology		09 28 7 2006
	City	State	Zip Code	Transaction ID: SA11A1.22138
	Charleston	SC	29425-0690	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		20.00
	Name of Employer Medical Univ of South Car- olina	Occupation Pathologia		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		270.00	
	Other (specify) ▼	0 0	270.00	
Full Name (Last, First, Middle Initial) 3. A. Craig Dise, Dr.				Date of Receipt
	Mailing Address Department of Pathology			M " M / D " D / Y " Y " Y " Y
	100 Madison Ave			09 29 2006
	City	State	Zip Code	Transaction ID: SA11A1.22158
	Morristown	NJ	07960	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Morristown Memorial Hosp	Occupation		7
		Pathologi	st Year-to-Date ▼	_
	Receipt For: Primary General	Aggregate	Year-10-Date ▼	1
	Other (specify) ▼	0 0	1000.00	
_	Full Name (Last, First, Middle Initial) B Kevin Dole, Dr.			Date of Receipt
	Mailing Address Department of Pathology 2100 Dorchester Avenue			09 / 29 / 2006
	City	State	Zip Code	Transaction ID: SA11A1.22060
	Boston	MA	02124	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
•	Name of Employer Carney Hosp	Occupation Pathologia		
	Receipt For:	Aggregate	Year-to-Date ▼	7
	Primary General Other (specify) ▼		500.00	
SL	JBTOTAL of Receipts This Page (optional)			1020.00
	·		<u> </u>	

SC	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 11 / 45
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Αn\	y information copied from such Reports and Stat	ements may	not be sold or used by any perso	
or f	or commercial purposes, other than using the na	ame and add	lress of any political committee to	solicit contributions from such committee.
\	NAME OF COMMITTEE (In Full)			
\rangle	College of American Pathologists Politic	al Action (Committee	
	Full Name (Last, First, Middle Initial) W. Gerald Eggers, Dr.			Date of Receipt
İ	Mailing Address Department of Pathology 3333 Silas Creek Parkwa			09 / 28 / 7 7 7 7
	City	State	Zip Code	Transaction ID: SA11A1.22102
	Winston-Salem	NC	27103	Amount of Each Receipt this Period
į	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Forsyth Med Ctr	Occupation Pathologic		
	Receipt For:		Year-to-Date ▼	
	Primary General	00 0		
	Other (specify) ▼		1000.00	
	Full Name (Last, First, Middle Initial) M. Galen Eversole, Dr.			Date of Receipt
	Mailing Address Dept of Pathology 695 S Broadway			0 9 1 4 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.22212
	Denver	CO	80209	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Quest Diagnostics Inc	Occupation Pathologic		
	Receipt For:		Year-to-Date ▼	
	Primary General		500.00	
	Other (specify) ▼		300.00	
_	Full Name (Last, First, Middle Initial) Robert Farnham			Date of Receipt
Mailing Address 5040 Airport Center Pkwy				09 / 29 / 4 2006
	City	State	Zip Code	Transaction ID: SA11A1.22211
	Charlotte	NC	28208-5885	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer Presbyterian Hosp	Occupation Pathologic		
	Receipt For:		Year-to-Date ▼	1
	Primary General		250.00	
	Other (specify) ▼		250.00	
SL	JBTOTAL of Receipts This Page (optional)			1750.00
тс	OTAL This Period (last page this line number on	ly)		

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 12 / 45
	·		Use separate schedule(s) or each category of the	(check only one)
Ш	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
			, ,	13 14 15 16 17
An	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	not be sold or used by any perso	on for the purpose of soliciting contributions
or		ame and add	aress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
\angle	College of American Pathologists Politic	al Action C	Committee	_
A.	Full Name (Last, First, Middle Initial) M. Margaret Flanagan, Dr.			Date of Receipt
	Mailing Address 50 Kenwood Road			09 22 2006
	City	State	Zip Code	Transaction ID: SA11A1.22264
	Chambersburg	PA	17201-1256	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		250.00
	Name of Employer The Chambersburg Hospital	Occupation Pathologi		
	Receipt For:		Year-to-Date ▼	-
	Primary General	39 - 3		1
	Other (specify) ▼	1	250.00	
В.	Full Name (Last, First, Middle Initial) Kathryn Foucar			Date of Receipt
	Mailing Address Hematopathology			M M / D D / Y Y Y Y
	1001 Woodward PI NE			09 22 2006
	City	State	Zip Code	Transaction ID: SA11A1.22285
	Albuquerque	NM	87102	Amount of Each Receipt this Period
	FEC ID number of contributing	С		535.00
	federal political committee.	C		300.00
	Name of Employer Univ of New Mexico Sch of	Occupation		
	Med	Pathologi		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		535.00	
	Other (specify)			
<u> </u>	Full Name (Last, First, Middle Initial)			Date of Receipt
U .	Jane Marla Franks, Dr. Mailing Address Laboratory			M M / D D / Y Y Y Y
	3950 Austell Road			09 14 2006
	City	State	Zip Code	Transaction ID: SA11A1.22295
	Austell	GA	30106	Amount of Each Receipt this Period
	FEC ID number of contributing	<u> </u>		250.00
	federal political committee.	C		230.00
	Name of Employer Wellstar Cobb Hosp	Occupation Pathologi		
	Receipt For:	<u> </u>	Year-to-Date ▼	1
	Primary General	33 >35.10		1
	Other (specify) ▼		250.00	
				<u> </u>
	<u></u> -			
s	UBTOTAL of Receipts This Page (optional)			1035.00
\vdash			<u> </u>	

