

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION
MAIL ROOM

Mar 10 1 37 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 BYE STREET, NW	3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)
CITY, STATE and ZIP CODE WASHINGTON, DC 20005	

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:
- | | | |
|--|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input type="checkbox"/> October 20 |
| <input checked="" type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> 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
5. Covering Period <u>02/01/95</u> through <u>02/28/95</u>		
6. (a) Cash on Hand January 1, 19 <u>95</u>		\$ 5,371.89
(b) Cash on Hand at Beginning of Reporting Period	\$ 35,591.89	
(c) Total Receipts (from Line 18)	\$ 18,955.00	\$ 50,690.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 54,546.89	\$ 56,081.89
7. Total Disbursements (from Line 30)	\$ 8,115.57	\$ 9,830.57
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 46,431.32	\$ 46,431.32
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 202-219-3420
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

Date
03/07/95

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 9437g.

FEC FORM 3X

(revised 8/83)

FECAN101

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**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X**

(revised 1/1/91)

NAME OF COMMITTEE COLLEGE OF AMERICAN PATHOLOGISTS POLITICAL ACTION COMMITTEE		REPORT COVERING PERIOD FROM 02/01/95 TO: 02/28/95	
		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)		11,150.00	28,500.00
ii. Unitemized		7,805.00	22,190.00
iii. Total	(add i and ii) >	18,955.00	50,690.00
b. Political Party Committees		0	0
c. Other Political Committees (such as PACs)		0	0
d. Total Contributions	(add a iii, b and c) >	18,955.00	50,690.00
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) >	18,955.00	50,690.00
20. Total Federal Receipts	(subtract line 18 from line 19) >	18,955.00	50,690.00
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		115.57	130.57
c. Total Operating Expenditures	(add a i, a ii, and b) >	115.57	130.57
22. Transfers to Affiliated/Other Party Committees		0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees		8,000.00	9,500.00
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) >	8,115.57	9,630.57
31. Total Federal Disbursements	(subtract line 21 a ii from line 30) >	8,115.57	9,630.57
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)		18,955.00	50,690.00
33. Total Contribution Refunds (from line 28d)		0	0
34. Net Contributions (other than loans)(subtract line 33 from 32)		18,955.00	50,690.00
35. Total Federal Operating Expenditures	(add 21 a i and 21 b) >	115.57	130.57
36. Offsets to Operating Expenditures (from line 15)		0	0
37. Net Operating Expenditures	(subtract line 36 from 35) >	115.57	130.57

