FEC FORM 3X	AN	ID DISE	OF REC BURSEM	ENTS	ee		Office Use Only	
1. NAME OF COMMITTEE (in fu		FEC MAILING		ample:If typing er the lines	, type			
College of America	n Pathologists I	Political Action	Committee					
ADDRESS (number and	street)	350 I Street, N\	V					
Check if differ than previously reported. (ACC	ent L	uite 590 / ashington			_		20005	-
2. FEC IDENTIFICAT	ION NUMBER	¥	CITY 🛋		S	STATE	ZIPCOI	DE 👗
C00274944			3. IS THIS REPOR		NEW N) OR	AI (A	MENDED .)	
4. TYPE OF REPO (Choose One) (a) Quarterly Repo	orts:	(b) Monthly Report Due On:	Feb 20 (M2 Mar 20 (M3 Apr 20 (M4	3)	May 20 (M5) Jun 20 (M6) Jul 20 (M7)	Sep	20 (M8) X 20 (M9) 20 (M10)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE)
July 15 Quarterly October Quarterly January 3	Report(Q3)		y Election the:	Primary (12P		General Special (Runoff (12R)
July 31 M Report(N Year Only	id-Year on-election			General (30G	à)	Runoff (S		Special (30S)
5. Covering Period	10	01	2007	through	10	31	2007	
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 Dr. Alfred Wray Campbell								
Signature of Treasurer Electronically Filed by Dr. Alfred Wray Campbell Date 11 19 2007								
NOTE : Submission of f	alse, erroneous	, or incomplete	information may s	ubject the perso	on signing this	s Report to the	e penalties of 2 U.S	S.C 437g.
Office Use Only							FEC FOR (Rev. 02/20)	

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

F	Report Covering the Period: From:	0 1	To: To:
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1 ^Y 2007 ^Y ^Y		67604.65
	(b) Cash on Hand at Begining of Reporting Period	140738.14	
	(c) Total Receipts (from Line 19)	34719.00	448882.00
	(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	175457.14	516486.65
7.	Total Disbursements (from Line 31)	22774.08	363803.59
3.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	152683.06	152683.06
).	Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
0.	Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

X 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

	FEC Form 3X (Rev. 02/2003)	OF RECEIPTS	Page 3
W	rite or Type Committee Name College of American Pathologists Political A	ction Committee	
R	eport Covering the Period: From: 10^{M}	0 1 Y Y W Y 0 1 2 0 0 7	
	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) 	30400.00	341965.00
	(ii) Unitemized	4319.00	106917.00
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	34719.00	448882.00
	(b) Political Party Committees	0.00	0.00
	 (c) Other Political Committees (such as PACs) (d) Total Contributions (add Lines 	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	34719.00	448882.00
2.	Transfers From Affiliated/Other Party Committees	0.00	0.00
3.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
ο.	Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
7.	Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
8.	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 Transfer (add 18(a) and 18(b)).	0.00	0.00
9.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	34719.00	448882.00
0.	Total Federal Receipts (subtract Line 18(c) from Line 19)	34719.00	448882.00

DETAILED SUMMARY PAGE

	FEC Form 3X (Rev. 02/2003)	COLUMN A	Page 4 COLUMN B
	II. DISBURSEMENTS	Total This Period	Calendar Year-to-Date
	Operating Expenditures: (a) Shared Federal/Non-Federal Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating Expenditures	1311.58	8276.66
	(c) Total Operating Expenditures	1311.58	8276.66
2.	(add 21(a)(i), (a)(ii) and (b)) (b)	1311.30	0270.00
	Committees Contributions to	0.00	1000.00
	and Other Political Committees	21462.50	350114.77
	Independent Expenditure (use Schedule E)	0.00	0.00
5.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d))		
	(use Schedule F)	0.00	0.00
6.	Loan Repayments Made	0.00	0.00
	Loans Made	0.00	0.00
-	Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	0.00	100.00
	(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	100.00
0	- T	0.00	4312.16
	Other Disbursements	0.00	4012.10
0.	Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity		
	(from Schedule H6)	0.00	0.00
	(i) Federal Share		
	(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
1.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	22774.08	363803.59
2.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) from Line 30(a)(ii)	00774.00	
	from Line 31)	22774.08	363803.59

DETAILED SUMMARY PAGE

	FEC Form 3X (Rev. 02/2003)	of Disbursements	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)	34719.00	448882.00
34.	Total Contribution Refunds (from Line 28(d))	0.00	100.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	34719.00	448782.00
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1311.58	8276.66
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	1311.58	8276.66

S	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 6 / 35
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
••			Detailed Summary Page	X 11a 11b 11c 12
A				
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the n	ame and add	dress of any political committee to	o solicit contributions from such committee.