SC	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUM	
	EMIZED RECEIPTS		or each category of the	(check only one)	
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An	v information copied from such Reports and Stater	ments mav	not be sold or used by any perso		
or i	y information copied from such Reports and Stater for commercial purposes, other than using the nam	ne and add	ress of any political committee to	solicit contributions	s from such committee.
	NAME OF COMMITTEE (In Full)				
/	College of American Pathologists Political	Action C	Committee		
	Full Name (Last, First, Middle Initial)				
	A Americo Gonzalvo, Dr.			Date of Rece	<u>'</u>
	Mailing Address 5755 Hoover Blvd			0 9	29 2006
	City	State	Zip Code	Transaction	ID: SA11A1.22216
	Tampa	FL	33634-5340		ach Receipt this Period
	FEC ID number of contributing	С			300.00
	federal political committee.				
	Duffolo Hoopor & Accopia	Occupation			
	tes	Pathologi Aggregate	Year-to-Date ▼	_	
	Primary General	Aggregate			
	Other (specify) ▼		300.00		
3.	Full Name (Last, First, Middle Initial) W. Edwin Gould, Dr.			Date of Rece	eipt
	Mailing Address Department of Pathology				D D / Y Y Y Y
	8900 N Kendall Dr	0	7' 0 1	09	29 2006
	City Miami	State FL	Zip Code		ID: SA11A1.22047
			33176-2197	Amount of Ea	ach Receipt this Period
	FEC ID number of contributing federal political committee.	C			250.00
	Name of Employer) o o un oti o n			
		Occupation Pathologi			
	· · · · · · · · · · · · · · · · · · ·		Year-to-Date ▼		
	Primary General	1 1	050.00		
	Other (specify) ▼		250.00		
	Full Name (Last, First, Middle Initial)				
Э.	A. Patricia Gregg, Dr.			Date of Rece	eipt
Mailing Address 704 E. Grand Highway				0 9	29 Y Y Y Y Y Y Y
	City	State	Zip Code		ID: SA11A1.22034
	Clermont	FL	34711		ach Receipt this Period
	FEC ID number of contributing	С			250.00
	federal political committee.	<u> </u>			
	Amori Doth Confrol El Cl	Occupation		7	
	ermont Office	Pathologi			
	Receipt For: Primary General	Aggregate	Year-to-Date ▼		
	Other (specify)		250.00		
					800.00
SI	JBTOTAL of Receipts This Page (optional)		<u> </u>		303.00
T	OTAL This Period (last page this line number only)))		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 14 / 45
	EMIZED RECEIPTS	or each category of the		(check only one)
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or	y information copied from such Reports and Sta for commercial purposes, other than using the n	ame and add	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)		_	
\angle	College of American Pathologists Politic	al Action (Committee	
A.	Full Name (Last, First, Middle Initial) M. Michelle Hebert, Dr.			Date of Receipt
	Mailing Address PO Box 4001 110 Memorial Hospital D)r		09 29 2006
	City	State	Zip Code	Transaction ID: SA11A1.22113
	Huntsville	TX	77342-4001	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Huntsville Mem Hosp	Occupation Patholog		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		1000.00	1
	Other (specify)	0 0	1000.00	J
— В.	Full Name (Last, First, Middle Initial) N. Gene Herbek, Dr.			Date of Receipt
	Mailing Address The Pathology Center 8303 Dodge St			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.22146
	Omaha	NE	68114	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Methodist Hospital	Occupation Patholog		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		1000.00	1
	Other (specify)	0 0	1000.00	J
<u> </u>	Full Name (Last, First, Middle Initial) A. Robert Hershberg, Dr.			Date of Receipt
٠.	Mailing Address Lab			M M / D D / Y Y Y Y
	301 Monticello Ave			09 07 2006
	City	State	Zip Code	Transaction ID: SA11A1.22222
	Williamsburg	VA	23185	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Sentara Williamsburg Comm-	Occupation		
	unity Hosp	Patholog		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General	' '	500.00]
	Other (specify)			1
	UDTOTAL (D. 11 TU D. 11 TU			2500.00
S	UBTOTAL of Receipts This Page (optional)			

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 15 / 45
	EMIZED RECEIPTS		or each category of the	(check only one)
-			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
An	y information copied from such Reports and Stat	tements may	not be sold or used by any perso	n for the purpose of soliciting contributions
or	for commercial purposes, other than using the na	ame and add	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)		_	
/	College of American Pathologists Politic	al Action (Committee	
۹.	Full Name (Last, First, Middle Initial) J. Bharat Jhaveri, Dr.			Date of Receipt
	Mailing Address Dept of Path 1925 Pacific Ave			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.22045
	Atlantic City	NJ	08401	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Atlantic City Medical Cen-	Occupation		
	ter Receipt For:	Patholog Aggregate	e Year-to-Date ▼	_
	Primary General	7.99.094.0		1
	Other (specify) ▼	0 0	250.00	
3.	Full Name (Last, First, Middle Initial) P Vandita Johari, Dr.			Date of Receipt
	Mailing Address Department of Pathology 759 Chestnut St	0 9		
	City	State	Zip Code	Transaction ID: SA11A1.22053
	Springfield	MA	01199	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer Baystate Med Ctr	Occupation Patholog		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
	Full Name (Last, First, Middle Initial)			-
Э.	H. Morton Levitt, Dr.			Date of Receipt
	Mailing Address 135 Thistlewood Court			09 28 2006
	City	State	Zip Code	Transaction ID: SA11A1.22099
	Tallahasse	<u>FL</u>	32312	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Florida State Univ	Occupation Patholog		
	Receipt For:		e Year-to-Date ▼	
	Primary General		250.00	
_	Other (specify)		250.00	
s	UBTOTAL of Receipts This Page (optional)			750.00
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- 1 '	OTAL This Period (last page this line number or	и у)	······································	

