Image#	2018	8081	9911	9961	393
mugor				0001	

PAGE 1 / 20

FEC FORM 3X	AN	ID DIS	OF REO BURSEI An Authorized	MENT	S		Office Use Only	
1. NAME OF COMMITTEE (in f		E OR PRINT		ample: If typ er the lines.	ing, type	12FE4M	5	
American Psycl	niatric Asso	ociation Po	blitical Action		ee			
ADDRESS (number and		000 Wilson Bou	levard					
Check if diffe		uite1825						
than previous reported. (AC		rlington				VA	22209	-
2. FEC IDENTIFICA	TION NUMB	ER 🔻	CITY ▲		S		ZIP CO	ODE 🔺
C C00373696	;		3. IS THIS REPORT	×	NEW (N) OR	AM (A)	ENDED	
 4. TYPE OF REP (Choose One) (a) Quarterly Rep 	- (1	o) Monthly Report Due On:	Feb 20 (M2)		May 20 (M5) Jun 20 (M6)		20 (M8)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election
	ons.		Apr 20 (M4)	П	Jul 20 (M7)	Oct 2	0 (M10)	Year Only) Jan 31 (YE)
	Report (Q1)	(c) 12-Day		Primary (12	P)	General (12G)	Runoff (12R)
July 15 Quarterly October	Report (Q2)	PRE -E Report	for the:	Convention	(12C)	Special (1	2S)	
January 3	Report (Q3) 31 Report (YE)		Election on	M M	D D /	Y Y Y Y Y	in the State	
July 31 N	/lid-Year lon-election		Election for the:	General (30	IG)	Runoff (30	DR)	Special (30S)
Termination (TER)	on Report	пероп	Election on	M	D D /	Y Y Y Y Y	in the State	
5. Covering Period	07	01 /	2018	through	M M 07	/ D D / 31	2018]
I certify that I have ex		port and to the	ne best of my kno	wledge and	belief it is true	e, correct and	complete.	
Type or Print Name of								
Signature of Treasurer	Keen, Davi	d, , ,		[Electronical	ly Filed] Da	ate 08	/ D D / 19 /	2018
NOTE: Submission of fa	alse, erroneous,	or incomplete	information may s	ubject the pe	rson signing th	is Report to the	e penalties of 52	2 U.S.C. § 30109
Office Use Only							FEC FOR Rev. 05/2	

X

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

Page 2

Write or Type Committee Name

FEC Form 3X (Rev. 05/2016)

American Psychiatric Association Political Action Committee

R	eport Covering the Period: From: 07	M / D D / Y Y Y Y 01 2018 To:	M M / D D / Y
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2018		113918.67
	(b) Cash on Hand at Beginning of Reporting Period	122958.72	
	(c) Total Receipts (from Line 19)	21110.14	152177.46
	(d) Subtotal (add Lines 6(b) and6(c) for Column A and Lines6(a) and 6(c) for Column B)	144068.86	266096.13
7.	Total Disbursements (from Line 31)	455.24	122482.51
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	143613.62	143613.62
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

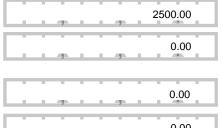
FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

American Psychiatric Association Political Action Committee

Report Covering the Period: From: 07	/ 01 / 2018 To:	07 / D D / Y Y Y 2018
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1. Contributions (other than loans) From:	· · · · · ·	
(a) Individuals/Persons Other		
Than Political Committees		
(i) Itemized (use Schedule A)	8987.65	101502.60
Ē		
(ii) Unitemized	8835.77	43954.48
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)	17823.42	145457.08
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	
(such as PACs)	0.00	0.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)▶	17823.42	145457.08
2. Transfers From Affiliated/Other		
Party Committees	0.00	0.00
Ē		
3. All Loans Received	0.00	0.00
4. Loan Repayments Received	0.00	0.00
5. Offsets To Operating Expenditures		
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	786.72	4220.38
6. Refunds of Contributions Made		
to Federal Candidates and Other		
Political Committees	2500.00	2500.00
7. Other Federal Receipts		
(Dividends, Interest, etc.)	0.00	0.00
8. Transfers from Non-Federal and Levin Funds	4	
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
(,		
(b) Louis Fundo (from Cohodulo LIF)	0.00	0.00
(b) Levin Funds (from Schedule H5)		
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
		0.00
9. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))▶	21110.14	152177.46
	4	
0. Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	21110.14	152177.46
	49. 49. 49.	

