

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION
MAY 5004

Oct 13 2 49 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 on _____ in the State of _____

Thirtieth day report following the General Election on _____

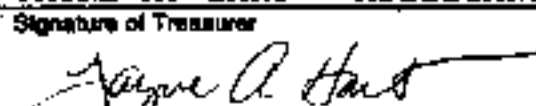
_____ in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. Covering Period <u>09/01/95</u> through <u>09/30/95</u>		
d. (a) Cash on Hand January 1, 19 <u>95</u>		\$ 5,371.89
(b) Cash on Hand at Beginning of Reporting Period	\$ 97,293.34	
(c) Total Receipts (from Line 19)	\$ 3,290.00	\$ 109,980.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 100,583.34	\$ 115,351.89
7. Total Disbursements (from Line 20)	\$ 3,062.96	\$ 17,831.51
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 97,520.38	\$ 97,520.38
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 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-218-3420
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


Date
10/12/95

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

FEC FORM 3X
(revised 9/93)

9503995372

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE		REPORT COVERING PERIOD	
COLLEGE OF AMERICAN PATHOLOGISTS POLITICAL ACTION COMMITTEE		FROM 09/01/95	TO 09/30/95
		COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts			
11. Contributions (other than loans) from:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)		2,050.00	55,650.00
ii. Unitemized		1,240.00	54,330.00
iii. Total (add i and ii) >		3,290.00	109,980.00
b. Political Party Committees		0	0
c. Other Political Committees (such as PACs)		0	0
d. Total Contributions (add a iii, b and c) >		3,290.00	109,980.00
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	0
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) >		3,290.00	109,980.00
20. Total Federal Receipts (subtract line 18 from line 19) >		3,290.00	109,980.00
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		62.96	631.51
c. Total Operating Expenditures (add a i, a ii, and b) >		62.96	631.51
22. Transfers to Affiliated/Other Party Committees		0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees		3,000.00	17,200.00
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) >		3,062.96	17,831.51
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >		3,062.96	17,831.51
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)		3,290.00	109,980.00
33. Total Contribution Refunds (from line 28d)		0	0
34. Net Contributions (other than loans)(subtract line 33 from 32)		3,290.00	109,980.00
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >		62.96	631.51
36. Offsets to Operating Expenditures (from line 15)		0	0
37. Net Operating Expenditures (subtract line 36 from 35) >		62.96	631.51

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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
GUY C. GLENN 3225 JACK BURKE LANE BILLINGS, MT 59106	RETIRED	09/26/95	200.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		300.00
CHRIS C. HARDY 5418 CHARTER OAKS DRIVE BETTENDORF, IA 52722	PATHOLOGIST QUAD CITIES PATHOLOGISTS GROUP	09/26/95	250.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		250.00
GEOFFREY L. JONES 6205 SQUIRE LANE WILLOWBROOK, IL 60514	PATHOLOGIST DUPAGE PATHOLOGY ASSOCIATES	09/26/95	300.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		300.00
EDWARD F. LOEB 5228 HARWOOD DRIVE DES MOINES, IA 50312	PATHOLOGIST IOWA METHODIST MEDICAL CENTER	09/11/95	250.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		250.00
KAREN A. MILLER 6139 NORTH NORTHCOTT CHICAGO, IL 60631	PATHOLOGIST NORTSHORE PATHOLOGY CONSULTANTS	09/18/95	500.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		500.00
GARY F. NEITZEL 3265 ANDERS LANE BROOKFIELD, WI 53005	PATHOLOGIST COLUMBIA HOSPITAL	09/11/95	300.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		300.00

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COLLEGE OF AMERICAN PATHOLOGISTS POLITICAL ACTION COMMITTEE

Name, mailing address, and zip code	Employer and occupation	Date	Amount
DOMINGO H. USEDA 900 SOUTH FIRST STREET MCALLEN, TX 78501	PATHOLOGIST USEDA & ASSOCIATES	09/18/95	250.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		250.00

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TOTAL ITEMIZED LINE 11a

2050.00

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

9503995376

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Peter Blute for Congress P.O. Box 16021 Alexandria, VA 22302	Contribution: MA-03 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/26/95	500.00
B. Full Name, Mailing Address and ZIP Code Martin Frost Campaign P.O. Box 75214 Washington, DC 20013	Contribution: TX-24 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/26/95	500.00
C. Full Name, Mailing Address and ZIP Code People for Ganske 4010 Franconia Road Springfield, VA 22310	Contribution: IA-04 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/26/95	500.00
D. Full Name, Mailing Address and ZIP Code Re-elect Nancy Johnson P.O. Box 1986 New Britain, CT 06050	Contribution: CT-06 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/26/95	500.00
E. Full Name, Mailing Address and ZIP Code John Lewis for Congress P.O. Box 2323 Atlanta, GA 30301	Contribution: GA-05 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/26/95	500.00
F. Full Name, Mailing Address and ZIP Code Nussle for Congress 4010 Franconia Road Springfield, VA 22310	Contribution: IA-02 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/26/95	500.00
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)

3,000.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

List 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

95039995377

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 charges Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/05/95	62.96
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)

62.96

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

10-13-95

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

JLB

PREPARER

10-13-95

DATE PREPARED

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