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S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 16 / 45		
ıт	EMIZED RECEIPTS		or each category of the	(check only one)		
••	LIMIZED RECEIL 13		Detailed Summary Page	X 11a 11b 11c 12		
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Ar or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any personders of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full)					
	College of American Pathologists Politica	al Action (Committee			
A.	Full Name (Last, First, Middle Initial) Ruey-Yen Ryan Lin, Dr.			Date of Receipt		
	Mailing Address Dept of Path 163 Van Buren Rd Ste 1			09 / 08 / 2006		
	City	State	Zip Code	Transaction ID: SA11A1.22062		
	Caribou	ME	04736-2509	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		250.00		
	Name of Employer Cary Med Ctr	Occupation Patholog				
	Receipt For:	Aggregate	Year-to-Date ▼			
	Primary General		250.00	1		
	Other (specify) ▼	0 0	250.00			
В.	Full Name (Last, First, Middle Initial) Owen Michael Lovell, Dr.			Date of Receipt		
	Mailing Address 301 N Frio St			09 29 2006		
	City	State	Zip Code	Transaction ID: SA11A1.22041		
	San Antonio	TX	78207-3034	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		250.00		
	Name of Employer Ameripath South Texas	Occupation Patholog				
	Receipt For:		Year-to-Date ▼			
	Primary General		050.00	1		
	Other (specify) ▼	0 0	250.00			
<u>с</u> .	Full Name (Last, First, Middle Initial) L Richard Lozano, Dr.			Date of Receipt		
	Mailing Address Dept of Path 290 Big Run Rd			09 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: SA11A1.22194		
	Lexington	KY	40502	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		1000.00		
	Name of Employer Pathology & Cytology Labs Inc	Occupation Patholog				
	Receipt For:		Year-to-Date ▼	7		
	Primary General		1000.00	1		
	Other (specify) ▼		1000.00			
_						
s	UBTOTAL of Receipts This Page (optional)			1500.00		
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S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 17 / 45
	,		Use separate schedule(s) or each category of the	(check only one)
ITEMIZED RECEIPTS			Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
An	y information copied from such Reports and Sta	tements may	not be sold or used by any perso	on for the purpose of soliciting contributions
or	for commercial purposes, other than using the n	ame and add	lress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	College of American Pathologists Politic	al Action C	Committee	
	Full Name (Last, First, Middle Initial)			
A.	J Kevin McQuaid, Dr.			Date of Receipt
	Mailing Address 410 N Fourth St			09 22 2006
	City	State	Zip Code	Transaction ID: SA11A1.22195
	Longview	TX	75601	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		200.00
	Name of Employer Pathology Assoc of Longvi-	Occupation		
	ew	Pathologi		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		400.00	
	Other (specify)	0 0		1
_	Full Name (Last, First, Middle Initial)			
В.	T Ann Moriarty, Dr.	<u> </u>		Date of Receipt
	Mailing Address 2560 N Shadeland Ave	Ste A		09 29 2006
	City	State	Zip Code	Transaction ID: SA11A1.22039
	Indianapolis	IN	46219	Amount of Each Receipt this Period
	FEC ID number of contributing			500.00
	federal political committee.	C		300.00
	Name of Employer	Occupation	1	
	AmeriPath Indiána	Pathologi	ist	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		500.00	1
	Other (specify) ▼		000.00	J
_	Full Name (Last, First, Middle Initial)			1
C.	James Michael Myhre, Dr.			Date of Receipt
	Mailing Address 1151 Miller St			09 07 2006
	City	State	Zip Code	Transaction ID: SA11A1.22117
	Boise	ID	83702-6965	Amount of Each Receipt this Period
	FEC ID number of contributing	С		250.00
	federal political committee.			250.00
	Name of Employer IDX Pathology, PA	Occupation		
		Pathologi		_
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
	Carlot (opcolity)	0 0	0 0 0 0 0 0 0	1
	UBTOTAL of Receipts This Page (optional)			950.00
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	ULE A (FEC Form 3X) ED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	(check only one) X 11a 11b	PAGE 18 / 45 11c
Any informa	ation copied from such Reports and Sta	tements may	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting solicit contributions from suc	g contributions ch committee.
NAME (DF COMMITTEE (In Full) e of American Pathologists Politic		,		
A. Saraswa Mailing City Norwa FEC ID federal p Name o Norwalk Receipt Pr	Address Dept of Path Maple St Ik number of contributing political committee. f Employer Hosp	State CT C Occupation Patholog Aggregate		Date of Receipt M M M / D D / 2 2 Transaction ID: SA1 Amount of Each Recei	
Gity Janesy FEC ID federal p Name o Mercy H Receipt Pr	Address Department of Patholog 1000 Mineral Point Aver ville number of contributing political committee. Employer losp	State WI C Occupation Patholog		Date of Receipt M M M D D D D D D D D D D D D D D D D	
City Spring FEC ID federal p Name o Mercy N Receipt	299 Carew Street field number of contributing political committee. f Employer Medical Center	State MA C Occupation Patholog		Date of Receipt M M M / D D / 2 9 Transaction ID: SA1 Amount of Each Recei	
SUBTOTA	AL of Receipts This Page (optional)				750.00
TOTAL T	his Period (last page this line number o	nlv)			

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 19/45
ITEMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 12
		Detailed Summary Page	13 14 15 16 17
Any information copied from such Reports and Sta or for commercial purposes, other than using the n	atements may name and add	not be sold or used by any perso lress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
College of American Pathologists Politic	cal Action C	Committee	
Full Name (Last, First, Middle Initial) Jo Amy Owen, Dr.			Date of Receipt
Mailing Address 7800 W 110th St			09 29 7 2006
City	State	Zip Code	Transaction ID: SA11A1.22208
Overland Park	KS	66210-2304	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Physicians Reference Labo- ratory	Occupation Pathologi		
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	250.00	
Full Name (Last, First, Middle Initial) 3. Yanet Pantaleon			Date of Receipt
Mailing Address 400 Health Park Blvd			09 / 22 / 2006
City	State	Zip Code	Transaction ID: SA11A1.22188
St Augustine	<u>FL</u>	32086	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		1000.00
Name of Employer Pantaleon Pathology Assoc-	Occupation Pathologi		
iates PA Receipt For:	·	Year-to-Date ▼	+
Primary General	33 -3		1
Other (specify) ▼	0 0	1000.00	
Full Name (Last, First, Middle Initial) A James Paulson, Dr.			Date of Receipt
Mailing Address 100 E Lancaster Ave			09 07 2006
City	State	Zip Code	Transaction ID: SA11A1.22059
Wynnewood	PA	19096	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Bryn Mawr Hosp	Occupation Pathologi		
Receipt For:		Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	250.00	
SUBTOTAL of Receipts This Page (optional)			1500.00
TOTAL This Period (last page this line number of	nlv)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 20 / 45	j
ITEMIZED RECEIPTS			or each category of the	(check only one)	
			Detailed Summary Page	X 11a 11b 11c 12	□ 47
Δr	w information copied from such Reports and St	atomonte may	unot be sold or used by any perso		17
or	y information copied from such Reports and St for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full)				
\rangle	College of American Pathologists Politi	cal Action (Committee		
A.	Full Name (Last, First, Middle Initial) Ross Donald Peven, Dr.			Date of Receipt	
	Mailing Address Dept of Pathology 44405 Woodward Ave			09 22 2006	
	City	State	Zip Code	Transaction ID: SA11A1.22250	
	Pontiac	MI	48341-2985	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		250.00)
	Name of Employer St. Joseph Mercy Oakland	Occupation Patholog			
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General		250.00		
	Other (specify)		250.00		
— В.	Full Name (Last, First, Middle Initial) D. Pamela Pierce, Dr.			Date of Receipt	
	Mailing Address Department of Patholog 1701 E 23rd St	ЭУ		M M / D D / Y Y Y Y N N N N N N N N N N N N N N N	Y
	City	State	Zip Code	Transaction ID: SA11A1.22115	
	Hutchinson	KS	67502-7502	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		250.00)
	Name of Employer Hutchinson Hosp	Occupation			
	·	Patholog		_	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼		
	Other (specify)		250.00		
c.	Full Name (Last, First, Middle Initial) A. Joel Roth, Dr.			Date of Receipt	
	Mailing Address Department of Patholog 99 Beauvoir St	ЭУ		09 07 2006	
	City	State	Zip Code	Transaction ID: SA11A1.22182	
	Summit	NJ	07902-0220	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		250.00	
	Name of Employer Overlook Hosp	Occupation Patholog			
	Receipt For:	Aggregate	e Year-to-Date ▼		
Primary General			250.00		
	Other (specify)		200.00		
s	UBTOTAL of Receipts This Page (optional)			750.00	
۲	,				
T	OTAL This Period (last page this line number of	only)	>		