\sum	NAME OF COMMITTEE (In Full)			
\rangle	College of American Pathologists Politic	cal Action (Committee	
Α.	Full Name (Last, First, Middle Initial) F Dale Andres, Dr.			Date of Receipt
	Mailing Address Lab 1111 6th Ave			10 28 YYYY 10 28 2007
	City	State	Zip Code	Transaction ID: SA11A1.27676
	Des Moines	IA	50314-2611	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1750.00
	Name of Employer	Occupatio	n	
	Mercy Med Ctr-Des Moines	Patholog		
	Receipt For:	- · ·	e Year-to-Date 🔻	
	Primary General		1750.00	1
	Other (specify)	0 0	1750.00	
В.	Full Name (Last, First, Middle Initial) A. Mark Arnesen, Dr.			Date of Receipt
	Mailing Address Lab 11136 800 E 28th St			10 [/] 2007
	City	State	Zip Code	Transaction ID: SA11A1.27679
	Minneapolis	MN	55407-3731	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Abbott Northwestern Hosp	Occupation Patholog		_
	Receipt For:	· ·	e Year-to-Date 🔻	
	Primary General Other (specify) ▼	U U U	500.00]
 C.	Full Name (Last, First, Middle Initial) A Carl Barnes, Dr.			Date of Receipt
0.	Mailing Address PO Box 818			M M / D D / Y Y Y Y
	City	State	Zip Code	
	Florence	AL	35631-0818	Transaction ID: SA11A1.27657 Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		250.00
	Name of Employer Eliza Coffee Memorial Hos-	Occupation Patholog		
	pital Receipt For:	Ŭ Ŭ	e Year-to-Date V	
	Primary General			1
	Other (specify)	0 0	250.00]
•	UBTOTAL of Receipts This Page (optional)			2250.00
Ľ				
т	OTAL This Period (last page this line number or	nly)		

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 7/35			
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)			
••			Detailed Summary Page	$\begin{array}{ c c c c c c c c } X & 11a & 11b & 11c & 12 \\ \hline & 13 & 14 & 15 & 16 & 17 \\ \hline \end{array}$			
Ar	y information copied from such Reports and St for commercial purposes, other than using the	atements may	/ not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions			
$\overline{\mathbf{n}}$	NAME OF COMMITTEE (In Full)		, , , , , , , , , , , , , , , , , , ,				
	College of American Pathologists Politi						
Α.	Full Name (Last, First, Middle Initial) J Thomas Bassler, Dr.	Date of Receipt					
	Mailing Address 1425 E South Ridge Dr			10 ^{//} 05 [/] 2007			
	City	State	Zip Code	Transaction ID: SA11A1.27537			
	Spokane	WA	99223	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		400.00			
	Name of Employer InCyte Path PS	Occupation Patholog		_			
	Receipt For:		e Year-to-Date V				
	Primary General			1			
	Other (specify) v	0 0	400.00				
в.	Full Name (Last, First, Middle Initial) W. David Bernard, Dr.			Date of Receipt			
	Mailing Address Department of Patholog 6565 Fannin	ду		10 ^{''} 31 ^{''} 2007			
	City	State	Zip Code	Transaction ID: SA11A1.27681			
	Houston	TX	77030-7030	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		500.00			
	Name of Employer The Methodist Hospital	Occupation Patholog					
	Receipt For:	Aggregate	e Year-to-Date V				
	Primary General Other (specify) ▼	0 0	500.00]			
	Full Name (Last, First, Middle Initial) G. Jared Block, Dr.			Date of Receipt			
0.	Mailing Address 8341 Bar Harbor Ln			M M / D D / Y Y Y Y			
		- · · ·		10 19 2007			
	City Charlotte	State NC	Zip Code 28210-4215	Transaction ID: SA11A1.27629			
	FEC ID number of contributing		20210-4213	Amount of Each Receipt this Period			
	federal political committee.	C		500.00			
	Name of Employer Carolinas Med Ctr - Unive- rsity	Occupation Patholog					
	Receipt For:		e Year-to-Date V	7			
	Primary General Other (specify) ▼		500.00	1			
		0 0					
s	UBTOTAL of Receipts This Page (optional)			1400.00			
Г	OTAL This Period (last page this line number of	only)					

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8/35 (check only one) 11c 12 X 11a 11b 11c 12 13 14 15 16 17						
	y information copied from such Reports and Sta for commercial purposes, other than using the n									
$\overline{\sum}$	NAME OF COMMITTEE (In Full)									
\geq	College of American Pathologists Political Action Committee									
Α.	Full Name (Last, First, Middle Initial) Miller Alyson Booth, Dr.			Date of Receipt						
	Mailing Address 1840 Wealthy St SE			10 ^{//} 11 [/] 2007						
	City	State	Zip Code	Transaction ID: SA11A1.27607						
	Grand Rapids	MI	49506-2921	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		500.00						
	Name of Employer Spectrum Health	Occupation Patholog								
	Receipt For:	, v	e Year-to-Date 🔻							
	Primary General Other (specify) ▼	0 0	1000.00]						
в.	Full Name (Last, First, Middle Initial) T John Braun, Dr.			Date of Receipt						
	Mailing Address Department of Patholog 827 Linden Ave 2nd Fl	у		M M / D D / Y Y Y Y 10 / 05 / 2007						
	City	State	Zip Code	Transaction ID: SA11A1.27538						
	Baltimore	MD	21201	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		300.00						
	Name of Employer Maryland General Hosp	Occupation Patholog								
	Receipt For:	, v	e Year-to-Date V	_						
	Primary General Other (specify) ▼	0 0	300.00]						
<u>с.</u>	Full Name (Last, First, Middle Initial) Philip Thomas Brien, Dr.			Date of Receipt						
	Mailing Address Dept of Path Lab 2525 DeSales Ave			M M / D D / Y Y Y Y 10 / 05 / 2007						
	City	State	Zip Code	Transaction ID: SA11A1.27540						
	Chattanooga	TN	37404-1102	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.			1000.00						
	Name of Employer Memorial Hosp-Chattanooga	Occupation Patholog	ist							
	Receipt For:	Aggregate	e Year-to-Date 🔻							
	Primary General Other (specify) ▼]								
s	JBTOTAL of Receipts This Page (optional)			1800.00						
Т	TOTAL This Period (last page this line number only)									

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: PAGE 9/35 (check only one) 11a X 11a 11b 11c 12 13 14 15 16 17		
	y information copied from such Reports and Star for commercial purposes, other than using the na			n for the purpose of soliciting contributions		
$\overline{\sum}$	NAME OF COMMITTEE (In Full)					
\geq	College of American Pathologists Politic	al Action (Committee	_		
Α.	Full Name (Last, First, Middle Initial) Wray Alfred Campbell, Dr.			Date of Receipt		
	Mailing Address Dept of Path 101 E Wood St			10 ^{//} 05 [/] 2007		
	City	State	Zip Code	Transaction ID: SA11A1.27541		
	Spartanburg	SC	29303	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		250.00		
	Name of Employer Spartanburg Regional Med	Occupatio				
	Ctr Receipt For:	Patholog	IST e Year-to-Date V	_		
	Primary General	riggrogaio		1		
	Other (specify)	0 0	500.00			
в.	Full Name (Last, First, Middle Initial) Scott Bradford Collins, Dr.			Date of Receipt		
	Mailing Address Dept of Path 1128 Lango Ave			M M / D D / Y Y Y Y 10 19 2007		
	City	State	Zip Code	Transaction ID: SA11A1.27630		
