

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

College of American Pathologists Political Action Committee

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="322640.97"/>	<input type="text" value="322640.97"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="346100.79"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="4776.60"/>	<input type="text" value="25948.00"/>
(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="350877.39"/>	<input type="text" value="348588.97"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="33506.05"/>	<input type="text" value="31217.63"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="317371.34"/>	<input type="text" value="317371.34"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY 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

Write or Type Committee Name

College of American Pathologists Political Action Committee

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

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).....	3526.60	22026.60
(ii) Unitemized	1250.00	3921.40
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	4776.60	25948.00
(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)	4776.60	25948.00
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)).....▶	4776.60	25948.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	4776.60	25948.00

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	6.05	217.63
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	6.05	217.63
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	33500.00	31000.00
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)) ..	33506.05	31217.63
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	33506.05	31217.63

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	4776.60	25948.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4776.60	25948.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	6.05	217.63
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	6.05	217.63

**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 17
<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)
College of American Pathologists Political Action Committee

A. Alexis, John, B, Dr., MD, MBChB
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Path
4300 Alton Rd

City Miami Beach State FL Zip Code 33140-2948

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

Name of Employer (for Individual) Mt Sinai Medical Center Occupation (for Individual) Pathologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 04 / 2021
Transaction ID : SA11AI.59414

Amount of Each Receipt this Period
500.00

Memo Item

B. Foster, Matthew, R, Dr., MD, MMM
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Main Lab
3300 Rivermont Ave

City Lynchburg State VA Zip Code 24503

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

Name of Employer (for Individual) Path Consultants of Central VA Occupation (for Individual) Pathologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2021
Transaction ID : SA11AI.59434

Amount of Each Receipt this Period
250.00

Memo Item

C. Goodale, Lorien, A, Dr., MD
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 115 Cherry St

City Carrollton State GA Zip Code 30117-2307

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

Name of Employer (for Individual) Tanner Med Ctr Occupation (for Individual) Pathologist

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 264.90

Date of Receipt
MM / DD / YYYY
03 / 17 / 2021
Transaction ID : SA11AI.59439

Amount of Each Receipt this Period
88.30

Memo Item

SUBTOTAL of Receipts This Page (optional).....	838.30
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 7 OF 17
<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

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NAME OF COMMITTEE (In Full)
College of American Pathologists Political Action Committee

A. Gupta, Chakshu, , Dr., MD, MBA
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3408 Stanford CT
 City Saint Joseph State MO Zip Code 64506-4580
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAWD Pathology Group PA Occupation (for Individual) Pathologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 18 / 2021
Transaction ID : SA11AI.59428
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Howard, Lydia, H, Dr., MD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Dept of Path 4300 Alton Rd
 City Miami Beach State FL Zip Code 33140-2800
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Mt Sinai Med Ctr Occupation (for Individual) Pathologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 04 / 2021
Transaction ID : SA11AI.59415
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Myers, Stephen, R, Mr., N/A
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4019 N Ridge Ave
 City Arlington Heights State IL Zip Code 60004-7912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) College of American Pathologists Occupation (for Individual) Pathologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 09 / 2021
Transaction ID : SA11AI.59419
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1600.00
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 17
<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

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NAME OF COMMITTEE (In Full)
College of American Pathologists Political Action Committee

A. Poppiti Jr, Robert, J, Dr., MD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Path
 4300 Alton Rd Blum
 City Miami Beach State FL Zip Code 33140-2800
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Mt Sinai Medical Center Occupation (for Individual) Pathologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 04 / 2021
Transaction ID : SA11AI.59416
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. Tortora, Matthew, J, Dr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 Meadow Ct
 City Montville State NJ Zip Code 07045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Unaffiliated Occupation (for Individual) Pathologists
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 264.90

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 04 / 2021
Transaction ID : SA11AI.59436
 Amount of Each Receipt this Period
 88.30
 Memo Item

c. Vincentelli, Cristina, , Dr., MD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Dept of Path
 4300 Alton Rd Ste 2400
 City Miami Beach State FL Zip Code 33140-2948
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Emory University Hospital Occupation (for Individual) Pathologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 10 / 2021
Transaction ID : SA11AI.59420
 Amount of Each Receipt this Period
 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1088.30
TOTAL This Period (last page this line number only).....	3526.60

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

College of American Pathologists Political Action Committee

Full Name (Last, First, Middle Initial)

A. Sun Trust Bank

Mailing Address P.O. Box 85024

City
Richmond

State
VA

Zip Code
23285

Purpose of Disbursement
Suntrust RAZ Deposit Fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	2			2	0	2	1		