S	CHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 21 / 45
	EMIZED RECEIPTS	or each category of the	(check only one)
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Ar	ny information copied from such Reports and Statements	may not be sold or used by any person	
or	for commercial purposes, other than using the name and	address of any political committee to	solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)		
$ \rangle$	College of American Pathologists Political Action	on Committee	
	Full Name (Last, First, Middle Initial)		1
Α.	Gerard Stephen Ruby, Dr.		Date of Receipt
	Mailing Address 12251 S 80th Ave		M M / D D / Y Y Y Y
			09 29 2006
	City State	'	Transaction ID: SA11A1.22186
	Palos Heights IL	60463-0930	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		500.00
	Name of Employer Palos Community Hosp Patho		
		gate Year-to-Date ▼	1
	Primary General	500.00	
	Other (specify) ▼	300.00	
В.	Full Name (Last, First, Middle Initial) M. Marion Rundell, Dr.		Date of Receipt
	Mailing Address Path		M M / D D / Y Y Y Y
	PO Box 58744	7'- 0-1-	09 07 2006
	City State Houston TX	'	Transaction ID: SA11A1.22068
		77258	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		750.00
	Name of Employer Clear Lake Pathology Part- Datho		
	ners LTD Patrio		
	Receipt For: Aggre	gate Year-to-Date ▼	
	Other (specify)	750.00	
С.	Full Name (Last, First, Middle Initial) L. David Scrivner, Dr.		Date of Receipt
	Mailing Address Department of Pathology 232 S. Woods Mill Road		09 07 2006
	City State	Zip Code	Transaction ID: SA11A1.22254
	<u>Chesterfield</u> MO	63017	Amount of Each Receipt this Period
	FEC ID number of contributing		250.00
	federal political committee.		250.00
	Name of Employer St. Luke's Hosp Patho		
		gate Year-to-Date ▼	
	Primary General	250.00	
	Other (specify) ▼	250.00	
[s	UBTOTAL of Receipts This Page (optional)		1500.00
\vdash	CET CTTLE OF TOOOIPIO TITLE T age (optional)		
т	OTAL This Period (last page this line number only)	>	

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 22 / 45
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a
Ar or	y information copied from such Reports and Stater for commercial purposes, other than using the nam	ments may	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) College of American Pathologists Political	Action (Committee	
Α.	Full Name (Last, First, Middle Initial) Lawrence Seidenstein			Date of Receipt
	Mailing Address Lab 1620 Med Ln Ste 100			09 01 2006
	City	State	Zip Code	Transaction ID: SA11A1.22036
	Ft Myers	FL	33907	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1000.00
	AmeriPath Florida Inc	Occupation Pathologi		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼		1000.00	
В.	Full Name (Last, First, Middle Initial) Ann Mary Sens, Dr.			Date of Receipt
	Mailing Address Department of Pathology 501 N Columbia Rd			09 / 01 / 2006
	City	State	Zip Code	Transaction ID: SA11A1.22286
	Grand Forks	ND	58202	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Univ of North Dakota Scho-	Occupation		
	Si di Medicili	Pathologi Aggregate	Year-to-Date V	
	Primary General	riggrogato		1
	Other (specify) ▼	0 0	250.00	
C.	Full Name (Last, First, Middle Initial) B. Ervin Shaw, Dr.			Date of Receipt
	Mailing Address Department of Pathology 2720 Sunset Blvd.			09 22 2006
	City	State	Zip Code	Transaction ID: SA11A1.22126
	West Columbia	SC	29169-4810	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1000.00
	Lovington Mod Ctr	Occupation Pathologi		
		Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		1000.00	
s	UBTOTAL of Receipts This Page (optional))	2250.00
	OTAL This Period (last page this line number only)	1		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 23 / 45
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a
Ar	y information copied from such Reports and State for commercial purposes, other than using the na	ements may	not be sold or used by any person	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) College of American Pathologists Politica			
Α.	Full Name (Last, First, Middle Initial) D June Sigman, Dr.			Date of Receipt
	Mailing Address 3059 S Maryland Pkwy S	ite 100		0 9 1 4 2 0 0 6
	City	State	Zip Code	Transaction ID: SA11A1.22123
	Las Vegas FEC ID number of contributing federal political committee.	C	89109-2202	Amount of Each Receipt this Period 1000.00
	Name of Employer Laboratory Medicine Consultants, Ltd Receipt For: Primary Other (specify)	Occupation Patholog Aggregate		1
В.	Full Name (Last, First, Middle Initial) D. Byron Smith, Dr. Mailing Address Dept of Path	0 0		Date of Receipt
	272 Hospital Rd	State	Zip Code	09 07 2006
	Chillicothe	OH	45601	Transaction ID: SA11A1.22024 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Adena Regional Medical Center Receipt For: Primary General	Occupation Patholog Aggregate		1
	Other (specify) ▼	0 0	0 0 0 0 0 0 0	
C.	Full Name (Last, First, Middle Initial) R. James Taylor, Dr.			Date of Receipt
	Mailing Address Department of Pathology 1923 S Utica Ave			0 9 1 4 2 0 0 6
	City Tulsa	State OK	Zip Code	Transaction ID: SA11A1.22230
	FEC ID number of contributing	C	74104-6520	Amount of Each Receipt this Period 250.00
	federal political committee.			
	Name of Employer Pathology Laboratory Assoc	Occupation Patholog		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
s	UBTOTAL of Receipts This Page (optional)			1750.00
 	OTAL This Period (last page this line number on	w)		