	Charleston	SC	29407	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		1000.00		
	Name of Employer Coastal Pathology Laborat-	Occupation				
	ories Receipt For:	Patholog	ISt e Year-to-Date ▼	-		
	Primary General	riggrogaio		1		
	Other (specify)	0 0	1000.00			
C.	Full Name (Last, First, Middle Initial) E.G. Georgean DeBlois, Dr.			Date of Receipt		
	Mailing Address Department of Pathology 1401 Johnston-Willis Dr.			M M / D D / Y Y Y Y 10 / 05 / 2007		
	City	State	Zip Code	Transaction ID: SA11A1.27550		
	Richmond	VA	23235-4789	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.			500.00		
	Name of Employer Commonwealth Lab Consulta-	Occupation Patholog				
	nts		ISt e Year-to-Date ▼	-		
	Primary General	riggrogaio	500.00	1		
	Other (specify)					
s	UBTOTAL of Receipts This Page (optional)		•••••	1750.00		
т	OTAL This Period (last page this line number or	ıly)				

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 35 (check only one) 11a X 11a 13 14 15 16 17
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	/ not be sold or used by any perso	on for the purpose of soliciting contributions
$\overline{\nabla}$	NAME OF COMMITTEE (In Full)			
\rangle	College of American Pathologists Politic	al Action (Committee	
Α.	Full Name (Last, First, Middle Initial) Melissa Peggy Delahoussaye, Dr.			Date of Receipt
	Mailing Address 4922 Linden St			10 ^{//} 19 [/] 2007
	City	State	Zip Code	Transaction ID: SA11A1.27632
	Bellaire	TX	77401-4435	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer MLD Pathology	Occupation Patholog		
	Receipt For:	, v	e Year-to-Date ▼	_
	Primary General Other (specify) ▼		500.00]
	Full Name (Last, First, Middle Initial)			
в.	Charles Jerry DePriest, Dr. Mailing Address Dept of Path			Date of Receipt
	1150 N 18th St Ste 102			10 11 2007
	City	State	Zip Code	Transaction ID: SA11A1.27609
	Abilene	<u> </u>	79601-2931	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Clinical Pathology Associ- ates	Occupation Patholog		
	Receipt For:	· ·	e Year-to-Date 🔻	
	Primary General Other (specify) ▼		500.00]
<u></u>	Full Name (Last, First, Middle Initial) William Jay Dieckhoff, Dr.			Date of Receipt
	Mailing Address Dept of Path 11th St & Broadway			M M / D D / Y Y Y Y 10 26 2007
	City	State	Zip Code	Transaction ID: SA11A1.27667
	Quincy	<u> </u>	62301	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer Blessing HospOcc PatReceipt For:Age			
			e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	250.00]
s	UBTOTAL of Receipts This Page (optional)		······	1250.00
	OTAL This Period (last page this line number or			-

TEMIZED RECEIPTS Description Any information copied from such Reports and Statements may not be sold Summary Page Intelling in the intelling interments may not be sold Summary Page Intelling interments interments may not be sold Summary Page Any information copied from such Reports and Statements may not be sold or used by any protect contributions from such committee. NAME OF COMMITTEE (in the intelling interments may not be sold or used by any protect contributions from such committee. NAME OF COMMITTEE (in the name and address of any polical committee to sold it contributions from such committee. Date of Receipt Maing Address Department of Pathology Intelling interment of Pathology Intelling interment of Pathology Maing Address I contributing federal polical committee. C Intelling interment of Pathology Receipt For: Pathologist Pathologist Arrow of Employee Petto Name (Last, First, Middle Initial) Aggregate Year-to-Date ▼ Intelling interment of Pathology Receipt For: Pathologist Aggregate Year-to-Date ▼ Intelling interment of Pathology Receipt For: Interment of Contributing federal polical committee. Date of Receipt Intelling interment of Pathology Receipt For: Interment of Employee Occupation Pathologist Aggregate Year-to-Date ▼ Inteling interment of Pathologist <th>S</th> <th colspan="2">SCHEDULE A (FEC Form 3X)</th> <th>Use separate schedule(s)</th> <th>FOR LINE NUMBER: PAGE 11/35</th>	S	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 11/35			
Detailed Summary Page Ita I		· · · ·						
Invertionation coded from such Reports and Statements may not be sold or used by any person to the surpose of solding contributions from such committee. NAME OF COMMITTEE (In Full) NAME OF COMMITTEE (In Full) College of American Pathologists Political Action Committee Date of Receipt Full Name (Last, First, Middle Initial) A. W. Genet Generation Dis State Zip Code Milling Address Department of Pathology Date of Receipt Yinston-Salem NC Zig Code Pice In number of contributing federal political committee Coll operation State Pice In number of contributing federal political committee Occupation Aggregate Year-to-Date ▼ Brail Name (Last, First, Middle Initial) Date of Receipt Aggregate Year-to-Date ▼ Brail Name (Last, First, Middle Initial) Date of Receipt Date of Receipt Brail Name (Last, First, Middle Initial) Date of Receipt Date of Receipt Brail Name (Last, First, Middle Initial) Date of Receipt Transaction Di: SA11A1.27552 Amount of Each Receipt Incommittee College of Path Zip Code Transaction Di: SA11A1.27552 Amount of Each Receipt Incommittee Aggregate Year-to-Date ▼ Zip Code Transaction Di: SA11A1.27558 Amount of Each Receipt Incommittee	••			Detailed Summary Page				
or for commercial purposes, other than using the name and address of any political committee to solidit contributions from such committee. NAME GC COMMITTEE (in Full) College of American Pathologists Political Action Committee Full Name (Last, First, Middle Initial) N.W. Commercial purposes, there than using the name and address of any political committee. Full Name (Last, First, Middle Initial) N.W. Commercial purposes, there than using the name and address of any political committee. Patter of contributing tederal political committee. City Note of contributing tederal political committee. Pering of Engloyeer Pering of Engloyeer Pering of Engloyeer Pering of Contributing tederal political committee. City City State Pathologist	A	winformation against from such Departs and Sta	tomonto mo	, not be cold or used by environment				
College of American Pathologists Political Action Committee Full Name (Last, First, Middle Initia) Maing Address Depart of contributing City Baing Address Depart of contributing City Baing Address Depart of contributing City Pathologist Pathologist Pathologist Pathologist Pacepit For: Pathologist Pacepit For: Pathologist Receipt For: Pathologist Maing Address 1300.00 B. C. Stephene Eliason, Dr. Maing Address Maing Address 1300.00	or	for commercial purposes, other than using the na	ame and add	dress of any political committee to	solicit contributions from such committee.			
