

# 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 APASI, Inc.

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

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 [MM] / [DD] / [YYYY] in the State of [ ]  
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on [MM] / [DD] / [YYYY] in the State of [ ]

5. Covering Period [09] / [01] / [2020] through [09] / [30] / [2020]

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 [10] / [04] / [2020]

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 APASI, 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="2020"/>		178800.41
(b) Cash on Hand at Beginning of Reporting Period.....	179255.49	
(c) Total Receipts (from Line 19) .....	458.34	28383.42
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	179713.83	207183.83
7. Total Disbursements (from Line 31).....	13000.00	40470.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	166713.83	166713.83
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
  
Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**Psychology PAC of APASI, Inc.**

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).....	323.34	18705.06
(ii) Unitemized .....	135.00	9608.36
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	458.34	28313.42
(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) .....	458.34	28313.42
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	70.00
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)).....▶	458.34	28383.42
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	458.34	28383.42

**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	70.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	70.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	13000.00	39500.00
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	900.00
(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	900.00
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)) ..	13000.00	40470.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	13000.00	40470.00

**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) .....	458.34	28313.42
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	900.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	458.34	27413.42
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	70.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	70.00
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 APASI, Inc.**

**A. McLeod, Robin, , Dr, PhD**

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

Mailing Address COUNSLG PSYCHOLOGISTS OF WDBY  
7582 CURRELL BLVD STE 208

City WOODBURY State MN Zip Code 55125-2471

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

Name of Employer (for Individual) Committee of State Leaders Occupation (for Individual) Chair-Elect

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1350.00

Date of Receipt  
09 / 10 / 2020  
**Transaction ID : A715BF5824D45431D93C**

Amount of Each Receipt this Period  
150.00

Memo Item

**B. Prescott, Diana, Lee, Dr., PhD**

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

Mailing Address HAMPDEN PSYCHOLOGICAL CONSULTATION  
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) APA/APAPO Board of Directors Occupation (for Individual) Member

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
09 / 10 / 2020  
**Transaction ID : AB7307046A61148D0981**

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  
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 ▼  
750.06

Date of Receipt  
09 / 16 / 2020  
**Transaction ID : ADE3678F6632A49388AF**

Amount of Each Receipt this Period  
83.34

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 283.34

**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 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

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NAME OF COMMITTEE (In Full)  
**Psychology PAC of APASI, Inc.**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Spears, Vivian, G, Dr.,

Mailing Address 13 CORPORATE BLVD NE STE 220  
Ste 220

City BROOKHAVEN State GA Zip Code 30329-1900

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

Name of Employer (for Individual) Georgia Psychological Association Occupation (for Individual) SPTA Executive Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  
MM / DD / YYYY  
09 / 21 / 2020

**Transaction ID : A6C29A5F3673F4A30A34**

Amount of Each Receipt this Period  
40.00

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  
MM / DD / YYYY

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  
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	40.00
<b>TOTAL</b> This Period (last page this line number only).....	323.34

**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)  
**Psychology PAC of APASI, Inc.**

**A. SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
EVANSTON

Mailing Address P.O. BOX 5130

City EVANSTON State IL Zip Code 60204

Purpose of Disbursement  
Contribution to Committee

Candidate Name  
**Schakowsky, Jan, , Rep.,**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼

State: IL District: 09

Date of Disbursement: 09 / 15 / 2020

FEC Identification Number: **C00327023**  
Transaction ID : **BBC0FF4E6E**  
Amount of Each Disbursement this Period: 1000.00

Memo Item

**B. ROBIN KELLY FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Washington

Mailing Address 413 New Jersey Ave. SE

City Washington State DC Zip Code 20003-4007

Purpose of Disbursement  
Contribution to Committee

Candidate Name  
**Kelly, Robin, , Rep.,**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼

State: IL District: 02

Date of Disbursement: 09 / 15 / 2020

FEC Identification Number: **C00539866**  
Transaction ID : **B387F0B553E**  
Amount of Each Disbursement this Period: 1000.00

Memo Item

**C. VAL DEMINGS FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Washington

Mailing Address 499 South Capitol St SE Suite 422

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Contribution to Committee

Candidate Name  
**Demings, Val, , Rep.,**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼

State: FL District: 10

Date of Disbursement: 09 / 15 / 2020

FEC Identification Number: **C00590489**  
Transaction ID : **BF6C722DBI**  
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)  
**Psychology PAC of APASI, Inc.**

**A. MICHAEL BURGESS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 40323

M M M	/	D D D	/	Y Y Y Y Y
09		15		2020

City Washington State DC Zip Code 20016-0323

FEC Identification Number

Purpose of Disbursement  
Contribution to Committee

C	C00372532
---	-----------

Candidate Name  
**Burgess, Michael, C., Rep.,**

Category/  
Type

**Transaction ID : B81BE02D57**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: TX District: 26

2500.00
---------

Memo Item

**B. JUDY CHU FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1531 Purdue Avenue

M M M	/	D D D	/	Y Y Y Y Y
09		15		2020

City Los Angeles State CA Zip Code 90025-3104

FEC Identification Number

Purpose of Disbursement  
Contribution to Committee

C	C00458125
---	-----------

Candidate Name  
**Chu, Judy, , Rep.,**

Category/  
Type

**Transaction ID : BC9815E9CA**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: CA District: 27

2500.00
---------

Memo Item

**C. LAUREN UNDERWOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 13400 S. Route 59  
Suite 116, Box 248

M M M	/	D D D	/	Y Y Y Y Y
09		23		2020

City Plainfield State IL Zip Code 60585-5830

FEC Identification Number

Purpose of Disbursement  
Contribution to Committee

C	C00652719
---	-----------

Candidate Name  
**Underwood, Lauren, , Rep.,**

Category/  
Type

**Transaction ID : BEAC15BA1!**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: IL District: 14

1000.00
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Memo Item

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

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

6000.00
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**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)  
**Psychology PAC of APASI, Inc.**

Full Name (Last, First, Middle Initial) <b>A. LISA BLUNT ROCHESTER FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 09 / 23 / 2020
Mailing Address PO BOX 9767		FEC Identification Number C 000590778 <b>Transaction ID : B303936579C</b>
City WILMINGTON	State DE	Zip Code 19809
Purpose of Disbursement Contribution to Committee		Amount of Each Disbursement this Period 1000.00
Candidate Name <b>Blunt Rochester, Lisa, , Rep.,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: DE	District: 01	

Full Name (Last, First, Middle Initial) <b>B. ALAN LOWENTHAL FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 09 / 28 / 2020
Mailing Address 228 Second Street, S.E.		FEC Identification Number C 000498212 <b>Transaction ID : B35ADFCBE5</b>
City Washington	State DC	Zip Code 20003-1943
Purpose of Disbursement Contribution to Committee		Amount of Each Disbursement this Period 1000.00
Candidate Name <b>Lowenthal, Alan, , Rep.,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item
State: CA	District: 47	

Full Name (Last, First, Middle Initial) <b>C. COLLINS MAINE 2020</b>		Date of Disbursement MM / DD / YYYY 09 / 28 / 2020
Mailing Address 1020 N. Fairfax St. Suite 201		FEC Identification Number C 000716290 <b>Transaction ID : B27DE5D8A4</b>
City Alexandria	State VA	Zip Code 22314-2068
Purpose of Disbursement Contribution to Committee		Amount of Each Disbursement this Period 1000.00
Candidate Name <b>COLLINS MAINE 2020</b>		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State:	District:	Other

**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)  
**Psychology PAC of APASI, Inc.**

Full Name (Last, First, Middle Initial) <b>A. AMY KENNEDY FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y Y Y 09 / 29 / 2020	
Mailing Address PO BOX 247		FEC Identification Number <b>C</b> C00732545 <b>Transaction ID : B1933F083DI</b>	
City BRIGANTINE	State NJ	Zip Code 08203	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement Contribution to Committee		Category/ Type	
Candidate Name <b>Kennedy, Amy, , ,</b>		Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NJ District: 02		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y Y Y	
Mailing Address		FEC Identification Number <b>C</b>	
City	State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		Category/ Type	
Candidate Name		Disbursement For:	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y Y Y	
Mailing Address		FEC Identification Number <b>C</b>	
City	State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		Category/ Type	
Candidate Name		Disbursement For:	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	13000.00