

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 the American Psychological Association Practice Organization

ADDRESS (number and street) PO Box 65353 Washington DC 20035 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE C C00522094 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X] [ ]

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 06 01 2017 through 06 30 2017

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 07 14 2017

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)

Page 2

Write or Type Committee Name

**Psychology PAC of the American Psychological Association Practice Organization**

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="2017"/>		161261.99
(b) Cash on Hand at Beginning of Reporting Period.....	199882.22	
(c) Total Receipts (from Line 19) .....	2147.50	67207.05
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	202029.72	228469.04
7. Total Disbursements (from Line 31).....	8681.43	35120.75
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	193348.29	193348.29
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 the American Psychological Association Practice Organization**

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
06 / 01 / 2017 To: M M / D D / Y Y Y Y Y Y  
06 / 30 / 2017

<b>I. Receipts</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1050.00	29275.00
(ii) Unitemized .....	1097.50	37458.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	2147.50	66733.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	2147.50	66733.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	474.05
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)).....▶	2147.50	67207.05
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	2147.50	67207.05

**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 .....	131.43	2570.75
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	131.43	2570.75
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	8000.00	32000.00
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 .....	550.00	550.00
(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)).....	550.00	550.00
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)) ..	8681.43	35120.75
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8681.43	35120.75

**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) .....	2147.50	66733.00
34. Total Contribution Refunds (from Line 28(d)) .....	550.00	550.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	1597.50	66183.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	131.43	2570.75
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	474.05
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	131.43	2096.70

**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 13
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Psychology PAC of the American Psychological Association Practice Organization**

**A. Kurylo, Monica, F, Dr, PhD**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Kumc - Dept of Psychiatry & Beh Ps  
 Ms 4015  
 City Kansas City State KS Zip Code 66160-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) KUMC Occupation (for Individual) Asso Prof, Director of Neurorehabilita  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 08 / 2017  
**Transaction ID : AAE74C80DB42049B9AA6**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Nguyen, Annie, Ha, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 640  
 City Kailua State HI Zip Code 96734-0640  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-employed Occupation (for Individual) Psychologist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 06 / 12 / 2017  
**Transaction ID : A0789DCD86A024CEEBD1**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. Sammons, Morgan, T, , PhD**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address National Register Of Health Servic  
 1200 New York Ave Nw Ste 800  
 City Washington State DC Zip Code 20005-6142  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Psychologist  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 06 / 12 / 2017  
**Transaction ID : A085DCEFB41274313812**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	450.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

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NAME OF COMMITTEE (In Full)  
**Psychology PAC of the American Psychological Association Practice Organization**

**A. Sheras, Peter, L, Dr., PhD**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 E South St  
Ste 5

City Charlottesville State VA Zip Code 22902-5217

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

Name of Employer (for Individual) Virginia Psychological Association Occupation (for Individual) Psychologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 06 / 22 / 2017

**Transaction ID : A7D4B6684C4954092B0C**

Amount of Each Receipt this Period 100.00

Memo Item

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

Mailing Address 10380 SW Canterbury Ln

City Tigard State OR Zip Code 97224-4810

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

Name of Employer (for Individual) Self Employed Occupation (for Individual) Psychologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 29 / 2017

**Transaction ID : A984A605A64FC4EBC80B**

Amount of Each Receipt this Period 500.00

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	600.00
<b>TOTAL</b> This Period (last page this line number only).....	1050.00

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

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NAME OF COMMITTEE (In Full)

**Psychology PAC of the American Psychological Association Practice Organization**

Full Name (Last, First, Middle Initial)

**A. Aristotle International, Inc.**

Mailing Address 205 Pennsylvania Ave SE

City  
Washington

State  
DC

Zip Code  
20003-1164

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	2		2	0	1	7

FEC Identification Number

**C** [Redacted]  
**Transaction ID : BBF66C2DD5**  
Amount of Each Disbursement this Period  
[Redacted] 28.56

Memo Item

Full Name (Last, First, Middle Initial)

**B. Aristotle International, Inc.**

Mailing Address 205 Pennsylvania Ave SE

City  
Washington

State  
DC

Zip Code  
20003-1164

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	1	7

FEC Identification Number

**C** [Redacted]  
**Transaction ID : BCA0786437E**  
Amount of Each Disbursement this Period  
[Redacted] 5.75

Memo Item

Full Name (Last, First, Middle Initial)

**C. Aristotle International, Inc.**

Mailing Address 205 Pennsylvania Ave SE

City  
Washington

State  
DC

Zip Code  
20003-1164

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	6		2	0	1	7

FEC Identification Number

**C** [Redacted]  
**Transaction ID : B8CFE6A7F1**  
Amount of Each Disbursement this Period  
[Redacted] 20.50

Memo Item

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

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

5	4	.	8	1
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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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Psychology PAC of the American Psychological Association Practice Organization**

Full Name (Last, First, Middle Initial)

**A. Aristotle International, Inc.**

Mailing Address 205 Pennsylvania Ave SE

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		2	3		2	0	1	7		

City  
Washington

State  
DC

Zip Code  
20003-1164

FEC Identification Number

C
<b>Transaction ID : BDAE22AE74</b>
Amount of Each Disbursement this Period

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type

16.87
-------

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

**B. Aristotle International, Inc.**

Mailing Address 205 Pennsylvania Ave SE

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		2	7		2	0	1	7		

City  
Washington

State  
DC

Zip Code  
20003-1164

FEC Identification Number

C
<b>Transaction ID : B5EA65A13F:</b>
Amount of Each Disbursement this Period

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type

5.25
------

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

Date of Disbursement

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

City

State

Zip Code

FEC Identification Number

C
Amount of Each Disbursement this Period

Purpose of Disbursement

Candidate Name

Category/  
Type

--

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Memo Item

State: District:

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

22.12
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**TOTAL** This Period (last page this line number only)..... ▶

76.93
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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 the American Psychological Association Practice Organization**

Full Name (Last, First, Middle Initial)

**A. Heidi for Senate**

Mailing Address 303 Massachusetts Ave., NE

City  
Washington

State  
DC

Zip Code  
20002-5701

Purpose of Disbursement  
Contribution to Committee

Candidate Name

**Heitkamp, Heidi, , Sen.,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: ND District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		1	9		2	0	1	7		

FEC Identification Number

**C** C00505552

**Transaction ID : B64064EAE8**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. WALDEN FOR CONGRESS**

Mailing Address 213 Ashby St.

City  
Alexandria

State  
VA

Zip Code  
22305-2902

Purpose of Disbursement  
Contribution to Committee

Candidate Name

**Walden, Greg, P., Rep.,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify)

State: OR District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		1	9		2	0	1	7		

FEC Identification Number

**C** C00333427

**Transaction ID : B9018863D96**

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. JEFF FLAKE FOR US SENATE INC**

Mailing Address 4509 Saucon Valley Court

City  
Alexandria

State  
VA

Zip Code  
22312-3162

Purpose of Disbursement  
Contribution to Committee

Candidate Name

**Flake, Jeff, L., Sen.,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: AZ District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		1	9		2	0	1	7		

FEC Identification Number

**C** C00347260

**Transaction ID : BEDB2B2E6**

Amount of Each Disbursement this Period

1500.00

Memo Item

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

4000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Psychology PAC of the American Psychological Association Practice Organization**

Full Name (Last, First, Middle Initial)

**A. BILL CASSIDY FOR US SENATE**

Mailing Address 1006 Pendelton St.

City  
Alexandria

State  
VA

Zip Code  
22314-1837

Purpose of Disbursement  
Contribution to Committee

Candidate Name

**Cassidy, Bill, , Sen.,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼

State: LA District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	1	7

FEC Identification Number

**C** C00543983

**Transaction ID : B7BEF6E961**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. LISA MURKOWSKI FOR US SENATE**

Mailing Address PO BOX 100847

City  
ANCHORAGE

State  
AK

Zip Code  
99510

Purpose of Disbursement  
Contribution to Committee

Candidate Name

**Murkowski, Lisa, A., Sen.,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2022  
 Primary  General  
 Other (specify)

State: AK District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	2		2	0	1	7

FEC Identification Number

**C** C00384529

**Transaction ID : BD7701DF21**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. MCCASKILL FOR MISSOURI**

Mailing Address 700 13TH STREET NW SUITE 600

City  
WASHINGTON

State  
DC

Zip Code  
20005

Purpose of Disbursement  
Contribution to Committee

Candidate Name

**McCaskill, Claire, , Sen.,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: MO District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	2		2	0	1	7

FEC Identification Number

**C** C00414961

**Transaction ID : BB879E2C4F**

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

3000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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 the American Psychological Association Practice Organization**

Full Name (Last, First, Middle Initial)

**A. FRELINGHUYSEN FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	23	/	2017

Mailing Address 2308 Mount Vernon Avenue  
#337

FEC Identification Number

C	C00299404
---	-----------

**Transaction ID : B456B89698**

Amount of Each Disbursement this Period

1000.00
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Memo Item

City Alexandria State VA Zip Code 22301-1328

Purpose of Disbursement  
Contribution to Committee

--

Candidate Name

**Frelinghuysen, Rodney, P., Rep.,**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: NJ District: 11

Full Name (Last, First, Middle Initial)

**B. Rounds for Senate**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	28	/	2017

Mailing Address c/o Paula Dukes  
22 Rio Vista Lane

FEC Identification Number

C	C00532465
---	-----------

**Transaction ID : BC738C1599**

Amount of Each Disbursement this Period

- 1500.00
-----------

Memo Item

City Richmond State VA Zip Code 23226-2315

Purpose of Disbursement  
VOID - Contribution to Committee

--

Candidate Name

**Rounds, Mike, , Sen.,**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼

State: SD District:

Full Name (Last, First, Middle Initial)

**C. Rounds for Senate**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	28	/	2017

Mailing Address c/o Paula Dukes  
22 Rio Vista Lane

FEC Identification Number

C	C00532465
---	-----------

**Transaction ID : BB853DC031**

Amount of Each Disbursement this Period

1500.00
---------

Memo Item

City Richmond State VA Zip Code 23226-2315

Purpose of Disbursement  
Contribution to Committee

--

Candidate Name

**Rounds, Mike, , Sen.,**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼

State: SD District:

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

1000.00
---------

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

8000.00
---------

**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 type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" 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 the American Psychological Association Practice Organization**

Full Name (Last, First, Middle Initial)

**A. Vasquez, Melba, J, , PhD**

Mailing Address 2901 Bee Caves Rd  
Ste N

City Austin State TX Zip Code 78746-5571

Purpose of Disbursement Refund

Candidate Name

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

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
06 / 07 / 2017

FEC Identification Number

C   
**Transaction ID : B4B821FC6D**  
Amount of Each Disbursement this Period  
 250.00

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y

FEC Identification Number

C   
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y

FEC Identification Number

C   
Amount of Each Disbursement this Period

Memo Item

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

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

250.00  
 250.00