✓ Full Name (Last, First, Middle Initial) A. W. Gendd Egges, Dr. Maling Address Maling Address Department of Parthology 333 Silas Creek Parkway Date of Receipt City State Zip Code Winston-Salem NC 27103 FEC ID number of contributing federal political committee. C Image: Control of Each Receipt Ins Period Primary General Occupation Parthologist Aggregate Year-to-Date ▼ Receipt For: Aggregate Year-to-Date ▼ Date of Receipt B. O. Stephen Eason, Dr. Maling Address 1500.00 B. C. Stephen Eason, Dr. Maling Address 1303 Gleneagles Place City State Zip Code Transaction ID: SA11A1.27552 Amount of Each Receipt this Period Doi: / 2.00.7 Transaction ID: SA11A1.27552 Amount of Each Receipt this Period C	Ν	NAME OF COMMITTEE (In Full)						
A. w. Genad Eggers, D. Date of Roccipt Mailing Address Department of Pathology 3333 Silas Creek Parkway Date of Roccipt City State Zip Code Winston-Salem NC 27103 FEC ID number of contributing feetoral political committee. C Amount of Each Recept this Period Ferrory General Other (specify) ▼ 1500.00 Bruin Name (Last, First, Middle Initial) B. State Zip Code Mailing Address 1303 Gleneagles Place Date of Roccipt 1500.00 Full Name (Last, First, Middle Initial) B. State Zip Code Transaction ID: SA11A1.27552 Amount of Each Recept this Period C 250.00 Y 2 0 0.7 Transaction ID: SA11A1.27552 Amare of Employer Dearbon County Hoep Period Y 2 0 0.7 Transaction ID: SA11A1.27552 Amount of Each Recept this Period C 250.00 Amount of Each Recept this Period FEC ID number of contributing feeteral political committee. C Aggregate Year-to-Date ▼ Pathologist Receipt For: Pathologist Aggregate Year-to-Date ▼ Date of Receipt Transaction ID: SA11A1.27558 Amount	\mathbb{Z}	College of American Pathologists Politic	al Action (Committee				
3333 Sitas Creek Parkway 10 19 2.0.7 City State Zip Code Transaction ID: SA11A1.27633 Winston-Salem NC 27(03 Presender FEC: ID number of contributing federal political committee. C Aggregate Vear-to-Date ▼ Name of Enployer Forsynth Med Cir Pathologist Pathologist Receipt For: Occupation Pathologist Date of Receipt Maling Address 1303 Gleneagles Place Transaction ID: SA11A1.27552 Maling Address 1303 Gleneagles Place Transaction ID: SA11A1.27552 Maure of Enployer For: IN 47025 PEC ID number of contributing federal political committee. C Transaction ID: SA11A1.27552 Maure of Enployer Destrone Toributing federal political committee. C Transaction ID: SA11A1.27552 Name of Enployer Destrone Toributing federal political committee. C Transaction ID: SA11A1.27558 Colorado Springs Deste of Receipt 0.5 2.0.0.7 Transaction ID: SA11A1.27558 Colorado Springs CO 2.0.0.7 City State Zip Code Solo.00 Transaction ID: SA11A1.27558 Colorado	A.				Date of Receipt			
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	NAME OF COMMITTEE (In Full)			
\mathbb{Z}	College of American Pathologists Politic	al Action (Committee	_
A.	Full Name (Last, First, Middle Initial) P Christopher Garwacki, Dr.			Date of Receipt
	Mailing Address 5040 Airport Ctr Pkwy			10 ^{//} 11 [/] 2007
	City Sta		Zip Code	Transaction ID: SA11A1.27611
	Charlotte	NC	28208-5885	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Presbyterian Hosp	Occupation Patholog		
	Receipt For:		e Year-to-Date V	_
	Primary General Other (specify) ▼	1 I 1 I	250.00]
в.	Full Name (Last, First, Middle Initial) A. Sidney Goldblatt, Dr.			Date of Receipt
	Mailing Address 1086 Franklin Street			10 ²⁶ /2007
	City	State	Zip Code	Transaction ID: SA11A1.27668
	Johnstown	PA	15905	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Conemaugh Valley Mem Hosp	Occupation Patholog		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00]
 C.	Full Name (Last, First, Middle Initial) R. Richard Gomez, Dr.			Date of Receipt
	Mailing Address Dept of Path 1500 SW 10Th St			M M / D D / Y Y Y Y 10 05 2007
	City	State	Zip Code	Transaction ID: SA11A1.27562
	Topeka	KS	66604-1301	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer St Francis Hith Ctr	Occupation Patholog		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00]
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$\overline{\mathbf{n}}$	NAME OF COMMITTEE (In Full)											
\rangle	College of American Pathologists Politic	cal Action (Committee									
Α.	Full Name (Last, First, Middle Initial) Fred Gorstein			Date of Receipt								
	Mailing Address Dept of Path. Anat.& Ce 1020 Locust St Ste 279	JAH		10 ^{/ D D} / Y Y Y 2007								
	City Dhile de la hie	State	Zip Code	Transaction ID: SA11A1.27563								
	Philadelphia	PA	19107-4998	Amount of Each Receipt this Period								
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	Name of Employer Thomas Jefferson Univ Hosp	Occupation Patholog										
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	Primary General Other (specify) ▼		500.00]								
	Full Name (Last, First, Middle Initial) Burnett John Holt, Dr.			Date of Receipt								
Б.	Mailing Address Dept of Path and Lab M	ad										
	200 Hawthorne Ln		7. 0. 1	10 29 2007								
	City Charlotte	State NC	Zip Code 28233	Transaction ID: SA11A1.27678								
			28233	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	C		250.00								
	Name of Employer Presbyterian Hosp	Occupation Patholog										
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C.	Full Name (Last, First, Middle Initial) E Andrew Horvath, Dr.			Date of Receipt								
	Mailing Address Lab 1100 Central Ave SE			10 ^{//} 05 ^{//} 2007								
	City	State	Zip Code	Transaction ID: SA11A1.27566								
	Albuquerque	NM	87106	Amount of Each Receipt this Period								
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\rangle	College of American Pathologists Politic	al Action C	Committee											
Α.	Full Name (Last, First, Middle Initial) N Stacey Ibrahim, Dr.				Date of Receipt									
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	FEC ID number of contributing federal political committee.	C			L.					5	00.0	0		
	Name of Employer Mountain Area Pathology PA	Occupation Pathologi												
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В.	Full Name (Last, First, Middle Initial) F David Jadwin, Dr.				Date of	Rece	ipt						_	
	Mailing Address 1635 Heather Ridge Dr				M M / D D / Y									
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	Name of Employer Columbia Healthcare Analy- tics Inc	Occupatior Pathologi												
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	Primary General Other (specify) ▼	0 0	300.00]										
 C.	Full Name (Last, First, Middle Initial) Emmett William Jefferson, Dr.				Date of	Rece	ipt						_	
	Mailing Address 101 Elm Ave SE				м м 1 0		D.	^D /5	Y		Y 0 0			
	City	State	Zip Code		Transa								_	
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$\overline{\nabla}$	NAME OF COMMITTEE (In Full)		,							
\geq	College of American Pathologists Politic	al Action (Committee							
Α.	Full Name (Last, First, Middle Initial) J. Charles Jennette			Date of Receipt						
	Mailing Address CB#7525 UNC-CH			10 19 Y Y Y Y 10 19 2007						
	City	State	Zip Code	Transaction ID: SA11A1.27634						
	Chapel Hill	NC	27599-7525	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		500.00						
	Name of Employer Univ of North Carolina	Occupation								
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	Other (specify)	0 0	500.00							
B	Full Name (Last, First, Middle Initial) S Bharati Jhaveri, Dr.			Date of Receipt						
υ.	Mailing Address 1312 Woods Farm Ln			1 0 0 5 2 0 0 7						