2	CHEDULE A (FEC Form 3X)			FOR LINE N	IUMBER:	PAGE 24 / 45	
			Use separate schedule(s) or each category of the	(check only	one)		
П	EMIZED RECEIPTS		Detailed Summary Page	X 11a	11b	11c 12	
				13	14	15 16 17	
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	not be sold or used by any perso	n for the purpo	se of solici	ting contributions	
<u>.</u>	NAME OF COMMITTEE (In Full)	arro arro aoc	areas or any political committee to		10110 110111	odon committee.	
\	College of American Pathologists Politic	al Action (Committoo				
/	College of American Fathologists Folitic	ai Action C	Johnniee				
	Full Name (Last, First, Middle Initial) J Michael Teaford, Dr.			Date of F	Popoint		
٦.	· · · · · · · · · · · · · · · · · · ·			M M	•	/ Y Y Y Y	
	Mailing Address Dept of Path 10 Medical Park Dr			0 9	14	2006	
	City	State	Zip Code	Transact	ion ID: SA	A11A1.22192	
	Asheville	NC	28803			ceipt this Period	
	FEC ID number of contributing					050.00	
	federal political committee.	C				250.00	
	Name of Employer Pathologists Med Lab PA	Occupation	1	1			
	Pathologists Med Lab PA	Patholog					
	Receipt For:	Aggregate	Year-to-Date ▼				
	Primary General		250.00	1			
	Other (specify) ▼	1 1					
	Full Name (Last, First, Middle Initial)						
3.	M James Thornbery, Dr.			Date of F	Receipt		
	Mailing Address General Medical Labs		0 9	07	2006		
	Gity 36 S Brooks Street	Zip Code					
	Madison	State WI	53715			A11A1.22143 ceipt this Period	
		VVI	33713	Amount	DI Each Re	ceipi inis Period	
	FEC ID number of contributing federal political committee.	C				250.00	
	Name of Employer Meriter Health Services	Occupation					
	Descipt Few	Patholog					
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	1			
	Other (specify)		250.00				
		0 0	0 0 0 0 0 0 0	1			
•	Full Name (Last, First, Middle Initial) Allen Gregory Threatte, Dr.			Date of F	Receint		
٠.	Mailing Address Department of Pathology	<u> </u>		M M	/ D D	/ Y Y Y Y Y	
	750 E. Adams St.			0 9	1 4	2006	
	City	State	Zip Code	Transact	ion ID: SA	A11A1.22262	
	Syracuse	NY	13210	Amount	of Each Re	ceipt this Period	
	FEC ID number of contributing	С				535.00	
	federal political committee.						
	Name of Employer SUNY Upstate Med Univ	Occupation					
		Patholog					
	Receipt For:	Aggregate	Year-to-Date ▼	. [
	Primary General		535.00				
	Other (specify) ▼	0 0					
s	UBTOTAL of Receipts This Page (optional)		······			1035.00	
_	OTAL This Period (last page this line number on	lv)					
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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 45 (check only one) X 11a 11b 11c 12 15 16 17
An or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any persoress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) College of American Pathologists Politica	al Action C	Committee	
۹.	Full Name (Last, First, Middle Initial) V. Devendra Trivedi, Dr. Mailing Address Peoria-Tazewell Patholog	W. Croup		Date of Receipt
	221 NE Glen Oak Avenue	e .		09 07 2006
	City Peoria	State II	Zip Code 61636	Transaction ID: SA11A1.22147 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1 1 1 1 1 1	250.00
	Name of Employer Methodist Med Ctr of Illinois Receipt For: Primary General Other (specify)	Occupation Pathologi Aggregate		
3.	Full Name (Last, First, Middle Initial) E Kryder Van Buskirk, Dr. Mailing Address PO Box 1766			Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Danville FEC ID number of contributing	State KY	Zip Code 40423	Transaction ID: SA11A1.22096 Amount of Each Receipt this Period 500.00
	Name of Employer Ephraim McDowell Reg Med Ctr	Occupation Pathologi		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
 C.	Full Name (Last, First, Middle Initial) W. Elizabeth Varsa, Dr.			Date of Receipt
	Mailing Address 12800 Comanche Road Nunit 8	NE		09 22 YYYY 2006
	City Albuquerque	State NM	Zip Code 87111-4386	Transaction ID: SA11A1.22276 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07111-4300	200.00
	Name of Employer Unaffiliated	Occupation Pathologi		
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 400.00	
s	UBTOTAL of Receipts This Page (optional)			950.00
	<u>·</u>			