. -7



	-7-		-7-	152177.46
	-		-	152177.46

Page 3

I

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)	of Disbursements	Page 4	
II. Disbursements	COLUMN A Total This Period	COLUMN B	
. Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Calendar Year-to-Date	
(i) Federal Share	0.00	0.00	
(ii) Non-Federal Share	0.00	0.00	
(b) Other Federal Operating Expenditures	455.24	4232.51	
 (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	455.24	4232.51	
Transfers to Affiliated/Other Party Committees	0.00	0.00	
Contributions to Federal Candidates/Committees and Other Political Committees	0.00	118000.00	
Independent Expenditures			
(use Schedule E) Coordinated Party Expenditures (52 U.S.C. § 30116(d))	0.00	0.00	
(use Schedule F)	0.00	0.00	
Loan Repayments Made	0.00	0.00	
Loans Made Refunds of Contributions To:	0.00	0.00	
a) Individuals/Persons Other Than Political Committees	0.00	250.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
 (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) 	0.00	250.00	
Other Disbursements (Including			
Non-Federal Donations)	0.00	0.00	
Federal Election Activity (52 U.S.C. § 30101((a) Allocated Federal Election Activity (from Schedule H6)	20))		
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00	
Total Disbursements (add Lines 21(c), 22,			
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	455.24	122482.51	
Total Federal Disbursements			
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	455.24	122482.51	

I

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)		or Disbursements	Page 5
	III. Net Contributions/ Operating Expenditures		
33.	Total Contributions (other than loans) (from Line 11(d), page 3)	17823.42	145457.08
34.	Total Contribution Refunds (from Line 28(d))	0.00	250.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	17823.42	145207.08
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	455.24	4232.51
37.	Offsets to Operating Expenditures (from Line 15, page 3)	786.72	4220.38
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	- 331.48	12.13

FOR LINE NUMBER:

PAGE 6 OF

		Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a		11b	11c	12 16	17
Any information copied from such Reports and or for commercial purposes, other than using			erson for th		pose of	soliciting	contribut	ions
NAME OF COMMITTEE (In Full)								
American Psychiatric Associ	ation Politica	al Action Committee						
Full Name of Individual (Last, First, Middle Ancona, Laura, Carmen, , MD	e Initial) or Full O	rganization Name	Date	of Re	eceipt			
Mailing Address 29 Trantor Pl			M 07		D D D 30	/ Y	y y 2018	Y
City Staten Island	State NY	Zip Code 10302-1902				C376246 eceipt th		
FEC ID number of contributing federal political committee.	С			_	-		250.0	00
Name of Employer (for Individual) Self Employed		upation (for Individual) sician		Memo	o Item			
Receipt For: Primary General Other (specify) ▼	Primary General Aggregate		1					
Full Name of Individual (Last, First, Middle B. Banov, Michael, D, , MD	e Initial) or Full O	rganization Name	Date	of Re	eceipt			
Mailing Address 108 Margaret Ave NE			07	M /	25	/ Y	y y 2018	Y
City Marietta	State GA	Zip Code 30060-1306			-	C375197 eceipt th		
FEC ID number of contributing federal political committee.	s l						250.0	00
Name of Employer (for Individual) Self Employed		Occupation (for Individual) Psychiatrist			o Item			
Receipt For:	Aggregate	Year-to-Date ▼						
Other (specify) ▼		250.00]					
Full Name of Individual (Last, First, Middle Barnett, Debra, Marie, , MD	e Initial) or Full O	rganization Name	Date	of Re	eceipt			
Mailing Address 14437 University Cove Pl	1		07		05	/ Y	2018	Y
City Tampa	State FL	Zip Code 33613-3741				C373730 eceipt th		
FEC ID number of contributing federal political committee.	С				y	9	166.6	67
Name of Employer (for Individual) Self Employed		upation (for Individual) chiatrist		Memo	o Item			
Receipt For: Primary General Other (specify)	Aggregate	Aggregate Year-to-Date ▼ 500.01						
SUBTOTAL of Receipts This Page (optiona	l)				, .	,	666.6	67
TOTAL This Period (last page this line num	ber only)							

FOR LINE NUMBER:

PAGE

7 OF

IT.			Use separate schedule(s)	(ch	(check only one)					
			for each category of the Detailed Summary Page		× 11a		11b	11c	12	47
	y information copied from such Reports and Sta for commercial purposes, other than using the r									
$\overline{)}$	NAME OF COMMITTEE (In Full)									
\rangle	American Psychiatric Association	n Politica	I Action Committee							
A.	Full Name of Individual (Last, First, Middle Initia Boss, Eric, E, , MD	al) or Full Or	rganization Name		Date of	Re	eceipt			
	Mailing Address 1510 Arborwoods Dr				м м 07	/	21	/ Y	2018	Y
	City	State	Zip Code		Trans	acti	ion ID :	C375093	5	
	Brownsburg	IN	46112-7740	_	Amount	of	Each R	eceipt th	is Period	
	FEC ID number of contributing federal political committee.	С					-		83.	50
	Name of Employer (for Individual) RL Roudebush VA Medical Center		ipation (for Individual) sician		Me	emc	tem			
	Receipt For:	Aggregate	Year-to-Date 🔻							
	Primary General Other (specify) ▼		668.00	11.						
				1						
в.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Butler, Francis, K, , MD					Re	eceipt			
	Mailing Address 100 Main St					1	D D D 16	/ Y	2018	Y
	City	State	Zip Code				-	C374725	-	
	Safety Harbor	FL	34695-3657		Amount	of	Each R	eceipt th	is Period	
	FEC ID number of contributing federal political committee.	C			Ľ	_	-		250.0	00
	Name of Employer (for Individual) Self Employed	upation (for Individual) chiatrist		Me	emc	tem				
	Receipt For:	Aggregate	Year-to-Date ▼							
	Primary General Other (specify) ▼		, 250.00]						
<u>с</u> .	Full Name of Individual (Last, First, Middle Initia Coyle, Colleen, , ,	al) or Full Or	rganization Name		Date of	Re	eceipt			
	Mailing Address 3504 Rustic Way Ln				м м 07	/	19	/ Y	2018	Y
	City	State	Zip Code		Trans	act	ion ID :	C376250)2	
	Falls Church	VA	22044-1245		Amount	of	Each R	eceipt th	is Period	
	FEC ID number of contributing federal political committee.	5					y		78.0	00
	Name of Employer (for Individual) American Psychiatric Association		ipation (for Individual) eral Counsel		Memo Item					
	Receipt For:	Aggregate	Year-to-Date 🔻							
	Other (specify)		624.00] `	* Payroll	De	duction:	(\$39.00	Bi-Weekly	/)
s	UBTOTAL of Receipts This Page (optional)		•						411.5	50
					—	-	7	- 9		
11	OTAL This Period (last page this line number or	ııy)	•••••••••••••••••••••••••••••••••••••••		La companya di seconda	1	-			

FOR LINE NUMBER:

PAGE 8 OF

ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)					
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17					
			person for the purpose of soliciting contributions to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)								
American Psychiatric Assoc	ciation Politica	al Action Committee						
Full Name of Individual (Last, First, Mid A. Davis, Mary Helen, , , MD	dle Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 10720 Hobbs Station Re	ł		07 30 / Y Y Y Y 2018					
City	State KY	Zip Code	Transaction ID : C3753497					
Louisville		40223-2698	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		250.00					
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item					
Self Employed	Phy	sician						
Receipt For:	Aggregate	Year-to-Date V						
Primary General Other (specify) ▼		250.00	1					
			1					
Full Name of Individual (Last, First, Mide		rganization Name						
B. De Nesnera, Alexander, Peter,	, MD		Date of Receipt					
Mailing Address 2 Fogg St			07 / D D / Y Y Y Y 07 30 2018					
City	State	Zip Code	Transaction ID : C3762484					
Concord	NH	03301-2594	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		250.00					
Name of Employer (for Individual) New Hampshire Hospital		upation (for Individual) sician	Memo Item					
Receipt For:	Aggregate	Year-to-Date ▼						
Primary General		250.00	1					
Other (specify) v		1						
Full Name of Individual (Last, First, Mide C. Dowling, Frank, G, , MD	dle Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 12 St Johns Cir			07 / D D / Y Y Y Y 20 2018					
City	State NY	Zip Code	Transaction ID : C3750923					
Oakdale		11769-1631	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		500.00					
Name of Employer (for Individual) Self Employed		upation (for Individual) sician	Memo Item					
Receipt For:	Aggregate	Year-to-Date ▼						
Primary General		500.00	1					
Other (specify)		500.00	1					
SUBTOTAL of Receipts This Page (option	al)		1000.00					
TOTAL This Period (last page this line nu	mber only)							

