

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**  
**PSYCHOLOGY PAC OF AMERICAN PSYCHOLOGICAL ASSOCIATION SERVICES INC.**

ADDRESS (number and street) **PO Box 15441**  
 Check if different than previously reported. (ACC) **Washington DC 20003-0441**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00522094** 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period  /  /  2021 through  /  /  2021

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Mason, David, , ,  
Type or Print Name of Treasurer

Signature of Treasurer *Mason, David, , ,* [Electronically Filed] Date  /  /  2021

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**PSYCHOLOGY PAC OF AMERICAN PSYCHOLOGICAL ASSOCIATION SERVICES INC.**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2021"/>		<input type="text" value="163958.85"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="175948.87"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="11228.34"/>	<input type="text" value="30718.36"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="187177.21"/>	<input type="text" value="194677.21"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="0.00"/>	<input type="text" value="7500.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="187177.21"/>	<input type="text" value="187177.21"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="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)

Page 3

Write or Type Committee Name

**PSYCHOLOGY PAC OF AMERICAN PSYCHOLOGICAL ASSOCIATION SERVICES INC.**

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
05 / 01 / 2021 To: M M / D D / Y Y Y Y Y Y  
05 / 31 / 2021

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	8433.34	19745.02
(ii) Unitemized .....	2795.00	10973.34
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	11228.34	30718.36
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (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) .....	11228.34	30718.36
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	11228.34	30718.36
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	11228.34	30718.36

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	7500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(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	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(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
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	0.00	7500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	7500.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	11228.34	30718.36
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	11228.34	30718.36
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 11
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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.

NAME OF COMMITTEE (In Full)  
**PSYCHOLOGY PAC OF AMERICAN PSYCHOLOGICAL ASSOCIATION SERVICES INC.**

**A. Prescott, Diana, Lee, Dr., PhD**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 108B Main Rd S  
 City Hampden State ME Zip Code 04444-1204  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Hampden Psychological Consultation, PL Occupation (for Individual) Clinical Psychologist, Owner  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 10 / 2021  
**Transaction ID : AF8D490DC47364D3CB80**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Howard, Bruce, A, Dr., PhD**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1460 7th St Ste 300  
 City Santa Monica State CA Zip Code 90401-2632  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Psychologist  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 450.02

Date of Receipt 05 / 12 / 2021  
**Transaction ID : A0B3D8E5EA4BD4A389E8**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Howard, Bruce, A, Dr., PhD**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1460 7th St Ste 300  
 City Santa Monica State CA Zip Code 90401-2632  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Psychologist  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 533.36

Date of Receipt 05 / 16 / 2021  
**Transaction ID : A8ECBA42BBF4242598CC**  
 Amount of Each Receipt this Period 83.34  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	183.34
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 11
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 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.

NAME OF COMMITTEE (In Full)  
**PSYCHOLOGY PAC OF AMERICAN PSYCHOLOGICAL ASSOCIATION SERVICES INC.**

**A. Carter, Jean, A, Dr., PhD**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Washington Psychological Center Pc  
 5225 Wisconsin Ave Nw Ste 513

City Washington State DC Zip Code 20015-2024

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Washington Psychological Center Occupation (for Individual) Psychologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 25 / 2021  
**Transaction ID : ACE2944EDCC474893B5F**

Amount of Each Receipt this Period 500.00

Memo Item

**B. Davis, Rosie, Phillips, Dr., PhD**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 409C Ball Hall

City Memphis State TN Zip Code 38152-3570

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) University of Memphis Occupation (for Individual) Psychologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 25 / 2021  
**Transaction ID : A4351B43A08EA43E08A6**

Amount of Each Receipt this Period 500.00

Memo Item

**C. Cerbone, Armand, R, Dr., PhD**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5320 N Kenmore Ave  
 Unit G

City Chicago State IL Zip Code 60640-7610

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self-employed Occupation (for Individual) Clinical Psychologist

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 25 / 2021  
**Transaction ID : A02481C2CFA534221999**

Amount of Each Receipt this Period 500.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1500.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 11
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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.