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 26 / 45
ITEMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12
		, 0	13 14 15 16 17
Any information copied from such Reports and Si or for commercial purposes, other than using the	tatements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) College of American Pathologists Polit	ical Action (Committee	
Full Name (Last, First, Middle Initial) A. G Daryl Vogel, Dr.			Date of Receipt
Mailing Address Path Tech LLC 1310 E Division St		71.0	09 / 28 / 2006
City <u>Mount Vernon</u>	State WA	Zip Code 98274	Transaction ID: SA11A1.22224 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		1750.00
Name of Employer Skagit Pathology Inc	Occupatio Patholog		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1750.00	
Full Name (Last, First, Middle Initial) 8. Ellen Emily Volk, Dr.			Date of Receipt
Mailing Address Dept of Path 44102 Dequindre Rd			09 / 21 / Y Y Y Y Y Y
City Trov	State MI	Zip Code	Transaction ID: SA11A1.22299
	IVII	48085	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		2000.00
Name of Employer William Beaumont Hosp	Occupatio Patholog		
Receipt For:		e Year-to-Date ▼	
Primary General Other (specify) ▼		2000.00	
Full Name (Last, First, Middle Initial) 2. Ping Wen			Date of Receipt
Mailing Address Dept of Path 111 S Grant Ave			09 29 7 2006
City	State	Zip Code	Transaction ID: SA11A1.22110
Columbus	OH	43215-1898	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer Grant Med Ctr/Riverside	Occupatio Patholog		
Methodist Hosp Receipt For:		e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	250.00	
SUBTOTAL of Receipts This Page (optional)			4000.00
TOTAL This Period (last page this line number of	only))	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

NAME OF COMMITTEE (In Full)

Full Name (Last, First, Middle Initial)

FEC ID number of contributing

federal political committee.

Other (specify)

Name of Employer Danbury Hosp

Primary

Receipt For:

Department of Pathology

State

CT

C

Aggregate Year-to-Date ▼

250.00

24 Hospital Avenue

General

Howard John Wolk, Dr.

Mailing Address

City

Danbury

FOR LINE NUMBER: PAGE 27 / 45 Use separate schedule(s) (check only one) or each category of the 11a 11b 11c Detailed Summary Page 13 14 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. College of American Pathologists Political Action Committee Date of Receipt 09 29 2006 Zip Code Transaction ID: SA11A1.22087 06810 Amount of Each Receipt this Period 250.00 Occupation Pathologist

SUBTOTAL of Receipts This Page (optional)	>	250.00
TOTAL This Period (last page this line number only)	•	30160.00

S	CHEDULE B (FEC Form 3X)	Use sepe	FOR LINE NUMBER: PAGE 28 /							28 / 4	15	
IT	EMIZED DISBURSEMENTS	for each	category of the Summary Page		(check on 21b 27	1ly one) 22 28a	Ę	23 28b	24 28c	П	25 29	26 30b
	y Information copied from such Reports and Statem for commercial purposes, other than using the name											S
$\left.\right\rangle$	NAME OF COMMITTEE (In Full) College of American Pathologists Political			0011		onoit doi	Tiribu	1011011	om such			
۹.	Full Name (Last, First, Middle Initial) Sun Trust Bank					Dat	e of D	ion ID	: SB21B. ement	.223	69	
	Mailing Address PO Box 85024					O	9 м	/ D	04	ž	o ŏ e	Y
		State VA	Zip Code 23285-5024			Am	ount o	of Each	Disburse	emen	-	-
	Purpose of Disbursement Bank Service Charges - CC Fees						•			•	42.7	75
	Candidate Name				ategory/ Type							
	Senate President	ment For: Primary Other (spe	General ecify) ▼									
	State: District: Full Name (Last, First, Middle Initial)					<u> </u>						
3.	Sun Trust Bank							ion ID isburs	: SB21B. ement			Υ
	Mailing Address PO Box 85024					0) 7	2	o ŏ e	
	Richmond	State VA	Zip Code 23285-5024			Am	ount (of Each	Disburse		t this F 348.6	-
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	Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spe	General ♥									
Э.	Full Name (Last, First, Middle Initial) Sun Trust Bank							isburs		.223	71	
	Mailing Address PO Box 85024					O	9 ^M	/ D	1 /	ž	o ŏ e	Y
	Richmond	State VA	Zip Code 23285-5024			Am	ount o	of Each	Disburse	emen	-	-
	Purpose of Disbursement Bank Service Charges - CC Fees Candidate Name				ategory/ Type			•			38.2	25
	Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (spe	General ecify) ▼		Nt							
s	UBTOTAL of Disbursements This Page (optional) .				▶		-				429.6	61
T	OTAL This Period (last page this line number only)				•							

S	CHEDULE B (FEC Form 3X)						INE NUMBER: PAGE 29 / 45						
IT	EMIZED DISBURSEMENTS	for each	category of the Summary Page		(check on 21b 27	1ly one) 22 28		23 28b	24 28c	Н	25 29	26 30b	
	y Information copied from such Reports and Statem for commercial purposes, other than using the name											S	
$\sum_{i=1}^{n}$	NAME OF COMMITTEE (In Full) College of American Pathologists Political			0011		onoit of		11011011	om such				
۹.	Full Name (Last, First, Middle Initial) Sun Trust Bank							tion ID Disburs	: SB21B. ement	.223	72		
	Mailing Address PO Box 85024					ď	9 ^M	/ D	8 / \	, ž	0 ŏ 6	S Y	
		State VA	Zip Code 23285-5024			An	nount	of Each	Disburse	ment	-	-	
	Purpose of Disbursement Bank Service Charges - CC Fees						•				46.1	13	
	Candidate Name Office Sought: House Disburse	ment For:			ategory/ Type								
	Senate President	Primary Other (spe	General ecify)										
	State: District: Full Name (Last, First, Middle Initial)					Tra	nsac	tion ID	: SB21B.	223	73		
3.	Sun Trust Bank							Disburs	ement			V	
	Mailing Address PO Box 85024					Ó	9 "	2	21/	2	0 Ó 6		
	Richmond	State VA	Zip Code 23285-5024			An	nount	of Each	Disburse	ment	this F	-	
	Purpose of Disbursement Bank Service Charges - Analysis Fees Candidate Name				ategory/		•				20.0	50	
	Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (spe	General ♥		Туре								
Э.	Full Name (Last, First, Middle Initial) Sun Trust Bank						te of [Disburs		.223	74		
	Mailing Address PO Box 85024					0	9	/ D 2	26	Ž	0 ŏ 6	S ^Y	
	Richmond	State VA	Zip Code 23285-5024			An	nount	of Each	Disburse	ment	this F	-	
	Purpose of Disbursement Bank Service Charges - CC Fees Candidate Name				ategory/ Type		•	•			20.	10	
	Office Sought: House Senate President State: District:	ement For: Primary Other (spe	General ♥										
s	UBTOTAL of Disbursements This Page (optional) .				•						100.7	76	
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5(CHEDULE B (FEC Form 3X)	Use seperate schedule(s)			PAGE 30 / 45
IT	EMIZED DISBURSEMENTS	for each category of the	(check only		
		Detailed Summary Page	27	22 23 24 28a 28b 28c	25 26 29 30b
	y Information copied from such Reports and Staten for commercial purposes, other than using the nam		, , ,		
<u> </u>	NAME OF COMMITTEE (In Full)	s and address of any pointed of			
\rangle	College of American Pathologists Political	Action Committee			
	Full Name (Last, First, Middle Initial)			Transaction ID: SB21E	3.22375
٩.	Sun Trust Bank			Date of Disbursement	
	Mailing Address PO Box 85024			09 / 30 /	^Y 2006
	City	State Zip Code		Amount of Each Disburs	sement this Period
	Richmond	VA 23285-5024			
	Purpose of Disbursement Bank Service Charges - CC Fees	I			19.13
	Candidate Name		Category/		
			Туре		
	Office Sought: House Disburse Senate	ement For: Primary General			
	President	Other (specify)			
	State: District:] (opea)/ •			