	City	State	Zip Code	Transaction ID: SA11A1.27573						
	Springfield	IL	62704-6431	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		250.00						
	Name of Employer St John's Hosp	Occupation Patholog								
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	Primary General Other (specify) ▼	0 0	250.00]						
<u>с.</u>	Full Name (Last, First, Middle Initial) D. Ragini Lakhia, Dr.			Date of Receipt						
	Mailing Address 1140 Business Ctr Dr 3	370		M M / D D / Y Y Y Y 10 19 2007						
	City	State	Zip Code	Transaction ID: SA11A1.27636						
	Houston	TX	77043-2737	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		500.00						
	Name of Employer Applied Diagnostics, Inc	Occupation Patholog								
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$\left \right\rangle$	NAME OF COMMITTEE (In Full) College of American Pathologists Politic	al Action (Committee	
A.	Full Name (Last, First, Middle Initial) D.K. Clarke Lambe, Dr. Mailing Address Department of Pathology	V		Date of Receipt
	250 E. Dunlap Avenue		Zia Cada	10 05 2007
	City Phoenix	State AZ	Zip Code 85020-2825	Transaction ID: SA11A1.27578 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer John C Lincoln Hosp-North Mountain	Occupatio Patholog	ist	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 750.00]
в.	Full Name (Last, First, Middle Initial) Chantanaros Lertdilok			Date of Receipt
	Mailing Address 4132 Catawba Ave			10 ^{/ D D} / Y Y Y 10 ^{/ 11} 2007
	City	State	Zip Code	Transaction ID: SA11A1.27615
	Carrollton	TX	75010	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Palo Pinto General Hosp	Occupatio Patholog		
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date V 250.00]
<u></u>	Full Name (Last, First, Middle Initial) W. Alvin Martin, Dr.			Date of Receipt
	Mailing Address Flow Cytometry Lab (4B 529 S Jackson St)		M M / D D / Y Y Y Y 10 23 2007
	City Louisville	State KY	Zip Code 40202	Transaction ID: SA11A1.27659 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer University of Louisville	Occupatio Patholog		
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 450.00]
s	UBTOTAL of Receipts This Page (optional)			1000.00
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IT Ar	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS hy information copied from such Reports and State for commercial purposes, other than using the n			
$\left \right\rangle$	NAME OF COMMITTEE (In Full) College of American Pathologists Politic			
A.	Full Name (Last, First, Middle Initial) E. John McDonald, Dr. Mailing Address Dept of Pathology			Date of Receipt
	4401 Booth Calloway City North Richland Hil	State TX	Zip Code 76180	Transaction ID: SA11A1.27579 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer North Hills Hosp Receipt For: Primary General Other (specify) ▼	Occupatio Patholog Aggregate]
В.	Full Name (Last, First, Middle Initial) E. Roger McLendon, Dr. Mailing Address Department of Patholog PO Box 3712	у		Date of Receipt
	City Durham	State NC	Zip Code 27710	Transaction ID: SA11A1.27637 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Duke Univ Med Ctr	Occupatio Patholog		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
с.	Full Name (Last, First, Middle Initial) A. Karen Miller, Dr.			Date of Receipt
	Mailing Address Lab 1255 W Washington St City	State	Zip Code	M M I D D I Y
	Tempe	AZ	85281-1210	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer Clin-Path Associates, P.C.	Occupatio Patholog	ist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00]
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	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 18/35 (check only one)								
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Ν	NAME OF COMMITTEE (In Full)											
\angle	College of American Pathologists Politic	al Action (Committee									
Α.	Full Name (Last, First, Middle Initial) A Lorie Montag, Dr.			Date of Receipt								
	Mailing Address Department of Pathology 5325 Faraon St	/		M M / D D / Y Y Y Y 10 / 05 / 2007								
	City	State	Zip Code	Transaction ID: SA11A1.27582								
	<u>St Joseph</u>	MO	64506	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	C		500.00								
	Name of Employer Heartland Reg Med Ctr	Occupation Patholog										
	Receipt For:		e Year-to-Date ▼	-								
	Primary General		500.00	1								
	Other (specify) ▼	0 0	500.00									
в.	Full Name (Last, First, Middle Initial) Kamala Murali			Date of Receipt								
	Mailing Address Department of Pathology 14 Prospect St	/		10 ^{//} 05 [/] 2007								
	City	State	Zip Code	Transaction ID: SA11A1.27583								
	Milford	MA	01757	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	C		250.00								
	Name of Employer Milford-Whitinsville Reg	Occupation										
	Hosp Receipt For:	Patholog Aggregate	IST e Year-to-Date ▼	-								
	Primary General	7.99.094.0		1								
	Other (specify) v	0 0	250.00									
с.	Full Name (Last, First, Middle Initial) N Ramakrishna Nayak, Dr.			Date of Receipt								
	Mailing Address Dept of Path 455 Toll Gate Road			M M / D D / Y Y Y Y 10 19 2007								
	City	State	Zip Code	Transaction ID: SA11A1.27639								
	Warwick	RI	02886	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	C		500.00								
	Name of Employer Kent County Memorial Hosp	Occupation Patholog										
	Receipt For:	Aggregate	e Year-to-Date 🔻									
	Primary General Other (specify) ▼	0 0	500.00									
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 35 (check only one) 11a X 11a 11b 11c 12							
	y information copied from such Reports and Sta for commercial purposes, other than using the r										
	NAME OF COMMITTEE (In Full)										
\geq	College of American Pathologists Politie	cal Action (Committee								
Α.	Full Name (Last, First, Middle Initial) M Charles Reese, Dr.			Date of Receipt							
	Mailing Address 5440 S St Ste 200			10 [°] ⁰ ⁰ ¹ ² ⁰ ¹							
	City	State	Zip Code	Transaction ID: SA11A1.27587							
	Lincoln	NE	68506	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		500.00							
	Name of Employer Pathology Med Svcs PC	Occupation Patholog									
	Receipt For:	Aggregate	e Year-to-Date 🔻								
	Other (specify) ▼	0 0	500.00]							
в.	Full Name (Last, First, Middle Initial) A. Jose Reilova, Dr.			Date of Receipt							
	Mailing Address 1335 Valentine St			M M / D D / Y Y Y Y 10 / 05 / 2007							
	City	State	Zip Code	Transaction ID: SA11A1.27588							
	Melbourne	FL	32901-3217	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		500.00							
	Name of Employer Atlantic Pathology Group	Occupation Patholog									
	Receipt For:	, v	e Year-to-Date 🔻								
	Other (specify) ▼	0 0	500.00]							
С.	Full Name (Last, First, Middle Initial) Gerard Stephen Ruby, Dr.			Date of Receipt							
	Mailing Address 12251 S 80th Ave			M M / D D / Y Y Y Y 10 19 2007							
	City	State	Zip Code	Transaction ID: SA11A1.27640							
	Palos Heights	IL	60463-0930	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		500.00							
	Name of Employer Palos Community Hosp	Occupation Patholog									
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SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 20 / 35								
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			Detailed Summary Page	13 14 15 16 17								
Ar	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	not be sold or used by any perso lress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.								
