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Image# 14952506483

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

				Office Us	e Only
1. NAME OF TYPE COMMITTEE (in full)	PE OR PRINT ▼	Example: If typing over the lines.	, type 121	FE4M5	
American Psychological As	sociation Practice (Organization Politi	cal Action Co	ommittee (APA	APO-PAC)
ADDRESS (number and street)	PO Box 65353				
Check if different than previously reported. (ACC)	Washington		DC	20035	
2. FEC IDENTIFICATION NUME	BER ▼ CIT	ГУ▲	STAT	E	ZIP CODE A
C C00522094		S THIS X NE		AMENDED (A)	
4. TYPE OF REPORT (Choose One)	Report	20 (M2) Ma	ay 20 (M5)	Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:			n 20 (M6)	Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report (Q1)		20 (M4) Ju	I 20 (M7)	Oct 20 (M10)	Jan 31 (YE)
July 15 Quarterly Report (Q2)	(c) 12-Day PRE-Election Report for the:	Primary (12P) Convention (12		General (12G) Special (12S)	Runoff (12R)
October 15 Quarterly Report (Q3)	ricport for the.	Convention (12		opoolal (120)	
January 31 Year-End Report (YE)	Electic	on on 11		014	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)	Electic	on on	D = D / Y = Y	YYY	in the State of
5. Covering Period 10	01 2014	through		15 / Y Y Y	4
I certify that I have examined this F	Report and to the best of	my knowledge and be	lief it is true, co	rrect and complet	e.
Type or Print Name of Treasurer	Craig Engle				
Signature of Treasurer Craig Eng	gle	[Electronically 1	Filed] Date	10 / 23	
NOTE: Submission of false, erroneous	s, or incomplete informatio	n may subject the perso	n signing this Re	port to the penaltic	es of 2 U.S.C. §437g.
Office Use Only					FORM 3X ev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name

American Psychological Association Practice Organization Political Action Committee (APAPO-PAC)

10 2014 Report Covering the Period: 10 2014 15 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 131285.92 January 1. 2014 (b) Cash on Hand at 132169.11 Beginning of Reporting Period..... 139695.22 3198.00 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 135367.11 270981.14 6(a) and 6(c) for Column B)..... 1057.55 136671.58 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 134309.56 134309.56 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D)

For further information contact:

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

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. 06/2004)

Write or Type Committee Name

American Psychological Association Practice Organization Political Action Committee (APAPO-PAC)

Receipts other than loans) From: //Persons Other cal Committees d (use Schedule A) ized	239	0.00 08.00 08.00 0.00	COLUMN B endar Year-to-Date 39675.00 97350.94 137025.94 0.00 0.00
resons Other cal Committees d (use Schedule A)	239	08.00 0.00 0.00	97350.94 , 137025.94 , 0.00
cal Committees d (use Schedule A)	239	08.00 0.00 0.00	97350.94 , 137025.94 , 0.00
ized	239	08.00 0.00 0.00	97350.94 , 137025.94 , 0.00
ized	239	08.00 0.00 0.00	97350.94 , 137025.94 , 0.00
(add 1(a)(i) and (ii)	319	0.00	137025.94
arty Committees		0.00	0.00
ical Committees ACs) ibutions (add Lines b), and (c)) (Carry ine 33, page 5) Affiliated/Other		0.00	
ACs)ibutions (add Lines b), and (c)) (Carry ine 33, page 5)			0.00
ibutions (add Lines b), and (c)) (Carry ine 33, page 5) Affiliated/Other			0.00
o), and (c)) (Carry ine 33, page 5)	319	0.00	
ine 33, page 5) Affiliated/Other	319	0.00	
Affiliated/Other	, , , ,	8.UU	137025.94
		0.00	7
88		0.00	0.00
03	7 7 7		
ived		0.00	0.00
			, , , , , , , , , , , , , , , , , , , ,
nts Received		0.00	0.00
	7		7
The state of the s		0.00	2669.28
	7 7		
didates and Other			
		0.00	0.00
· · · · · · · · · · · · · · · · · · ·	(0.00	0.00
Non-Federal and Levin Funds	, , , ,		
I Account			
edule H3)	(0.00	0.00
			, , , , , , , , , , , , , , , , , , , ,
(from Schedule H5)		0.00	0.00
s (nom ochedule 115)	7 7		
ers (add 18(a) and 18(b))		0.00	0.00
	nts Received	nts Received rating Expenditures ates, etc.) Line 37, page 5) htributions Made didates and Other attees Receipts arest, etc.) Non-Federal and Levin Funds I Account adule H3) s (from Schedule H5) ers (add 18(a) and 18(b)) (add Lines 11(d), 16, 17, and 18(c)) lecceipts	nts Received