FOR LINE NUMBER:

PAGE 9 OF

	-	Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12					
			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) American Psychiatric Assoc	iation Politica	al Action Committee						
Full Name of Individual (Last, First, Mide Frierson, Richard, Lesesne, , MD	dle Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 2738 Wheat St			07 17 2018					
City Columbia	State SC	Zip Code 29205-2539	Transaction ID : C3747281 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		250.00					
Name of Employer (for Individual) University of South Carolina		upation (for Individual) sician	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00]					
Full Name of Individual (Last, First, Mido B. Gorrindo, Tristan, , , MD	lle Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 1000 Wilson Blvd Fl 20			07 19 2018					
City Arlington	State VA	Zip Code 22209-3927	Transaction ID : C3762506 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		78.00					
Name of Employer (for Individual) American Psychiatric Association		upation (for Individual) actor of Education	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 624.00	* Payroll Deduction: (\$39.00 Bi-Weekly)					
Full Name of Individual (Last, First, Mido C. Griffith, Linda, J, , MD	dle Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 114 W North College St								
City Yellow Spgs	State OH	Zip Code 45387-1536	Transaction ID : C3741010 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		250.00					
Name of Employer (for Individual) Consolidated Care Inc		upation (for Individual) chiatrist	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	1					
SUBTOTAL of Receipts This Page (option	al)		578.00					
TOTAL This Period (last page this line nu	mber only)							

FOR LINE NUMBER:

PAGE 10 OF

		Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17					
			person for the purpose of soliciting contributions ee to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)								
American Psychiatric Associ	ation Politica	al Action Committee						
Full Name of Individual (Last, First, Middl A. Grissom, Christine, A, , MD	e Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 5200 State Road 46			07 16 Y Y Y Y Y 07 16 2018					
City	State FL	Zip Code	Transaction ID : C3747259					
Mims	FL	32754-5413	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		250.00					
Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item					
Self Employed	Psy	chiatrist						
	Aggregate	Year-to-Date V						
Other (specify) ▼		250.00						
			-					
Full Name of Individual (Last, First, Middl B. Hamlyn, Harry, Ward, , MD	e Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 915 Mountain View Rd			07 12 / Y Y Y Y 2018					
City	State	Zip Code	Transaction ID : C3762446					
Rapid City	SD	57702-3414	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		350.00					
Name of Employer (for Individual) Self Employed		upation (for Individual) rsician	Memo Item					
Receipt For:	Aggregate	Year-to-Date ▼						
Primary General Other (specify) ▼		350.00						
Full Name of Individual (Last, First, Middl C. Hutto, Mark, , ,	e Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 3817 Rainforest Cir			07 23 2018					
City	State	Zip Code	Transaction ID : C3762455					
Norcross	GA	30092-2347	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		250.00					
Name of Employer (for Individual) Self Employed		upation (for Individual) sician	Memo Item					
Receipt For:	Aggregate	Year-to-Date ▼						
Primary General		250.00						
Other (specify)		230.00	-					
SUBTOTAL of Receipts This Page (optiona	l)		▶ 850.00					
TOTAL This Period (last page this line num	iber only)							

FOR LINE NUMBER:

PAGE 11 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)										
ILEIVIIZED KEGEIPIS		for each category of the Detailed Summary Page	X 11a 11b 11c 12										
			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.										
NAME OF COMMITTEE (In Full) American Psychiatric Assoc	ciation Politica	al Action Committee											
Full Name of Individual (Last, First, Mid A. Kagan, Bruce, L, , MD	dle Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 655 Haverford Ave			Mom / D / Y Y Y 07 30 / 2018 Transaction ID : C3762481 Amount of Each Receipt this Period										
City Pacific Palisades	State CA	Zip Code 90272-4311											
FEC ID number of contributing federal political committee.	С		250.00										
Name of Employer (for Individual) Self Employed		upation (for Individual) sician	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00]										
Full Name of Individual (Last, First, Mid B. Keen, David, , ,	II Name of Individual (Last, First, Middle Initial) or Full Organization Name een, David												
Mailing Address 1000 Wilson Blvd Suite 1825	1-		Date of Receipt 07 / 19 / Y Y Y Y Y 2018										
City Arlington	State VA	Zip Code 22209	Transaction ID : C3762508 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		38.48										
Name of Employer (for Individual) American Psychiatric Association		upation (for Individual) ef Financial Officer	Memo Item * Payroll Deduction: (\$19.24 Bi-Weekly)										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 307.84											
Full Name of Individual (Last, First, Mid C. Kroeger-Ptakowski, Kristin, ,		rganization Name	Date of Receipt										
Mailing Address 58A N. Bedford St			07 19 / Y Y Y Y 07 19 2018										
City Arlington	State VA	Zip Code 22201	Transaction ID : C3762510 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		125.00										
Name of Employer (for Individual) Self Employed		upation (for Individual) sician	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1000.00	* Payroll Deduction: (\$62.50 Bi-Weekly)										
SUBTOTAL of Receipts This Page (option	nal)		413.48										
ΤΟΤΑL This Period (last page this line nu	mber only)												

FOR LINE NUMBER:

PAGE 12 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)											
		for each category of the Detailed Summary Page	X 11	-	11b 14	11c 15	12 16	17						
Any information copied from such Reports at or for commercial purposes, other than using			erson for t	he pu	irpose of	soliciting	contribu	tions						
NAME OF COMMITTEE (In Full)														
American Psychiatric Associ	ation Politica	al Action Committee												
Full Name of Individual (Last, First, Middle A. Lewis, Edward, Thomas, , MD	e Initial) or Full O	rganization Name	Date	e of F	Receipt									
Mailing Address 45 Sycamore Ave Apt 1421				M 7	/ D [04) / Y	2018	Y						
City Charleston	State SC	Zip Code 29407-6787				C373652 Receipt th								
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 41.66											
Name of Employer (for Individual) Medical University of SC		upation (for Individual) chiatrist		Men	no Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 291.62												
Full Name of Individual (Last, First, Middle	e Initial) or Full O	rganization Name												
B. Mittal, Moneeshindra, S, , MD			Date	e of F	Receipt									
Mailing Address 510 N Bracken St)7	/ D L 12) / Y	2018	Y						
City Wichita	State KS	Zip Code 67206-7800				C376243								
FEC ID number of contributing federal political committee.	С	C				Amount of Each Receipt this Period								
Name of Employer (for Individual) Christi Clinic		upation (for Individual) chiatrist		Men	no Item									
Receipt For:	Aggregate	Year-to-Date ▼												
Other (specify) ▼		500.00]											
Full Name of Individual (Last, First, Middle C. Ortego, Joseph, , ,	e Initial) or Full O	rganization Name	Date	e of F	Receipt									
Mailing Address 615 Esplanade Unit 409			()7 ^M	/ D D 25		2018 ^Y	Y						
City Redondo Beach	State CA	Zip Code 90277-4136				C375186 Receipt th	67 iis Period							
FEC ID number of contributing federal political committee.	С				y	. ,	250.	00						
Name of Employer (for Individual) Cal State University LA		upation (for Individual) chiatrist		Men	no Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00]											
SUBTOTAL of Receipts This Page (optiona	I)				, .	. ,	791.	66						
TOTAL This Period (last page this line num	ber only)													

FOR LINE NUMBER:

PAGE 13 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)											
ILEIVILLED RECEIPIO		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17											
			person for the purpose of soliciting contributions to solicit contributions from such committee.											
NAME OF COMMITTEE (In Full)														
American Psychiatric Associa	ation Politica	al Action Committee												
Full Name of Individual (Last, First, Middle A. Pender, Vivian, , ,	e Initial) or Full C	organization Name	Date of Receipt											
Mailing Address 22 Pomander Walk			07 / D D / Y Y Y Y 07 14 2018											
City	State	Zip Code	Transaction ID : C3747027											
New York	NY	10025-6931	Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	C		500.00											
Name of Employer (for Individual)		upation (for Individual)	Memo Item											
Self Employed Receipt For:		sician												
Primary General	Aggregate	Year-to-Date ▼	-											
Other (specify) V		500.00]											
Full Name of Individual (Last, First, Middle B. Pothuloori, Pratap, V, , MD	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Pothuloori, Pratap, V, , MD													
Mailing Address 3104 N 171st Ave			Date of Receipt											
City	State	Zip Code	Transaction ID : C3762494											
Omaha	NE	68116	Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	С		500.00											
Name of Employer (for Individual) Self Employed		upation (for Individual) /sician	Memo Item											
Receipt For:	Aggregate	Year-to-Date V												
Primary General Other (specify) ▼		500.00]											
Full Name of Individual (Last, First, Middle	e Initial) or Full C	organization Name												
C. Resch, William, J, , DO Mailing Address 6320 Havens Rd			Date of Receipt											
0020 Havens Rd			07 17 2018											
City	State	Zip Code	Transaction ID : C3747901											
Blacklick	OH	43004-9670	Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	С		500.00											
Name of Employer (for Individual) OhioHealth		upation (for Individual) chiatrist	Memo Item											
Receipt For:	Aggregate	Year-to-Date V												
Primary General Other (specify)		500.00]											
SUBTOTAL of Receipts This Page (optional)		1500.00											
TOTAL This Period (last page this line num	, 													

FOR LINE NUMBER:

PAGE 14 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)									
ILIVIIZED RECEIPIS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 □									
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full) American Psychiatric Assoc	iation Politica	al Action Committee										
Full Name of Individual (Last, First, Mide A. Runnels, Patrick, S, , MD	dle Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 15617 Fernway Rd			M M / D D / Y Y Y Y 07 07 2018									
City Shaker Heights	State OH	Zip Code 44120-3351	Transaction ID : C3738128 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		83.34									
Name of Employer (for Individual) University Hospitals		upation (for Individual) chiatrist	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.02]									
Full Name of Individual (Last, First, Mide B. Sack, Peter, Gordon, , MD	lle Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 3333 Henry Hudson Pkv	-		M M M / D D / Y Y Y Y Y 07 11 / 2018 Transaction ID : C3741012 Amount of Each Receipt this Period 250.00									
City Bronx	State NY	Zip Code 10463-3224										
FEC ID number of contributing federal political committee.	С											
Name of Employer (for Individual) Self Employed		upation (for Individual) rsician	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00]									
Full Name of Individual (Last, First, Mide C. Schacter-Fitzgerald, Randie,		rganization Name	Date of Receipt									
Mailing Address 212 W Matthews St Ste 106	State	Zin Oode	07 / D D / Y Y Y Y 25 / 2018									
City Matthews	NC	Zip Code 28105-5442	Transaction ID : C3751865 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		250.00									
Name of Employer (for Individual) Self Employed	Psyc	upation (for Individual) chiatrist	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	1									
SUBTOTAL of Receipts This Page (option	al)		583.34									
TOTAL This Period (last page this line nu	mber only)											

FOR LINE NUMBER:

PAGE 15 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)										
I LIVILLED RECEIPIO		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 1										
			person for the purpose of soliciting contributions e to solicit contributions from such committee.										
NAME OF COMMITTEE (In Full) American Psychiatric Asso	ciation Politica	al Action Committee											
Full Name of Individual (Last, First, Mic A. Sonkiss, Joshua, , , MD													
Mailing Address 1265 Bannister Dr			07 / D D / Y Y Y Y 2018										
City Anchorage	State AK	Zip Code 99508-3923	Transaction ID : C3747888 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		525.00										
Name of Employer (for Individual) Sonkiss Medical Consulting, LLC		upation (for Individual) sician	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 525.00]										
Full Name of Individual (Last, First, Mic B. Warnell, Ronald, Lee, , MD	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Warnell, Ronald, Lee, , MD												
Mailing Address 404 New York St Unit 7279	01-11-	7th Orde	07 / 14 / Y Y Y Y 2018										
City Redlands	State CA	Zip Code 92375-7013	Transaction ID : C3747026 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		100.00										
Name of Employer (for Individual) RSB County Indian Health, Inc		upation (for Individual) chiatrist	Memo Item										
Receipt For: Primary General	Aggregate	Year-to-Date V											
Other (specify) V		250.00											
Full Name of Individual (Last, First, Mic Williams, Eric, R, , MD	dle Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 708 Cottontail Ct S			07 / ^D D / ^Y Y Y Y Y 28 2018										
City Columbia	State SC	Zip Code 29229-9485	Transaction ID : C3763871 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		84.00										
Name of Employer (for Individual) Self Employed		upation (for Individual) chiatrist	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 588.00]										
SUBTOTAL of Receipts This Page (option			709.00										
TOTAL This Period (last page this line nu	umber only)												

