

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
College of American Pathologists Political Action Committee

ADDRESS (number and street) **Check if different than previously reported. (ACC)**
1350 I Street, NW
Suite 590
Washington DC 20005

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIP CODE

C00274944 3. IS THIS REPORT NEW (N) OR X AMENDED (A)

4. TYPE OF REPORT (Choose One)	(b) Monthly Report Due On:	Feb 20 (M2)	May 20 (M5)	X	Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:		Mar 20 (M3)	Jun 20 (M6)		Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report(Q1)		Apr 20 (M4)	Jul 20 (M7)		Oct 20 (M10)	Jan 31 (M13)
July 15 Quarterly Report(Q2)	(c) 12-Day PRE-Election Report for the:	Primary (12P)			General (12G)	Runoff (12R)
October 15 Quarterly Report(Q3)		Convention (12C)			Special (12S)	
January 31 Quarterly Report(YE)	Election on					in the State of
July 31 Mid-Year Report(Non-election Year Only) (MY)	(d) 30-Day Post -Election Report for the:	General (30G)			Runoff (30R)	Special (30S)
Termination Report (TER)	Election on					in the State of

5. Covering Period 07 01 2002 through 07 31 2002

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 John H. Scott
Signature of Treasurer Electronically Filed by John H. Scott Date 01 31 2003

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/2001)

Page 2

Write or Type Committee Name
College of American Pathologists Political Action Committee

Report Covering the Period: From: ^h07 ^D01 ^v2002 To: ^h07 ^D31 ^v2002

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 ^v 2002		41517.76
(b) Cash on Hand at Beginning of Reporting Period	73193.65	
(c) Total Receipts (from Line 19)	3825.00	124860.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	77018.65	166377.76
7. Total Disbursements (from Line 30)	14023.04	103382.15
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	62995.61	62995.61
9. Debts and Obligations owed TO the committee (itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY 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 (Revised 1/2001)

Page 3

Write or Type Committee Name

College of American Pathologists Political Action Committee

Report Covering the Period: From: ^{MM}07 ^{DD}01 ^{YYYY}2002 To: ^{MM}07 ^{DD}31 ^{YYYY}2002

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)	2750.00	
(ii) Unitemized	1075.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii)	3825.00	124860.00
(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 32, page 4)	3825.00	124860.00
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 36, page 4)	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 Nonfederal Account for Joint Activity	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18)	3825.00	124860.00
20. Total Federal Receipts (subtract Line 18 from Line 19)	3825.00	124860.00

DETAILED SUMMARY PAGE

of Disbursements

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Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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.....	212.69	2021.69
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	212.69	2021.69
22. Transfers to Affiliated/Other Party Committees.....	0.00	2500.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	13810.35	98212.16
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(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.....	0.00	648.26
30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29)..... ▶	14023.04	103382.15
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30)..... ▶	14023.04	103382.15
<hr/>		
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) from Line 11(d), page 3).....	3825.00	124860.00
33. Total Contribution Refunds (from Line 28(d)).....	0.00	0.00
34. Net Contributions (other than loans) (subtract Line 33 from Line 32).....	3825.00	124860.00
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... ▶	212.69	2021.69
36. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
37. Net Operating Expenditures (subtract Line 36 from Line 35)..... ▶	212.69	2021.69

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

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

FOR LINE NUMBER: PAGE 5 / 12

(check only one)

11a 11b 11c 12
 13 14 15 16 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

Full Name (Last, First, Middle Initial)

A. Bauer Stephen N. Dr.

Mailing Address

Laboratory 8501 Coyle Ave.

City State Zip Code

Carmichael CA 95608

Date of Receipt

N M / D E / Y Y Y Y
07 / 15 / 2002

Amount of Each Receipt this Period

250.00

FEC ID number of contributing
federal political committee.

Name of Employer
Mercy San Juan Hosp

Occupation
Pathologist

Receipt For:

Primary General

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Transaction ID: SA11A1.8834

Full Name (Last, First, Middle Initial)

B. Ferguson Jere W. Dr.

Mailing Address

1918 W State St

City State Zip Code

Bristol TN 37620

Date of Receipt

N M / D E / Y Y Y Y
07 / 15 / 2002

Amount of Each Receipt this Period

1000.00

FEC ID number of contributing
federal political committee.

Name of Employer
Intermountain Pathology Assoc

Occupation
Pathologist

Receipt For:

Primary General

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Transaction ID: SA11A1.8838

Full Name (Last, First, Middle Initial)

C. Mazur Michael T. Dr.

Mailing Address

600 E Genesee St Suite 905

City State Zip Code

Syracuse NY 13202

Date of Receipt

N M / D E / Y Y Y Y
07 / 29 / 2002

Amount of Each Receipt this Period

250.00

FEC ID number of contributing
federal political committee.