FEC Identification Number

C

Transaction ID : SB21B.59385

Amount of Each Disbursement this Period

31.05

Memo Item

Full Name (Last, First, Middle Initial)

B. Sun Trust Bank

Mailing Address P.O. Box 85024

City
Richmond

State
VA

Zip Code
23285

Purpose of Disbursement
Suntrust Mar-21 Acct Analysis Fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	8			2	0	2	1		

FEC Identification Number

C

Transaction ID : SB21B.59384

Amount of Each Disbursement this Period

65.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Sun Trust Bank

Mailing Address P.O. Box 85024

City
Richmond

State
VA

Zip Code
23285

Purpose of Disbursement
JE 730774601 Adj Bank for AP Wire Transfer Correction;Sent \$90 more than requested on WT

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	0			2	0	2	1		

FEC Identification Number

C

Transaction ID : SB21B.59444

Amount of Each Disbursement this Period

- 90.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

6.05

6.05

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

College of American Pathologists Political Action Committee

Full Name (Last, First, Middle Initial)

A. BERA FOR CONGRESS

Mailing Address P.O. BOX 582496

City
ELK GROVE

State
CA

Zip Code
95757

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: CA District: 07

Disbursement For: 2022
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2021

FEC Identification Number

C C00461061

Transaction ID : SB23.59386

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. BUCSHON FOR CONGRESS

Mailing Address P.O. BOX 250

City
NEWBURGH

State
IN

Zip Code
47630

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: IN District: 08

Disbursement For: 2022
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2021

FEC Identification Number

C C00468256

Transaction ID : SB23.59387

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CARPER FOR SENATE

Mailing Address 19 EAST COMMONS BLVD, 2ND FLOOR

City
NEW CASTLE

State
DE

Zip Code
19720

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: DE District: 00

Disbursement For: 2022
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2021

FEC Identification Number

C C00349217

Transaction ID : SB23.59388

Amount of Each Disbursement this Period

1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

7000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

College of American Pathologists Political Action Committee

Full Name (Last, First, Middle Initial)

A. CINDY AXNE FOR CONGRESS

Mailing Address PO BOX 65551

City
WEST DES MOINES

State
IA

Zip Code
50265

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2022
 Primary General
 Other (specify) ▼

State: IA District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	3		3	1		2	0	2	1		

FEC Identification Number

C C00646844

Transaction ID : SB23.59389

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CURTIS FOR CONGRESS

Mailing Address 370 E SOUTH TEMPLE
SUITE 580

City
SALT LAKE CITY

State
UT

Zip Code
84111

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2022
 Primary General
 Other (specify)

State: UT District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	3		3	1		2	0	2	1		

FEC Identification Number

C C00647339

Transaction ID : SB23.59390

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. DAN CRENSHAW FOR CONGRESS

Mailing Address PO BOX 430965

City
HOUSTON

State
TX

Zip Code
77243

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2022
 Primary General
 Other (specify) ▼

State: TX District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	3		3	1		2	0	2	1		

FEC Identification Number

C C00660795

Transaction ID : SB23.59391

Amount of Each Disbursement this Period

1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

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

3000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
College of American Pathologists Political Action Committee

A. DR. RAUL RUIZ FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 15096

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼

State: CA District: 36

Date of Disbursement: 03 / 31 / 2021

FEC Identification Number: C00502575
Transaction ID : SB23.59394
Amount of Each Disbursement this Period: 5000.00

Memo Item

B. ELIZABETH PANNILL FLETCHER FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address 3262 WESTHEIMER RD
PMB #636

City HOUSTON State TX Zip Code 77098

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼

State: TX District: 07

Date of Disbursement: 03 / 31 / 2021

FEC Identification Number: C00640045
Transaction ID : SB23.59395
Amount of Each Disbursement this Period: 1000.00

Memo Item

C. FREE STATE PAC

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX

City SHAWNEE MISSION State KS Zip Code 66204

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
Disbursement For: 2021 Primary General Other (specify) ▼ OTHER

State: District:

Date of Disbursement: 03 / 31 / 2021

FEC Identification Number: C00455717
Transaction ID : SB23.59396
Amount of Each Disbursement this Period: 1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

7000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
College of American Pathologists Political Action Committee

Full Name (Last, First, Middle Initial)

A. FRIENDS OF JIM CLYBURN

Mailing Address P.O. BOX 12567

City COLUMBIA State SC Zip Code 29142

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2022 Primary General Other (specify) ▼
 State: SC District: 06