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
Operating Expenditures: (a) Allocated Federal/Non-Federal		Juichau Tear-to-Date		
Activity (from Schedule H4)				
(i) Federal Share	0.00	0.00		
(ii) Non-Federal Share	0.00	0.00		
(b) Other Federal Operating				
Expenditures	57.55	2604.05		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	57.55	2604.05		
Transfers to Affiliated/Other Party	01.00	255 11.50		
Committees	0.00	0.00		
Contributions to Federal Candidates/Committees and Other Political Committees	1000.00	131817.53		
Independent Expenditures	0.00	0.00		
(use Schedule E)	0.00	0.00		
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00		
Loan Repayments Made	0.00	0.00		
Loans MadeRefunds of Contributions To:	0.00	0.00		
(a) Individuals/Persons Other Than Political Committees	0.00	1250.00		
(b) Political Party Committees	0.00	0.00		
(c) Other Political Committees (such as PACs)	0.00	0.00		
(d) Total Contribution Refunds	0.00	1250.00		
(add Lines 28(a), (b), and (c))▶	7	1250.00		
Other Disbursements	0.00	1000.00		
Federal Election Activity (2 U.S.C. §431(20))				
(a) Allocated Federal Election Activity				
(from Schedule H6) (i) Federal Share	0.00	0.00		
(i) Federal Share				
(ii) "Levin" Share	0.00	0.00		
(b) Federal Election Activity Paid Entirely	0.00	0.00		
With Federal Funds	0.00	0.00		
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00		
Total Disbursements (add Lines 21(c), 22,				
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	1057.55	136671.58		
Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)				
from Line 31)	1057.55	136671.58		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

II. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	3198.00	137025.94
I. Total Contribution Refunds (from Line 28(d))	0.00	1250.00
S. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3198.00	135775.94
Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	57.55	2604.05
. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	2669.28
8. Net Operating Expenditures (subtract Line 37 from Line 36)	57.55	-65.23

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

	FOF	R LINE	NU	MBER	:	PAGE	6 C)F	9
Use separate schedule(s)	(che	eck only	or	ne)					
for each category of the Detailed Summary Page	X	11a		11b		11c	12		
		13		14		15	16		717

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) American Psychological Association Practice Organization Political Action Committee (APAPO-PAC) Full Name (Last, First, Middle Initial) Stephen S. F. Choy PhD Date of Receipt Mailing Address 1314 S King St Ste 720 02 2014 10 City State Zip Code Transaction ID: SA11AI.11651 Honolulu HI 96814-1942 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Contribution Name of Employer Occupation Self Employed Psychologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Stephen S. F. Choy PhD Date of Receipt Mailing Address 1314 S King St Ste 720 10 02 2014 City State Zip Code Transaction ID: SA11AI.11662 HI Honolulu 96814-1942 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Contribution Name of Employer Occupation Self Employed **Psychologist** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Andrea E Cole PhD Date of Receipt Mailing Address 43 Center St Ste 305 02 10 2014 City State Zip Code Transaction ID: SA11AI.11652 MA Northampton 01060 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Contribution Name of Employer Occupation Psychologist Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 200.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: **PAGE** 7 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c