	NAME OF COMMITTEE (In Full)											
\rangle	College of American Pathologists Politica	al Action C	Committee									
Α.	Full Name (Last, First, Middle Initial) D Raoul Rudelli, Dr.			Date of Receipt								
	Mailing Address Department of Pathology 29th St at Ave E	,		M M / D D / Y Y Y Y 10 11 2007								
	City	State	Zip Code	Transaction ID: SA11A1.27616								
	Bayonne	NJ	07002	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	C		500.00								
	Name of Employer Bayonne Medical Ctr	Occupation		7								
	Receipt For:	Pathologi Aggregate	Year-to-Date V	-								
	Primary General			1								
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в.	Full Name (Last, First, Middle Initial) M. Marion Rundell, Dr.			Date of Receipt								
	Mailing Address Path PO Box 58744			M M / D D / Y Y Y Y 10 05 2007								
	City	State	Zip Code	Transaction ID: SA11A1.27589								
	Houston	ТХ	77258	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	C		1000.00								
	Name of Employer Clear Lake Pathology Part-	Occupation Pathologi										
	ners LTD Receipt For:	•	Year-to-Date V	-								
	Primary General Other (specify)		1000.00									
	Full Name (Last, First, Middle Initial) B. Ervin Shaw, Dr.			Date of Receipt								
0.	Mailing Address Department of Pathology	,		M M / D D / Y Y Y Y								
	2720 Sunset Blvd.		7.0.1	10 11 2007								
	City West Columbia	State SC	Zip Code 29169-4810	Transaction ID: SA11A1.27619 Amount of Each Receipt this Period								
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	federal political committee.	C		1000.00								
	Name of Employer Lexington Med Ctr	Occupation Pathologi										
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	Primary General		1000.00									
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or	for commercial purposes, other than using the n	name and add	dress of any political committee to	o solicit contributions from such committee.
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Α.	Full Name (Last, First, Middle Initial) E. Mark Shertzer, Dr.			Date of Receipt
	Mailing Address 25 Harrington Lane			10 ^M 30 ^Y 2007
	City	State	Zip Code	Transaction ID: SA11A1.27680
	Dothan	AL	36305	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Southeast Alabama Med Ctr	Occupatio Patholog		
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Other (specify)	0 0	1100.00]
в.	Full Name (Last, First, Middle Initial) D June Sigman, Dr.			Date of Receipt
	Mailing Address 3059 S Maryland Pkwy	Ste 100		10 ^{//} 10
	City	State	Zip Code	Transaction ID: SA11A1.27592
	Las Vegas	NV	89109-2202	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Laboratory Medicine Consu-	Occupatio		
	Itants, Ltd Receipt For:	Patholog	e Year-to-Date V	
	Primary General	, .gg. ogu		1
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C.	Full Name (Last, First, Middle Initial) A. Gerald Stolz, Dr.			Date of Receipt
	Mailing Address PO Box 925			10 05 2007
	City	State	Zip Code	Transaction ID: SA11A1.27596
	Russellville	AR	72811	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Pathology Services Lab, PA	Occupatio Patholog		
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼	0 0	500.00]
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S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 22/35							
IT			or each category of the	(check only one)							
			Detailed Summary Page								
	y information copied from such Reports and Sta for commercial purposes, other than using the n										
	NAME OF COMMITTEE (In Full)										
\rangle	College of American Pathologists Politic	al Action C	Committee								
Α.	Full Name (Last, First, Middle Initial) B Susan Streusand, Dr.			Date of Receipt							
	Mailing Address 6511 Mercer St			10 12 2007							
	City	State	Zip Code	Transaction ID: SA11A1.27625							
	Houston	ТХ	77005-3735	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		500.00							
	Name of Employer Alliance Path Consultants	Occupation Patholog									
	Receipt For:	· · ·	e Year-to-Date V								
	Primary General		E00.00								
	Other (specify)	8 8	500.00								
в.	Full Name (Last, First, Middle Initial) Katherine Tabatowski			Date of Receipt							
	Mailing Address GSMC Pathology 800 Forest Avenue			10 ^{//} 20 [/] Y Y Y Y 10 ^{//} 20 [/] 2007							
	City	State	Zip Code	Transaction ID: SA11A1.27649							
	Zanesville	OH	43701	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		400.00							
	Name of Employer Genesis Healthcare System	Occupation Patholog									
	Receipt For:	Aggregate	e Year-to-Date 🔻								
	Primary General		400.00								
	Other (specify)	0 0									
С.	Full Name (Last, First, Middle Initial) R. James Taylor, Dr.			Date of Receipt							
	Mailing Address Department of Pathology 1923 S Utica Ave	y		M = M / D = D / Y							
	City	State	Zip Code	Transaction ID: SA11A1.27599							
	Tulsa	OK	74104-6520	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		500.00							
	Name of Employer Pathology Laboratory Assoc	Occupation Patholog									
	Receipt For:	Aggregate	e Year-to-Date 🔻								
	Other (specify) ▼	0 0	500.00								
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SCHEDULE A (FEC Form 3X)			Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 23 / 35 (check only one)								
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12								
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	NAME OF COMMITTEE (In Full)											
\mathbb{Z}	College of American Pathologists Politic	cal Action (Committee									
A.	Full Name (Last, First, Middle Initial) W. Mark Teague, Dr.			Date of Receipt								
	Mailing Address 803 Franklin St			10 ^{D D} / Y Y Y Y 10 ^{D D} / 2007								
	City	State	Zip Code	Transaction ID: SA11A1.27600								
	Huntsville	AL	35801	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	C		250.00								
	Name of Employer Pathology Associates PC	Occupation Patholog										
	Receipt For:	Aggregate	Year-to-Date V									
