

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION
MAR 5 1996

Dec 15 2 13 PM '95

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) COLLEGE OF AMERICAN PATHOLOGISTS POLITICAL ACTION COMMITTEE		2. FEC IDENTIFICATION NUMBER C00274944
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1350 I STREET, NW SUITE 590		
CITY, STATE and ZIP CODE WASHINGTON, DC 20005		
3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)		

4. TYPE OF REPORT

- (a) April 15 Quarterly Report
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year End Report
 July 31 Mid Year Report (Non-election Year Only)
 Termination Report
- Monthly Report Due On:
 February 20 June 20 October 20
 March 20 July 20 November 20
 April 20 August 20 December 20
 May 20 September 20 January 31
- Twelfth day report preceding _____ (Type of Election)
election or _____ in the State of _____
- Thirtieth day report following the General Election on _____
_____ in the State of _____
- (b) Is this Report an Amendment? YES NO

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SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5.	Covering Period <u>11/01/95</u> through <u>11/30/95</u>		
6.	(a) Cash on Hand January 1, 19 <u>95</u>		\$ 5,371.89
	(b) Cash on Hand at Beginning of Reporting Period	\$ 93,967.51	
	(c) Total Receipts (from Line 19)	\$ 2,125.00	\$ 113,105.00
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 96,092.51	\$ 118,476.89
7.	Total Disbursements (from Line 30)	\$ 6,015.00	\$ 28,399.38
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 90,077.51	\$ 90,077.51
9.	Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$ 0	For further information contact: Federal Election Commission 889 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10.	Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	\$ 0	

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer
JAYNE A. HART - ASSISTANT TREASURER

Signature of Treasurer: *Jayne A. Hart* Date: 12/11/95

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

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DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE	REPORT COVERING PERIOD	FROM	TO
COLLEGE OF AMERICAN PATHOLOGISTS POLITICAL ACTION COMMITTEE		11/01/95	11/30/95
I. Receipts	COLUMN A	Total This Period	COLUMN B
			Calendar Year
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	1,300.00		56,950.00
ii. Unitemized	825.00		55,155.00
Total (add i and ii) >	2,125.00		112,105.00
b. Political Party Committees	0		0
c. Other Political Committees (such as PACs)	0		0
d. Total Contributions (add a iii, b and c) >	2,125.00		112,105.00
12. Transfers From Affiliated/Other Party Committees	0		0
13. All Loans Received	0		0
14. Loan Repayments Received	0		0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0		0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0		1,000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0		0
18. Transfers from Nonfederal Account for Joint Activity	0		0
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	2,125.00		113,105.00
20. Total Federal Receipts (subtract line 16 from line 19) >	2,125.00		113,105.00
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	0		0
ii. Non-Federal Share	0		0
b. Other Federal Operating Expenditures	15.00		699.38
c. Total Operating Expenditures (add a i, a ii, and b) >	15.00		699.38
22. Transfers to Affiliated/Other Party Committees	0		0
23. Contributions to Federal Candidates/Committees and Other Political Committees	6,000.00		27,700.00
24. Independent Expenditures (use Schedule E)	0		0
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0		0
26. Loan Repayments Made	0		0
27. Loans Made	0		0
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees	0		0
b. Political Party Committees	0		0
c. Other Political Committees (such as PACs)	0		0
d. Total Contribution Refunds (add a, b and c) >	0		0
29. Other Disbursements	0		0
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	6,015.00		28,399.38
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	6,015.00		28,399.38
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	2,125.00		112,105.00
33. Total Contribution Refunds (from line 28d)	0		0
34. Net Contributions (other than loans)(subtract line 33 from 32)	2,125.00		112,105.00
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	15.00		699.38
36. Offsets to Operating Expenditures (from line 15)	0		0
37. Net Operating Expenditures (subtract line 36 from 35) >	15.00		699.38

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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

Name, mailing address, and zip code	Employer and occupation	Date	Amount
JAMES T. BOLAN 322 SPRINGLAKE HINSDALE, IL 60521	PATHOLOGIST PALOS COMMUNITY HOSPITAL	11/07/95	300.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		300.00
CARL T. SMEDBERG 504 SOUTH RIVER OAKS DRIVE INDIALANTIC, FL 32903	PATHOLOGIST SPACE COAST PATHOLOGISTS	11/07/95	1000.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		1000.00

TOTAL ITEMIZED LINE 11a

1300.00

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1

FOR LINE NUMBER 21b

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NAME OF COMMITTEE (In Full)

COLLEGE OF AMERICAN PATHOLOGISTS POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Crestar Bank 1455 New York Avenue, NW Washington, DC 20005	Bank charge Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/03/95	15.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

15.00

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)

COLLEGE OF AMERICAN PATHOLOGISTS POLITICAL ACTION COMMITTEE

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A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Sherrod Brown 111 Edgefield Drive Elyria, OH 44035	Contribution: OH-13 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/16/95	500.00
Helms for Senate P.O. Box 20699 Raleigh, NC 27619	Contribution: NC Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/16/95	1,000.00
Klug for Congress P.O. Box 5619 Madison, WI 53705	Contribution: WI-02 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/06/95	500.00
Laughlin for Congress 300 Clay Street West Columbia, TX 77486	Contribution: TX-14 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/03/95	1,000.00
Friends of Senator Rockefeller 245 2nd Street, NE Washington, DC 20002	Contribution: WV Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/06/95	1,000.00
Tennesseans for Thompson 425 2nd Street, NE Washington, DC 20002	Contribution: TN Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/30/95	1,000.00
Thurman for Congress P.O. Box 5058 Inverness, FL 34450	Contribution: FL-05 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/16/95	500.00
Friends of Rick White P.O. Box 8156 Kirkland, WA 98034	Contribution: WA-01 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/03/95	500.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

6,000.00

**Federal Election Commission
 ENVELOPE REPLACEMENT PAGE
 FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

Hand Delivered

DATE OF RECEIPT

12-15-95

First Class Mail

POSTMARKED

Registered/Certified Mail

POSTMARKED

No Postmark

Postmark Illegible

Received from the House Office of Records
 and Registration

DATE OF RECEIPT

Received from the Senate Office of Public
 Records

DATE OF RECEIPT

Other (Specify):

POSTMARKED

and/or DATE OF RECEIPT

SPD

PREPARER

12-15-95

DATE PREPARED

9 5 0 3 0 1 0 4 3 5 8