SUBTOTAL of Disbursements This Page (optional)	•	19.13
TOTAL This Period (last page this line number only)	—	549.50

SCIEDOLL B (I LCI OIIII 3X)	Use seperate schedule(s)	(check onl	LINE NUMBER: PAGE 31 /				
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 28a	23 28b	24 28c	25 29	26 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name							
NAME OF COMMITTEE (In Full)	and address of any political co	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	mon continuu		acii coiill	IIIICE	
College of American Pathologists Political	Action Committee						
Full Name (Last, First, Middle Initial)				ion ID: SB		3	
A. Alexander for Senate)isbursemer		Y ,	′
Mailing Address 1130 8th Avenue South			0 9 M	^D 27	2	0 Ó 6 Ì	
City Nashville	State Zip Code TN 37203		Amount o	of Each Disl	bursemen	t this Pe	riod
Purpose of Disbursement					1	000.00)
Candidate Name	L	Category/					
Office Sought: House Disburse X Senate President State: TN District:	ment For: 2006 Primary X General Other (specify)	Туре					
Full Name (Last, First, Middle Initial)			Transact	ion ID: SB	22 2224	0	
BASS VICTORY COMMITTEE)isbursemer	nt		7
Mailing Address PO Box 3451			0 9	20	2	0 0 6	
City Concord	State Zip Code NH 03302		Amount o	of Each Disl	bursemen	t this Pe	eriod
Purpose of Disbursement		• •			1	000.00)
Candidate Name	L.	Category/ Type					
Office Sought: X House Senate President State: NH District: 02	ment For: 2006 Primary X General Other (specify) ▼						
Full Name (Last, First, Middle Initial)			Transact	ion ID: SB	23.2238	 5	
Ben Nelson for US Senate Committee				isbursemer			_
Mailing Address P.O. Box 540154			09	20	, ž	0 0 6	
City Omaha	State Zip Code NE 68154		Amount o	of Each Disl	bursemen	t this Pe	eriod
Purpose of Disbursement	Γ	•	L		1	000.00)
Candidate Name		Category/ Type					
Office Sought: House Disburse X Senate President State: NE District:	ment For: 2006 Primary X General Other (specify) ▼						
SUBTOTAL of Disbursements This Page (optional)					3	000.00)
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S	CHEDULE B (FEC Form 3X)	Use seperate schedule(s)					INE NUMBER: PAGE 32 / 45									
IT	EMIZED DISBURSEMENTS	for each	category of the Summary Page		ſ	check 21	Ĺ	one) 22	Х	23	Γ	\neg 2	24 	25	26	
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	y Information copied from such Reports and Stater for commercial purposes, other than using the nam															
\vdash	NAME OF COMMITTEE (In Full)										_					
$ \rangle$	College of American Pathologists Political	Action Co	mmittee													
Α.	Full Name (Last, First, Middle Initial) Cardin for Senate							Transaction ID: SB23.22345 Date of Disbursement								
									M	/ [ž 0 ŏ	CY	
	Mailing Address 38 Ivy Street, SE							0 9		L	۷ (U	<u></u>	200	0	
	City Washington	State DC	Zip Code 20003					Amou	ınt c	of Eac	ch C	Disb	urseme	nt this	Period	
	Purpose of Disbursement			Г	·	•	7		_					1000	.00	
	Candidate Name			С		egory/	-									
	Senate President	ement For: Primary Other (spe	2006 X General													
	State: District:															
В.	Full Name (Last, First, Middle Initial) COMMITTEE FOR THE PRESERVATION	OF CAPI	TALISM					Trans Date		-	rsen	nent			V	
	Mailing Address P.O. Box 22614							0 9	IVI	′ L	2 7	7 ′	<u> </u>	žoŏ	6	
	City Alexandria	State VA	Zip Code 22314					Amou	ınt c	of Eac	ch C	Disb	urseme	nt this	Period	
	Purpose of Disbursement			Г		-	7	L.						5000	.00	
	Candidate Name			С		egory/	-									
	Office Sought: Senate President State: Disburse	ement For: Primary Other (spe	2006 X General ecify) ▼													
С.	Full Name (Last, First, Middle Initial) Conaway for Congress							Trans Date					3.223	95		
	Mailing Address P.O. Box 1605								M		2 7			žoŏ	6 ^Y	
	City Alexandria	State VA	Zip Code 22313					Amou	ınt c	of Eac	ch C	Disb	urseme	nt this	Period	
	Purpose of Disbursement			Г	v		7	L.				_		1000	.00	
	Candidate Name			С		egory/	-									
	Office Sought: X House Senate President State: VA District: 11	ement For: Primary Other (spe	2006 X General			•										
	State. VA DISTITUTE II								_	-	_	•		7000	00	
s	UBTOTAL of Disbursements This Page (optional)						<u> </u>	<u></u>						7000.	ŲÜ	
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TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 28a	X 23 28b	24 28c	25 29	26 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name							s
NAME OF COMMITTEE (In Full)	and dudress of any pointed of		Solioit Coritiii		5111 50011 (Johnnittee	
College of American Pathologists Political	Action Committee						
Full Name (Last, First, Middle Initial)				ction ID:		2323	
CONGRESSMAN BART GORDON COMN	ITTEE			f Disburse		/ · · · · · ·	Y
Mailing Address P O BOX 2008			0.9	2	0 /	ŽOÕ6	S
	State Zip Code TN 37133		Amoun	t of Each	Disburse	ement this F	Period
Purpose of Disbursement	07100		-			1000.	00
Candidate Name		Category/ Type					
Office Sought: X House Disburse Senate	ment For: 2006 Primary X General						
President	Other (specify)						
State: TN District: 06							
Full Name (Last, First, Middle Initial) CONGRESSMAN WAXMAN CAMPAIGN (ction ID:		2354	
CONGRESSIVAN WAXIMAN CAMPAIGN	OWNINTTEE		M N	f Disburse		/ Y Y	Υ
Mailing Address 8665 WILSHIRE BLVD #	220		0 9	2	7 /	ŽOÕ6	5
,	State Zip Code CA 90211		Amoun	t of Each	Disburse	ement this F	Period
Purpose of Disbursement	5/C 30211					1000.	00
Candidate Name		Category/ Type					
X	ment For: 2006						
Senate President	Primary X General Other (specify)						
State: CA District: 29	Other (Specify)						
Full Name (Last, First, Middle Initial)			Transa	ction ID:	SB23.2	2352	
Dave Camp for Congress			Date of	f Disburse		/	V
Mailing Address P.O. Box 423			0 9	2	7 /	ŽOĎG	3
,	State Zip Code MI 48640		Amour	t of Each	Disburse	ment this F	Period
Purpose of Disbursement	WII 40040		- Li			1000.	00
Candidate Name		Category/ Type					
Office Sought: X House Disburse	ment For: 2006						
Senate President	Primary X General						
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TOTAL This Period (last page this line number only)			L.				