NAME OF COMMITTEE (In Full)  
**PSYCHOLOGY PAC OF AMERICAN PSYCHOLOGICAL ASSOCIATION SERVICES INC.**

**A. Wiley, Mary, O'Leary, Dr,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3701 Burgoon Rd  
 City Altoona State PA Zip Code 16602-1715  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Psychologist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 26 / 2021  
**Transaction ID : A532D8309403748E8A08**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Dominguez, Juan, M, Prof,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Univ Of Texas At Austin Dept Of Psych  
 City Austin State TX Zip Code 78712-0186  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The University of Texas at Austin Occupation (for Individual) Professor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 26 / 2021  
**Transaction ID : A30F4FA2F7DE34F9B9EE**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Sussman, Steven, H, Dr., PhD**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 615 Sherwood Pkwy  
 City Mountainside State NJ Zip Code 07092-2525  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Psychologist  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 27 / 2021  
**Transaction ID : A5ACB14B978CE4F3FAA9**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1500.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 11
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 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.

NAME OF COMMITTEE (In Full)  
**PSYCHOLOGY PAC OF AMERICAN PSYCHOLOGICAL ASSOCIATION SERVICES INC.**

**A. Robinson-Hudson, Sarah, , Dr,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15404 Eagle Creek Way  
 City Apple Valley State MN Zip Code 55124-7590  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Hudson Counseling Clinic Occupation (for Individual) Psychologist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 27 / 2021  
**Transaction ID : AE09A84C2CF9A456DB6E**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Kurylo, Monica, F, Dr., PhD**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Kumc - Dept of Psychiatry & Beh Ps Ms 4015  
 City Kansas City State KS Zip Code 66160-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Univ of Kansas Med Cntr Occupation (for Individual) Professor, Director of Psychology Divi  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 27 / 2021  
**Transaction ID : ACA051D9D7B644181B8A**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Studwell, Karen, , Ms,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7820 Frances Dr  
 City Alexandria State VA Zip Code 22306-2820  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) American Psychological Association (AP) Occupation (for Individual) Deputy Chief Advocacy Officer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 28 / 2021  
**Transaction ID : AA4CDB9A4026D487F946**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1500.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 11
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 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.

NAME OF COMMITTEE (In Full)  
**PSYCHOLOGY PAC OF AMERICAN PSYCHOLOGICAL ASSOCIATION SERVICES INC.**

**A. Novinski, Kristy, , Dr.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 580 Decker Dr  
 Ste 250  
 City Irving State TX Zip Code 75062-2381  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Las Colinas Psychological Services Occupation (for Individual) Psychologist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 29 / 2021  
**Transaction ID : A35ADF879116B4083B90**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Evans, Arthur, , Dr.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1160 1st St NE  
 Apt 630  
 City Washington State DC Zip Code 20002-4829  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) American Psychological Association Occupation (for Individual) Administrator  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 05 / 29 / 2021  
**Transaction ID : A4981B41AFF874AF7A06**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item

**C. Keane, Terence, , Dr.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 78 Monmouth St  
 City Brookline State MA Zip Code 02446-5607  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) VA Boston & Boston Unicersity Occupation (for Individual) Clinical Psychologist.  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 05 / 29 / 2021  
**Transaction ID : AB1067911BE884231B3F**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 11
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 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.

NAME OF COMMITTEE (In Full)  
**PSYCHOLOGY PAC OF AMERICAN PSYCHOLOGICAL ASSOCIATION SERVICES INC.**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Castiglioni, Maria Laura, , Dr,

Mailing Address 250 Cabrini Blvd  
Apt 2B

City New York	State NY	Zip Code 10033-1152
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) City College of New York CUNY	Occupation (for Individual) Doctoral Lecturer
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	30	/	2021

Transaction ID : AFFFF4E71D5BA4802B69

Amount of Each Receipt this Period  
250.00

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250.00
<b>TOTAL</b> This Period (last page this line number only).....	8433.34