FOR LINE NUMBER:

PAGE 16 OF

	-	Use separate schedule(s)	(check only one)									
		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17									
Any information copied from such Reports and or for commercial purposes, other than using			person for the purpose of soliciting contributions									
NAME OF COMMITTEE (In Full)												
American Psychiatric Associa	tion Politica	al Action Committee										
Full Name of Individual (Last, First, Middle Wills, Cheryl, D, , MD	Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 5247 Wilson Mills Rd # 452			M M / D D / Y Y Y Y 07 25 2018									
City Cleveland	State OH	Zip Code 44143-3016	Transaction ID : C3751966									
FEC ID number of contributing	C		Amount of Each Receipt this Period									
federal political committee.	C		150.00									
Name of Employer (for Individual) University Hospitals of Cleveland		upation (for Individual) chiatrist	Memo Item									
Receipt For:	Aggregate	Year-to-Date 🔻										
Other (specify)		300.00]									
Full Name of Individual (Last, First, Middle	Initial) or Full O	rganization Name										
B. Wong, DeeAnn, Yuk-Han, , MD Mailing Address 5232 Quaker Hill Ln			Date of Receipt									
City	State	Zip Code	Transaction ID : C3735435									
San Diego	CA	92130-4890	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		250.00									
Name of Employer (for Individual) Self Employed		upation (for Individual) rsician	Memo Item									
Receipt For:	Aggregate	Year-to-Date 🔻										
Other (specify)		250.00]									
Full Name of Individual (Last, First, Middle C. Wright, Sydney T, Thurman, , N		rganization Name	Date of Receipt									
Mailing Address 200 Munich St			07 25 2018									
City San Francisco	State CA	Zip Code 94112-2149	Transaction ID : C3751978 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С											
Name of Employer (for Individual) Self Employed		upation (for Individual) sician	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.00]									
SUBTOTAL of Receipts This Page (optional)			900.00									
TOTAL This Period (last page this line numb	er only)											

FOR LINE NUMBER:

PAGE 17 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)										
ILEIVIIZED KEGEIFIJ		for each category of the Detailed Summary Page	X 11a 11b 11c 12										
Any information copied from such Reports ar or for commercial purposes, other than using	d Statements ma the name and a	L ay not be sold or used by any p ddress of any political committe	13 14 15 16 1 person for the purpose of soliciting contributions te to solicit contributions from such committee.										
NAME OF COMMITTEE (In Full) American Psychiatric Associa	ation Politica	al Action Committee											
Full Name of Individual (Last, First, Middle A. Wylonis, Lauren, J, , MD	e Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 1035 Sugartown Rd			Mom / D D / Y Y Y 07 15 2018 Transaction ID : C3747035 Amount of Each Receipt this Period										
City Berwyn	State PA	Zip Code 19312-1883											
FEC ID number of contributing federal political committee.	С		500.00										
Name of Employer (for Individual) KingsHaven		upation (for Individual) sician/CEO	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00]										
Full Name of Individual (Last, First, Middle B. Young, Melinda, Louise, , MD	Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 3527 Mt Diablo Blvd # 337			07 08 / Y Y Y Y Y 2018										
City _Lafayette	State CA	Zip Code 94549-3815	Transaction ID : C3738136 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		84.00										
Name of Employer (for Individual) Self Employed		upation (for Individual) rsician	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 588.00]										
Full Name of Individual (Last, First, Middle	Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address													
City	State	Zip Code	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C												
Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date V]										
SUBTOTAL of Receipts This Page (optional)		584.00										
TOTAL This Period (last page this line num	per only)		8987.65										