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TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	<u> </u>	X 23 28b	24 28c	25 29	26	
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name							S	_
NAME OF COMMITTEE (In Full)	and address of any political of	ommittee to S	CHOIL COLLLID	uuona 110	an Suon C	, Jiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii		_
College of American Pathologists Political	Action Committee							
Full Name (Last, First, Middle Initial)					SB23.2	2387		
Feinstein for Senate				Disburse		YYY	Υ	
Mailing Address 420 C Street, NE			0 9	2	D / Y	ŽOŎ	3	
City Washington	State Zip Code DC 20002		Amount	of Each	Disburse	ment this I	Period	_
Purpose of Disbursement	20002		- []			1000.	00	
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Candidate Name		Category/ Type						
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President	Other (specify) ▼							
State: CA District:								_
Full Name (Last, First, Middle Initial) FRIENDS OF CLAY SHAW				ction ID: Disburse	SB23.22	2335		
			0 9 M	/ D ₂	D / Y	ž 0 0 6	Y	
Mailing Address PO BOX 2188			0.9			2000	2	
,	State Zip Code FL 33303		Amount	of Each	Disburse	ment this I	Period	
Purpose of Disbursement						1000.	00	
Candidate Name		Catagory						
Candidate Name		Category/ Type						
X	ment For: 2006 Primary X General							
Senate President	Primary X General Other (specify) ▼							
State: FL District: 22								
Full Name (Last, First, Middle Initial) FRIENDS OF JOHN BOEHNER				ction ID: Disburse	SB23.2	2350		
Mailing Address 7908-I Cincinnati Dayton	Dood		M M M	/ D2	D / Y	ž 0 Ŏ 6	S Y	
Mailing Address 7908-I Cincinnati Dayton								
City West Chester	State Zip Code OH 45069		Amount	of Each	Disburse	ment this I	Period	
Purpose of Disbursement		•	† L.			2500.	00	
Candidate Name		Category/						
		Type						
Office Sought: X House Disburse Senate	ment For: 2006 Primary X General							
President	Other (specify)							
State: OH District: 08								_
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TOTAL This Period (last page this line number only)								

SCILDOLL B (I LOI OIII 3X)	Use seperate schedule(s)	(check only	NUMBER:	PAG	iE 35 / 4	5	
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 28a	23 28b	24 28c	25 29	26 30b
Any Information copied from such Reports and Stater or for commercial purposes, other than using the name							3
NAME OF COMMITTEE (In Full)	and address of any political Co		non continuu	ווטוו פווטוו	. 30011 001	IIII	
College of American Pathologists Political	Action Committee						
Full Name (Last, First, Middle Initial)			Transact			384	
FRIENDS OF JOHN TANNER			Date of D			YY	Υ
Mailing Address Post Office Box 1994			09	[/] 27		ž 0 ŏ 6	
City Union City	State Zip Code TN 38281		Amount o	of Each D	isbursem	ent this P	eriod
Purpose of Disbursement	00201					2500.0	0
Candidate Name		Category/ Type					
Office Sought: X House Disburs	ement For: 2006 Primary X General						
President	Other (specify)						
State: TN District: 08							
Full Name (Last, First, Middle Initial) FRIENDS OF KENT CONRAD			Transact Date of D			359	
THENDS OF REINT CONTIAD			M M	[/] D 2 7	_	YYY	Υ
Mailing Address PO BOX 812			0 9	2 7		ž 0 ŏ 6	
City BISMARCK	State Zip Code ND 58502		Amount o	f Each D	isbursem	ent this P	eriod
Purpose of Disbursement	00002	•				2500.0	0
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Candidate Name		Category/ Type					
	ement For: 2006						
X Senate President	Primary X General Other (specify) ▼						
State: ND District: 00	Carrot (openity)						
Full Name (Last, First, Middle Initial)			Transact			363	
FRIENDS OF ROSA DELAURO			Date of D		_	YY	Υ
Mailing Address 49 HUNTINGTON STRE	ET		0 9	27		ž 0 ŏ 6	
City NEW HAVEN	State Zip Code CT 06511		Amount o	f Each D	isbursem	ent this P	eriod
Purpose of Disbursement	Г	•				1000.0	0
Candidate Name		Category/ Type					
Office Sought: X House Disburs Senate	ement For: 2006 Primary X General						
President	Other (specify)						
State: CT District: 03							
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٩.	WALDEN FOR CONGRESS INC				Date of Disbursemen	ıt		
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