	Primary General Other (specify) ▼	0 0	350.00]								
в.	Full Name (Last, First, Middle Initial) A. Joseph Tworek, Dr.			Date of Receipt								
	Mailing Address Dept of Path 5301 E Huron River Dr			M M / D D / Y Y Y Y 10 11 2007								
	City	State	Zip Code	Transaction ID: SA11A1.27621								
	Ann Arbor	MI	48106-0995	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	C		500.00								
	Name of Employer St. Joseph Mercy Hosp	Occupation Patholog										
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	Primary General		500.00	1								
	Other (specify)	0 0	500.00									
C.	Full Name (Last, First, Middle Initial) U. Dino Vallera, Dr.			Date of Receipt								
	Mailing Address 143 Lakeland Drive			M M / D D / Y Y Y Y 10 11 2007								
	City	State	Zip Code	Transaction ID: SA11A1.27623								
	Palos Park		60464	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	C		400.00								
	Name of Employer Hinsdale Hosp	Occupation Patholog										
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	College of American Pathologists Politica	al Action C	Committee											
Α.	Full Name (Last, First, Middle Initial) Habegger Gail Vance, Dr.				Date of Receipt									
	Mailing Address Dept of Medical and Mole 975 Walnut Street	ecular Ger		10 ^{''} 05 ^{''} 2007										
	City	State	Zip Code		Transa									
	Indianapolis	IN	46202		Amour	nt of E	Each	Rece	eipt th	nis Pe	eriod			
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	Name of Employer Indiana University Medical School	Occupation Pathologi												
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	Primary General Other (specify) ▼	0 0	250.00											
В.	Full Name (Last, First, Middle Initial) G Patricia Wasserman, Dr.				Date o	f Rec	eipt							
	Mailing Address 270-05 76th Ave				$\begin{array}{c c} M & M & / & D & D \\ \hline 1 & 0 & & 19 \\ \hline 1 & 0 & & 19 \\ \hline 1 & 2 & 0 & 0 & 7 \\ \hline 1 & 1 & 19 & 2 & 0 & 0 \\ \hline 1 & 1 & 1 & 1 & 2 & 0 \\ \hline 1 & 1 & 1 & 1 & 2 & 0 \\ \hline 1 & 1 & 1 & 1 & 2 & 0 \\ \hline 1 & 1 & 1 & 1 & 2 & 0 \\ \hline 1 & 1 & 1 & 1 & 2 & 0 \\ \hline 1 & 1 & 1 & 1 & 2 & 0 \\ \hline 1 & 1 & 1 & 1 & 2 & 0 \\ \hline 1 & 1 & 1 & 1 & 2 & 0 \\ \hline 1 & 1 & 1 & 1 & 1 \\ \hline 1 & 1 & 1 & 1 & 1 \\ \hline 1 & 1 & 1 & 1 & 1 \\ \hline 1 & 1 & 1 & 1 & 1 \\ \hline 1 & 1 & 1 & 1 & 1 \\ \hline 1 & 1 & 1 & 1 & 1 \\ \hline 1 & 1 & 1 & 1 & 1 \\ \hline 1 & 1 & 1 & 1 & 1 \\ \hline 1 & 1 & 1 & 1 & 1 \\ \hline 1 & 1 & 1 \\ \hline 1 & 1 & 1 & 1 \\ \hline 1 & 1 & 1 & 1 \\ \hline 1 & 1 & 1 & 1 \\ \hline 1 & 1 & 1 & 1 \\ \hline 1 & 1 & 1 & 1 \\ \hline 1 & 1 & 1 & 1 \\ \hline 1 & 1 & 1 \\ \hline 1 & 1 & 1 \\ \hline 1 & 1 & 1 & 1 \\ \hline 1 & 1 & 1 \\ $									
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	FEC ID number of contributing federal political committee.	C					250.00							
	Name of Employer Long Island Jewish Med Ctr	Occupation Pathologi												
	Receipt For:	Aggregate	Year-to-Date V											
	Primary General Other (specify) ▼	0 0	350.00											
С.	Full Name (Last, First, Middle Initial) V. Sarah Webb, Dr.			╞	Date o	f Rec	eipt							
	Mailing Address Department of Pathology 1600 Hospital Parkway	/			^м 1 0	1		^D /4	Y		0 [°] 0			
	City	State	Zip Code		Transa									
	Bedford	TX	76022	-	Amour	nt of E	Each	Rece	eipt th	nis Pe	eriod	_		
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	Name of Employer Harris Methodist HEB	Occupation Pathologi	st											
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	y information copied from such Reports and Sta for commercial purposes, other than using the n			
	NAME OF COMMITTEE (In Full)		, , , , , , , , , , , , , , , , , , ,	
\rangle	College of American Pathologists Politic	al Action (Committee	
Α.	Full Name (Last, First, Middle Initial) A Thomas Webb, Dr.			Date of Receipt
	Mailing Address 6110 N Oak Leaf Ct			10 ^{''} 21 ^{''} 2007
	City	State	Zip Code	Transaction ID: SA11A1.27654
	Peoria	IL	61615-2240	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer Proctor Hosp	Occupation Patholog		
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	250.00]
в.	Full Name (Last, First, Middle Initial) M. Thomas Wheeler, Dr.			Date of Receipt
	Mailing Address Department of Pathology One Baylor Plaza	у		M M / D D / Y Y Y Y 10 / 05 / 2007
	City	State	Zip Code	Transaction ID: SA11A1.27604
	Houston	TX	77030	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Baylor College of Medicine	Occupation Patholog		
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	1000.00]
с.	Full Name (Last, First, Middle Initial) F Rebecca Yorke, Dr.			Date of Receipt
	Mailing Address 2504 Elmen			M M / D D / Y Y Y Y 10 21 / 2007
	City	State	Zip Code	Transaction ID: SA11A1.27655
	Houston	TX	77019	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer unaffiliated	Occupation Patholog		
	Receipt For:	Aggregate	e Year-to-Date V	
	Other (specify) ▼	0 0	250.00]
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	y Information copied from such Reports and Statem for commercial purposes, other than using the name													IS
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$\langle \rangle$	College of American Pathologists Political	Action Co	mmittee											
Α.	Full Name (Last, First, Middle Initial) Sun Trust Bank									isburs	: SB2 ⁻ ement	1B.27	721	
	Mailing Address PO Box 85024							1 ^M 0	М	[′] ° () 1 /	Y	žoŏ	7 [×]
	Richmond	State VA	Zip Code 23285-5024				A	\mou	nt o	f Each	n Disbu	rseme	ent this	
	Purpose of Disbursement Bank Service Charge												111.	65
	Candidate Name Office Sought: House Disburse	ment For:			ateg Typ	gory/ De	_							
	Senate President	Primary Other (spe	General											
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В.	Full Name (Last, First, Middle Initial) Sun Trust Bank							Date o			ESB2			V
	Mailing Address PO Box 85024							1 [™] 0	IVI) 1	Ľ	²oò	7
	Richmond	State VA	Zip Code 23285-5024				A	Mou	nt o	f Each	n Disbu	rseme	ent this 72.	