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 18 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)										
		for each category of the Detailed Summary Page	11a 11b 11c 12 13 14 ✗ 15 16 17										
Any information copied from such Reports and or for commercial purposes, other than using	d Statements ma the name and a	ay not be sold or used by any ddress of any political committe	person for the purpose of soliciting contributions to solicit contributions from such committee.										
NAME OF COMMITTEE (In Full)													
American Psychiatric Associa	tion Politica	al Action Committee											
Full Name of Individual (Last, First, Middle American Psychiatric Association	Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 1000 Wilson Blvd Ste 1825			07 13 2018										
City Arlington	State VA	Zip Code 22209-3924	Transaction ID : C3762518 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		786.72										
Name of Employer (for Individual)	Осси	upation (for Individual)	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4220.38	Reimbursed Bank Fees										
Full Name of Individual (Last, First, Middle B.	Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address													
City	State	Zip Code	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C												
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date V]										
Full Name of Individual (Last, First, Middle C.	Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address			M = M / D = D / Y = Y = Y = Y										
City	State	Zip Code	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С												
Name of Employer (for Individual)	Осси	upation (for Individual)	Memo Item										
Receipt For: Primary General Other (specify)		Year-to-Date ▼]										
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line numb			786.72										

FOR LINE NUMBER:

PAGE 19 OF

		Use separate schedule(s)	(check only one)									
II EIVIIZED KEGEIF13		for each category of the Detailed Summary Page	$ \begin{array}{ c c c c c c c c c c c c c c c c c c c$									
Any information copied from such Reports and or for commercial purposes, other than using	d Statements ma the name and a	ay not be sold or used by any ddress of any political committe	13 14 15 ¥ 16 17 person for the purpose of soliciting contributions be to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full)												
American Psychiatric Associa	tion Politica	al Action Committee										
Full Name of Individual (Last, First, Middle A. TEAM RYAN	Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 320 1ST STREET SE			07 17 2018									
City WASHINGTON	State DC	Zip Code 20003	Transaction ID : C3762498 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C coo	0545947	2500.00									
Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2500.00	Refund of 03/16/2018 Contribution									
Full Name of Individual (Last, First, Middle	Initial) or Full O	rganization Name	Data of Despirit									
B. Mailing Address			Date of Receipt									
City	State	Zip Code	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С											
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date V]									
Full Name of Individual (Last, First, Middle C.	Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address			M M / D D / Y Y Y Y Y									
City	State	Zip Code	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С											
Name of Employer (for Individual)	Осси	upation (for Individual)	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼]									
SUBTOTAL of Receipts This Page (optional).			2500.00									
TOTAL This Period (last page this line numb	er only)		2500.00									

	CHEDULE B (FEC Form 3X)	Use separate schedule(s)					E NUMBER: PAGE 20 OF 20									
11	EMIZED DISBURSEMENTS	for each	category of the Summary Page			21b 28a	22 28b	22 23 26					27 30b			
	y information copied from such Reports and State for commercial purposes, other than using the na							son for the purpose of soliciting contributions								
	NAME OF COMMITTEE (In Full)															
$\left \right\rangle$	American Psychiatric Association	Political	Action Com	mitte	e											
Α.	Full Name (Last, First, Middle Initial)						Date of	Dis	burse	emei	nt					
Mailing Address 3033 Wilson Blvd.							07 / 02 / Y Y Y Y 07 02									
	City Arlington	State VA	Zip Code 22201				FEC Identification Number									
	Purpose of Disbursement Credit Card Processing Fees						С	nea	ction	ID -	D18	1339				
	Candidate Name			Cate	ego ype		Amount						t this F			
	Office Sought: House Disburse Senate President	ement For: Primary Other (spe	General cify) ▼							_			395.2	9		
_	State: District:		<i>,</i> , ,				Me	mo	Item							
В.	Full Name (Last, First, Middle Initial) PayPal, Inc.						Date of Disbursement							Y		
	Mailing Address 2145 Hamilton Ave							07 03 2018								
	City San Jose Purpose of Disbursement Credit Card Processing Fees	State Zip Code CA 95125-5905					FEC Identification Number									
	Candidate Name	Category/ Type							action ID : D184339 f Each Disbursement this Period					Period		
	Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)					59.95									
	State: District:		city)				Memo Item									
C.	Full Name (Last, First, Middle Initial)						Date of	Dis		-						
	Mailing Address						FEC Identification Number									
	City	State	Zip Code													
	Purpose of Disbursement						С			_						
	Candidate Name Category/ Type						Amount	of	Each	Dis	burse	men	t this F	Period		
	Senate	ement For: Primary	General						-		-9-		1 40			
	State: District:	Other (spe	ciiy) ▼				Me	mo	Item							
⊢	UBTOTAL of Disbursements This Page (optional)						[.		,		-9-	-	455.2 455.2			
ΙT	OTAL This Period (last page this line number only	/)			•••••	• 🕨			,		7		100.2			