Name of Employer
Crouse Hosp

Occupation
Pathologist

Receipt For:

Primary General

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Transaction ID: SA11A1.8852

SUBTOTAL of Receipts This Page (optional) ▶

1500.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 6 / 12

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)

College of American Pathologists Political Action Committee

Full Name (Last, First, Middle Initial)

A. Neff John C. Dr.

Mailing Address

Department of Pathology 1924 Alcoa Highway

City State Zip Code

Knoxville TN 37920

Date of Receipt

MM / DD / YYYY
07 / 20 / 2002

Amount of Each Receipt this Period

1000.00

FEC ID number of contributing
federal political committee.

Name of Employer
Univ of Tennessee Med Ctr

Occupation
Pathologist

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Transaction ID: SA11A1.8853

Full Name (Last, First, Middle Initial)

B. O'Brien Michael J. Dr.

Mailing Address

Department of Pathology 784 Massachusetts Ave.

City State Zip Code

Boston MA 02118

Date of Receipt

MM / DD / YYYY
07 / 15 / 2002

Amount of Each Receipt this Period

250.00

FEC ID number of contributing
federal political committee.

Name of Employer
Boston Med Ctr

Occupation
Pathologist

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Transaction ID: SA11A1.8848

C.

SUBTOTAL of Receipts This Page (optional)	▶	1250.00
TOTAL This Period (last page this line number only)	▶	2750.00

**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)

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<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25
	26		27		28a		28b		28c
									29

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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		Date of Disbursement 07 th : 02 nd : 2002 nd	
Mailing Address PO Box 85024 City Richmond State VA Zip Code 23285-5024		Amount of Each Disbursement this Period 200.69	
Purpose of Disbursement Bank Fees Candidate Name		Category/ Type	
Office Sought: House Senate President State: District:	Disbursement For: Primary General Other (specify) ▼		
		Transaction ID: SB21B.B887	

B.

C.

SUBTOTAL of Disbursements This Page (optional)	▶	200.69
TOTAL This Period (last page this line number only)	▶	200.69

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25
<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c
				<input type="checkbox"/> 29

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

Full Name (Last, First, Middle Initial) A. AMERICA'S MAJORITY TRUST		Date of Disbursement 07 / 22 / 2002	
Mailing Address 1155 21ST STREET NW SUITE 300 City State Zip Code WASHINGTON DC 20036		Amount of Each Disbursement this Period 1500.00	
Purpose of Disbursement Candidate Name		Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 02	Disbursement For: 2002 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Other	Transaction ID: SB23.8808	

Full Name (Last, First, Middle Initial) B. Bart Gordon for Congress		Date of Disbursement 07 / 23 / 2002	
Mailing Address PO Box 2008 City State Zip Code Murfreesboro TN 37133		Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement Candidate Name Bart Gordon for Congress		Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 05	Disbursement For: 2002 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Other	Transaction ID: SB23.8814	

Full Name (Last, First, Middle Initial) C. Denise Bell		Date of Disbursement 07 / 22 / 2002	
Mailing Address 1350 I Street NW Suite 500 City State Zip Code Washington DC 20005		Amount of Each Disbursement this Period 1208.20	
Purpose of Disbursement In Kind- America's Majority Trst Dinner Candidate Name		Category/ Type	
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2002 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Other	Transaction ID: SB23.8812	

SUBTOTAL of Disbursements This Page (optional) ▶	3208.20
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 / 12

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25
<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c
<input type="checkbox"/> 29				

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

Full Name (Last, First, Middle Initial) A. Manzullo for Congress		Date of Disbursement 07 / 25 / 2002	
Mailing Address 801 N Pitt St Suite 120 City State Zip Code Alexandria VA 22314		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Candidate Name		Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Transaction ID: SB23.8807	
State: IL District: 16			

Full Name (Last, First, Middle Initial) B. NORWOOD FOR CONGRESS		Date of Disbursement 07 / 25 / 2002	
Mailing Address PO Box 499 PO BOX 499 City State Zip Code Evans CA 95808		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Candidate Name		Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Transaction ID: SB23.8817	
State: CA District: 10			

Full Name (Last, First, Middle Initial) C. PIONEER POLITICAL ACTION COMMITTEE		Date of Disbursement 07 / 23 / 2002	
Mailing Address 412 FIRST STREET SE SUITE 100 City State Zip Code WASHINGTON DC 20003		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement PAC Candidate Name		Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other	Transaction ID: SB23.8800	
State: OH District: 07			

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)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25
<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c
				<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

College of American Pathologists Political Action Committee

Full Name (Last, First, Middle Initial)
A. TIM JOHNSON FOR SOUTH DAKOTA INC

Date of Disbursement

07^N / 30^M / 2002^Y

Mailing Address

PO BOX 1859

City

SIOUX FALLS

State

SD

Zip Code

57101

Amount of Each Disbursement this Period

1602.15

Purpose of Disbursement

Candidate Name

TIM JOHNSON FOR SOUTH DAKOTA INC

Category/
Type

Office Sought:

House

Senate

President

State: SD

District: 00

Disbursement For:

2002

Primary

General

Other (specify) ▼

Transaction ID: SB23.8815

B.

C.

SUBTOTAL of Disbursements This Page (optional) ▶

1602.15

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

13810.35