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2021

FEC Identification Number

C C00255562

Transaction ID : SB23.59397

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. FRIENDS OF SCHUMER

Mailing Address 192 LEXINGTON AVENUE

City NEW YORK State NY Zip Code 10016

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2022 Primary General Other (specify) ▼
 State: NY District: 00

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2021

FEC Identification Number

C C00346312

Transaction ID : SB23.59398

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. GUTHRIE FOR CONGRESS

Mailing Address P.O. BOX 9639

City BOWLING GREEN State KY Zip Code 42102

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2022 Primary General Other (specify) ▼
 State: KY District: 02

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2021

FEC Identification Number

C C00445023

Transaction ID : SB23.59399

Amount of Each Disbursement this Period

1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

3000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
College of American Pathologists Political Action Committee

Full Name (Last, First, Middle Initial)

A. IMPACT

Mailing Address C/O T.FULKERSON, 660 PENNSYLVANIA
SE, SUITE 201

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: 2021
 Primary General
 Other (specify) **OTHER**

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2021

FEC Identification Number

C C00348607

Transaction ID : SB23.59400

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. KIND FOR CONGRESS COMMITTEE

Mailing Address 205 5TH AVE, SOUTH

City LA CROSSE State WI Zip Code 54601

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: 2022
 Primary General
 Other (specify)

State: WI District: 03

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2021

FEC Identification Number

C C00312017

Transaction ID : SB23.59401

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. KUSTER FOR CONGRESS, INC

Mailing Address P.O. BOX 1498

City CONCORD State NH Zip Code 03302

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: 2022
 Primary General
 Other (specify)

State: NH District: 02

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2021

FEC Identification Number

C C00462861

Transaction ID : SB23.59402

Amount of Each Disbursement this Period

1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

3000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

College of American Pathologists Political Action Committee

Full Name (Last, First, Middle Initial)

A. LISA MURKOWSKI - U S SENATE

Mailing Address P.O. BOX 100847

City
ANCHORAGE

State
AK

Zip Code
99510

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: AK District: 00

Disbursement For: 2022

Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	1

FEC Identification Number

C C00384529

Transaction ID : SB23.59403

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. OCEANS PAC

Mailing Address 700 13TH STREET, NW

City
WASHINGTON

State
DC

Zip Code
20002

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For: 2021

Primary General
 Other (specify) OTHER

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	1

FEC Identification Number

C C00431601

Transaction ID : SB23.59404

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. ROBIN KELLY FOR CONGRESS

Mailing Address P.O. BOX 3411

City
CHICAGO

State
IL

Zip Code
60654

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: IL District: 02

Disbursement For: 2022

Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	1

FEC Identification Number

C C00539866

Transaction ID : SB23.59405

Amount of Each Disbursement this Period

1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

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

3000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
College of American Pathologists Political Action Committee

A. STEVE DAINES FOR MONTANA

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 1598

City HELENA State MT Zip Code 59624

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 31 / 2021

FEC Identification Number: C00491357
Transaction ID : SB23.59406
Amount of Each Disbursement this Period: 1000.00

Memo Item

B. TAMMY FOR ILLINOIS

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 10793

City CHICAGO State IL Zip Code 60610

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼

State: IL District: 00

Date of Disbursement: 03 / 31 / 2021

FEC Identification Number: C00574889
Transaction ID : SB23.59407
Amount of Each Disbursement this Period: 1000.00

Memo Item

C. TERRI SEWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 1964

City BIRMINGHAM State AL Zip Code 35243

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼

State: AL District: 07

Date of Disbursement: 03 / 31 / 2021

FEC Identification Number: C00458976
Transaction ID : SB23.59408
Amount of Each Disbursement this Period: 2000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 4000.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
College of American Pathologists Political Action Committee

Full Name (Last, First, Middle Initial)

A. TONY CARDENAS FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2021

Mailing Address 249 E OCEAN BLVD
SUITE 685

City LONG BEACH State CA Zip Code 90802

FEC Identification Number

C 000498873

Transaction ID : SB23.59409

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement

Category/Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2022
 Primary General
 Other (specify) ▼

State: CA District: 29

Memo Item

Full Name (Last, First, Middle Initial)

B. UPTON FOR ALL OF US

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2021

Mailing Address PO BOX 490

City ST JOSEPH State MI Zip Code 49085

FEC Identification Number

C 000200584

Transaction ID : SB23.59410

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement

Category/Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2022
 Primary General
 Other (specify) ▼

State: MI District: 06

Memo Item

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

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

Mailing Address

City State Zip Code

FEC Identification Number

C

Amount of Each Disbursement this Period

Purpose of Disbursement

Category/Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

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

3500.00

33500.00