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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
PAUL BACHNER 810 DELONG LEXINGTON, KY 40515	PATHOLOGIST UNIVERSITY OF KENTUCKY HOSPITAL	02/01/95	1000.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		1000.00
CATHY O. BLIGHT 2615 CIRCLE DRIVE FLINT, MI 48507	PATHOLOGIST PATHOLOGY ASSOCIATES, P.C.	02/14/95	1000.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		1000.00
GENE V. BOGATY 105 SOUTH DUBOIS COURT VANCOUVER, WA 98661	RETIRED	02/14/95	500.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		500.00
JEFF W. BYRD 310 FOX RIDGE LANE THOMASVILLE, GA 31792	PATHOLOGIST J.D. ARCHBOLD HOSPITAL	02/01/95	300.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		300.00
JEFFREY D. GOLDSTEIN 2656 BEAUCLERC ROAD JACKSONVILLE, FL 32257	PATHOLOGIST BAPTIST MEDICAL CENTER	02/08/95	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
DANIEL HANSON 5347 FARMINGTON ROAD TOLEDO, OH 43623	PATHOLOGIST ASSOCIATED PATHOLOGISTS, INC.	02/08/95	1000.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		1000.00
JOHN R. HARBOUR 790B DAYSTAR DRIVE FORT WORTH, TX 76123	PATHOLOGIST PATHOLOGY ASSOCIATES OF TEXAS, INC.	02/08/95	300.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		300.00
GENE N. HERBEK 2720 STONE PARK BOULEVARD SIOUX CITY, IA 51104	PATHOLOGIST PATHOLOGY MEDICAL SERVICES OF SIOUXLAND	02/14/95	500.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		500.00
GERALD A. HOELTGE 17310 OLD TANNERY TRAIL CHAGRIN FALLS, OH 44023	PATHOLOGIST CLEVELAND CLINIC FOUNDATION	02/01/95	500.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		300.00
JOSEPH R. JANNACH 3503 BAYSHORE VILLAS DRIVE MIAMI, FL 33133	PATHOLOGIST SELF-EMPLOYED	02/08/95	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
REBECCA L. JOHNSON P.O. BOX 1802 LENOX, MA 01240	PATHOLOGIST BERKSHIRE MEDICAL CENTER	02/14/95	300.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		300.00
GLEN D. MASON 1819 BILTMORE STREET, NW WASHINGTON, DC 20009	GOV'T AFFAIRS DIRECTOR COLLEGE OF AMERICAN PATHOLOGISTS	02/01/95	250.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		250.00
JOHN C. NEFF 508 UNION AVENUE KNOXVILLE, TN 37902	PATHOLOGIST UNIVERSITY OF TENNESSEE MEDICAL CENTER	02/21/95	1000.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		1000.00
RICHARD NUNNALLY 7414 BOGAGE BOULEVARD BATON ROUGE, LA 70809	PATHOLOGIST PATHOLOGY LABORATORY CONSULTANTS	02/14/95	1000.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		1000.00
CONSTANTINE PAPPAS 35 EVERETT AVENUE WINCHESTER, MA 02890	PATHOLOGIST SELF-EMPLOYED	02/03/95	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
WILLIAM G. ROTH 1763 SOUTH CREEK LANE OSPREY, FL 34229	PATHOLOGIST VENICE PATHOLOGY	02/01/95	250.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		250.00
RICHARD SEVERANCE 1725 GOLD STREET REDDING, CA 96001	PATHOLOGIST REDDING PATHOLOGISTS	02/21/95	300.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		300.00
SHELDON TAUBMAN 52 PLEASANT RIDGE DRIVE POUGHKEEPSIE, NY 12603	PATHOLOGIST MDS HUDSON VALLEY LAB	02/01/95	300.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		300.00
ELIZABETH W. VARSA 5216 SANDY RIVER COVE FORT WAYNE, IN 46804	PATHOLOGIST FAIRFIELD PATHOLOGISTS, INC.	02/01/95	500.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		500.00
LOYD R. WAGNER 1615 EDGEWOOD ROAD SIOUX FALLS, SD 57103	RETIRED	02/14/95	250.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		250.00

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COLLEGE OF AMERICAN PATHOLOGISTS POLITICAL ACTION COMMITTEE

Name, mailing address, and zip code			Employer and occupation	Date	Amount
LESLIE WALTERS 5604 BANISTER COURT PLANO, TX 75093			PATHOLOGIST SELF-EMPLOYED	02/08/95	500.00
PRIM.	GEN.	OTHER	AGGREGATE Y-T-D		500.00
J.S. WILKENFELD P.O. BOX 55008 HOUSTON, TX 77255			PATHOLOGIST SPRING BRANCH MEDICAL CENTER	02/08/95	500.00
PRIM.	GEN.	OTHER	AGGREGATE Y-T-D		500.00

TOTAL ITEMIZED LINE 11a

11150.00

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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

95039683422

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Bank charge 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
Crestar Bank 1455 New York Avenue, NW Washington, DC 20005		02/02/95	115.57
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)

115.57

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

95039683424

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Roger Wicker for Congress P.O. Box 874 Tupelo, MS 38802	Contribution: MS-01 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) '94 DEBT	02/14/95	500.00
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)

8,000.00

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

3-10-95

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

SLB
PREPARER

3-10-95
DATE PREPARED

95039683425