	Purpose of Disbursement Bank Service Charge												12.	50
	Candidate Name				ateg Typ	gory/ De								
	Office Sought: House Disburse Senate President	ment For: Primary Other (spe	General											
	State: District:													
C.	Full Name (Last, First, Middle Initial) Sun Trust Bank							Date o	of D	isburs	: SB2 ⁻ ement			
	Mailing Address PO Box 85024							^M 0	М	[′] ° () ^D /2	Y	žoŏ	7 [×]
	Richmond	State VA	Zip Code 23285-5024				A	\mou	nt o	f Each	ı Disbu	rseme	ent this	
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Full Name (Last, First, Middle Initial)			Transaction I	D: SB21B.27728
A. Sun Trust Bank			Date of Disburs	sement
Mailing Address PO Box 85024			10	23 ^D ^Y 2007 ^Y
,	State Zip Code VA 23285-5024		Amount of Eac	h Disbursement this Period
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Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify) ▼			
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B. Sun Trust Bank			Date of Disburs	sement
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	State Zip Code VA 23285-5024		Amount of Eac	h Disbursement this Period
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A. Sun Trust Bank		Date of Disbursement
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	Mailing Address P.O. Box 116							10		3	3 ^D /	Ľ.	²oò	7
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C.	Full Name (Last, First, Middle Initial) CAMPAC - CONTINUING A MAJORITY PA	ARTY ACT	FION COMMIT	TEE	Ε					sburs	: SB23 ement	3.277	19	
	Mailing Address 2501 Wisconsin Avenue,	NW						1 ^M 0	М	□3	3 ^D /	Y	žoŏ	7 [×]
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	Mailing Address PO BOX 1096						[™] 0	M	□2	25	Y .	ž o ŏ	7	
		State Zip Code ME 04402					Amou	nt of	Each	ı Disbu	rseme	ent this		
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В.	FRIENDS OF DENNIS CARDOZA						Date		sburs	ESB23			Y	
	Mailing Address PO Box 2749						10		3	3 ^D /	L.	ž o ŏ	7	
	Merced	State Zip Code CA 95340					Amou	nt of	Each	ı Disbu	rseme	ent this		
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C.	Full Name (Last, First, Middle Initial) FRIENDS OF JIM CLYBURN						Date o	of Di	sburs	: SB23 ement			X	
	Mailing Address 499 South Capitol Street Suite 412	, SW					1 ^M 0	M	□3	3 ^D /	Y .	ž o ŏ	7	
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ar for commercial puppese, after than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (in Fuil) College of American Pathologists Political Action Committee Full Name (Last, First, Middle Initia) Transaction ID: SB23.27695 Ar FRIENDS OF KENT CONRAD Image: Constraint of the constraint	IT	TIZED DISBURSEMENTS for each category of the Detailed Summary Page 21			21b	П	22				L		F	26 30b	
NAME OF COMMITTEE (In Full) College of American Pathologists Political Action Committee Full Name (Last, First, Middle Initial) A FRIENDS OF KENT CONRAD Mailing Address PO BOX 812 Öhy State Purpose of Disbursement Candidate Name Other State: ND Office Sought: House District: Disbursement For: Office Sought: Y Prisident Mailing Address PO BOX 18021 Full Name (Last, First, Middle Initial) Transaction ID: SB23.27696 B. HULSHOF FOR CONGRESS District: Mailing Address PO BOX 18021 Chy State: Mailing Address 400 North Capital Street NW Chy State: Other (specify) Y															
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B. HULSHOF FOR CONGRESS Initial Object of Disbursement Mailing Address PO BOX 16021 City State Zip Code Alexandria VA 22302 Purpose of Disbursement Initial Object of Disbursement this Period Cardidate Name Category/ President 1000.00 Office Sought: X House Senate Disbursement For: 2008 Full Name (Last, First, Middle Initial) Other (specify) Transaction ID: SB23.27738 City State Zip Code Mailing Address 400 North Capital Street NW Transaction ID: SB23.27738 City State Zip Code Washington DC 20001 Purpose of Disbursement Disbursement For: 2007 City State Zip Code Washington DC 20001 Purpose of Disbursement Category/ Type Solution Office Sought: House Disbursement For: 2007 City Senate Disbursement For: 2007 City Senate Disbursement For: 2007 Citice Sought: Hou		X Senate X President Image: Comparison of the senate of th	Primary General												
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\rangle	College of American Pathologists Political	Action Commit	ee									
~	Full Name (Last, First, Middle Initial)								: SB23.2	7739		
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	,	State Zip 0 DC 200				Am	ount	of Each	Disburse	ement th	nis Pe	eriod
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C.	Full Name (Last, First, Middle Initial) PETE STARK RE-ELECTION COMMITTE	E						t ion ID: Disburse	: SB23.2 ement	7698		
	Mailing Address PO BOX 8331					<u>1</u>		[′] 3	^D /	ź0	٥́7	Y
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Α.	Full Name (Last, First, Middle Initial) PETE STARK RE-ELECTION COMMITTEE	Ē				Trans Date o		-	: SB23 ement	.276	99	
	Mailing Address PO BOX 8331					1 ^M 0	M	□3	1 ¹	Y	žoŏ	7 [×]
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В.	Full Name (Last, First, Middle Initial) RADANOVICH FOR CONGRESS					Date	of Di	sburs				X
	Mailing Address 104 Hume Avenue					10	M	□3	^D /		žo ò ī	7
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C.	Full Name (Last, First, Middle Initial) RED ROOSTER LEADERSHIP PAC					Date	of Di	sburs	: SB23 ement			X
	Mailing Address P.O. Box 16021					10	M	□3	1 ¹		2007	7
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College of American Pathologists Political	Action Committee			
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A. RICHARD E NEAL FOR CONGRESS COM	IMITTEE		Date of Disburs	
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State: MA District: 02	Other (specify)			
Full Name (Last, First, Middle Initial)			Transaction ID	: SB23.27701
B. SUE MYRICK FOR CONGRESS			Date of Disburs	ement
Mailing Address PO BOX 37091				3 1 [′] [°] 2 0 0 7 [°]
	State Zip Code NC 28237		Amount of Each	Disbursement this Period
Purpose of Disbursement				1000.00
Candidate Name		Category/ Type		
Office Sought: X House Disburser Senate X President	nent For: 2008 Primary General Other (specify) V			
State: NC District: 09				
Full Name (Last, First, Middle Initial)C. Tim Murphy for Congress			Transaction ID Date of Disburs	
Mailing Address P.O. Box 24551				3 1 Ý 2 0 0 7 Ý
	State Zip Code PA 15234		Amount of Each	Disbursement this Period
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