Detailed Summary Page 13 14 15 16 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) American Psychological Association Practice Organization Political Action Committee (APAPO-PAC) Full Name (Last, First, Middle Initial) Mark Trevelyan Grey PhD Date of Receipt Mailing Address 5132 Silvernail Dr 2014 10 10 City Zip Code State Transaction ID: SA11AI.11637 NY Canandaigua 14424-8329 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Contribution Name of Employer Occupation Self Employed Psychologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Judith A Miller PsyD Date of Receipt Mailing Address 10380 SW Canterbury Ln 10 02 2014 City State Zip Code Transaction ID: SA11AI.11665 OR Tigard 97224-4810 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Contribution Name of Employer Occupation Self Employed **Psychologist** Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) c. Herbert Robbins PhD Date of Receipt Mailing Address 392 Central Park W Apt 4D 10 10 2014 City Zip Code State Transaction ID: SA11AI.11638 NY New York 10025-5806 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Contribution Name of Employer Occupation Self Employed Psychologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 600.00 SUBTOTAL of Receipts This Page (optional)..... 800.00 TOTAL This Period (last page this line number only).....

S ľ

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER:	PAGE 8 OF 9
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)	
	Detailed Summary Page	X 21b 27	22 23 28a 28b	24 25 26 30b
Any information copied from such Reports and Stater	I ments may not be sold or us			
or for commercial purposes, other than using the nar				
NAME OF COMMITTEE (In Full)				(
American Psychological Association	Practice Organization	Political Ad	ction Committee	e (APAPO-PAC)
Full Name (Last, First, Middle Initial)				
A. PayPal			Date of Disburse	
Mailing Address 2211 N. First St.			10 06	
City	State Zip Code			
San Jose	CA 95131		Transaction ID	: SB21B.11628
Purpose of Disbursement Monthly Credit Card Processing Fee			Amount of Each	Disbursement this Period
Candidate Name		Category/		30.00
Office Sought: House Disburse	ment For:	Type		00.00
Senate	Primary General			
President	Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial)			Date of Disburse	ment
B. PayPal			Date of Disburse	
Mailing Address 2211 N. First St.			10 1	
City San Jose	State Zip Code CA 95131		Transaction ID	: SB21B.11629
Purpose of Disbursement	93131			
Credit Card Processing Fees			Amount of Each	Disbursement this Period
Candidate Name		Category/		27.55
Office Sought: House Disburser	ment For:	Туре		7
Senate	Primary General			
President	Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial) C.			Date of Disburse	ment
			M M / D	D / Y Y Y Y
Mailing Address				
City	State Zip Code			
Purpose of Disbursement	T			
·			Amount of Each	Disbursement this Period
Candidate Name		Category/ Type		
Office Sought: House Disburser	ment For:		7	
Senate	Primary General			
President State: District:	Other (specify)			
State: District:				
SUBTOTAL of Disbursements This Page (optional)				57.55
TOTAL This Period (last page this line number only))			57.55

SCHEDULE B (FEC Form 3X)		FOR LINE I	NUMBER: PAGE 9 OF 9
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27	
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)			
American Psychological Association F	Practice Organization	Political Ac	tion Committee (APAPO-PAC)
Full Name (Last, First, Middle Initial)			
A. DONALD NORCROSS FOR CONC	GRESS		Date of Disbursement
Mailing Address PO BOX 160			10 15 2014
,	State Zip Code		Transaction ID : SB23.11627
	NJ 08108		Transaction ib . Ob25.11027
Purpose of Disbursement Contribution			Amount of Each Disbursement this Period
Candidate Name DONALD W NORCROSS		Category/ Type	1000.00
Office Sought: House Disbursem	nent For: 2014 Primary	·ype	
Full Name (Last, First, Middle Initial)			
В.			Date of Disbursement
Mailing Address			M M / D D / Y Y Y Y Y
City	State Zip Code		
Purpose of Disbursement			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	A Land Discussion and Tolica
	nent For: Primary General Other (specify)		
Full Name (Last, First, Middle Initial)			
C.			Date of Disbursement
Mailing Address			
City	State Zip Code		
Purpose of Disbursement			
Candidate Name		Category/ Type	Amount of Each Disbursement this Period
	nent For: Primary General Other (specify) ▼	Туро	
Side. District.			
SUBTOTAL of Disbursements This Page (optional)		·····•	1000.00
TOTAL This Period (last page this line number only).			1000.00