PAGE 1 / 10

**FEC** FORM 3X

# **REPORT OF RECEIPTS AND DISBURSEMENTS**

TOKWI OX	For Other Than An Au	tnorized Committee	Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
PSYCHOLOGY PA	AC OF AMERICAN PSY	CHOLOGICAL ASSO	CIATION SERVICES INC.
ADDRESS (number and stre	et) PO Box 15441		
Check if different			
than previously reported. (ACC)	Washington		DC 20003-0441
2. FEC IDENTIFICATIO	N NUMBER ▼ C	ITY 🛦	STATE ▲ ZIP CODE ▲
C C00522094		IS THIS REPORT (N)	OR AMENDED (A)
4. TYPE OF REPOR (Choose One)	Report Due On:	b 20 (M2) May 20 (	(Non-Election Year Only)
(a) Quarterly Reports:	<b>X</b> Ma	ar 20 (M3) Jun 20 (	M6) Sep 20 (M9) Dec 20 (M <sup>(Non-Election</sup> Year Only)
April 15 Quarterly Rep		or 20 (M4) Jul 20 (M	M7) Oct 20 (M10) Jan 31 (YE
July 15 Quarterly Rep	(C) 12-Day	Primary (12P)	General (12G) Runoff (12F
October 15	Report for the:	Convention (12C)	Special (12S)
Quarterly Rep January 31 Year-End Rep	Flora	ion on	/ Y Y Y Y in the State of
July 31 Mid-Y Report (Non-e Year Only) (N	dear (d) 30-Day POST-Election	General (30G)	Runoff (30R) Special (30
Termination R (TER)		ion on	in the State of
5. Covering Period	02 01 7 2022	through 0.	2 28 / 28 / Y 2022
I certify that I have examine Type or Print Name of Tre	ned this Report and to the best of Mason, David, , ,	of my knowledge and belief it	is true, correct and complete.
Type of Time Name of The			
Signature of Treasurer	Mason, David, , ,	[Electronically Filed]	Date 03 / 03 / 2022
NOTE: Submission of false,	erroneous, or incomplete informati	on may subject the person sign	ing this Report to the penalties of 52 U.S.C. § 30
Office Use Only			FEC FORM 3X Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Report Covering the Period: From: 02	01 2022 To:	02 28 2022
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
(a) Cash on Hand January 1, 2022		190568.76
(b) Cash on Hand at Beginning of Reporting Period	213685.09	
(c) Total Receipts (from Line 19)	3719.67	27336.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	217404.76	217904.76
Total Disbursements (from Line 31)	11100.00	11600.00
Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	206304.76	206304.76
Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
D. 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 multicand	didate 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. 05/2016)

Write or Type Committee Name

#### PSYCHOLOGY PAC OF AMERICAN PSYCHOLOGICAL ASSOCIATION SERVICES INC.

R		2022 To:	02 28 2022				
	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)	2000.00	19497.00				
	(ii) Unitemized	1719.67	5839.00				
	(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	3719.67	25336.00				
	(b) Political Party Committees	0.00	0.00				
	(c) Other Political Committees (such as PACs)	0.00	0.00				
12.	11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)  Transfers From Affiliated/Other	3719.67	25336.00				
	Party Committees	0.00	0.00				
13.	All Loans Received	0.00	0.00				
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00				
16.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00				
17	to Federal Candidates and Other Political Committees Other Federal Receipts	0.00	2000.00				
	(Dividends, Interest, etc.)	0.00	0.00				
	(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))▶	3719.67	27336.00				
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	3719.67	27336.00				

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
0.00	0.00		
0.00	0.00		
0.00	0.00		
0.00	0.00		
0.00	0.00		
0.00	0.00		
10000.00	10000.00		
200			
4 4	0.00		
0.00	0.00		
0.00	0.00		
0.00	0.00		
1100.00	1600.00		
0.00	0.00		
0.00	0.00		
1100.00	1600.00		
0.00	0.00		
20))			
0.00	0.00		
0.00	0.00		
0.00	0.00		
0.00	0.00		
11100.00	11600.00		
11100.00	11600.00		
	O.00		

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)	of Dispursements	Page <b>5</b>		
III. 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)	3719.67	25336.00		
4. Total Contribution Refunds (from Line 28(d))	1100.00	1600.00		
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2619.67	23736.00		
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	0.00		
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00		
8. 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:					PAGE	6	OF		10		
(check only one)											
		X	11a		11b		11c	12	2		
			13		14		15	16	6		17

	g the name and address of any political committee to	
NAME OF COMMITTEE (In Full) PSYCHOLOGY PAC OF AN	MERICAN PSYCHOLOGICAL ASSO	CIATION SERVICES INC.
Full Name of Individual (Last, First, Midd Borgida, Eugene, , Dr, PhD Mailing Address 75 E River Rd	le Initial) or Full Organization Name	Date of Receipt
Dept OF	·	02 14 2022
City Minneapolis	State Zip Code MN 55455-0366	Transaction ID : ACC8F1A7B11B54960A01  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer (for Individual) University of Minnesota	Occupation (for Individual) Professor of Psychology & Law	Memo Item
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
Full Name of Individual (Last, First, Midd Bartoshuk, Linda, M, Prof,  Mailing Address 5200 Sw 25th Blvd Unit 1	· •	Date of Receipt
City Gainesville	State         Zip Code           FL         32608-3996	Transaction ID : AFC26D9A82C3149A5BA9  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer (for Individual) university of florida	Occupation (for Individual) Professor	Memo Item
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name of Individual (Last, First, Midd Diaz-Granados, Jim, , Dr.,	le Initial) or Full Organization Name	Date of Receipt
Mailing Address 6507 Cavalier Dr		02 20 2022
City Alexandria	State         Zip Code           VA         22307-1306	Transaction ID : A90919149A27A4177A7D  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer (for Individual) APA	Occupation (for Individual) Executive	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional	ll	1000.00
TOTAL This Period (last page this line num		

# 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		10		
(check only one)											
		X	11a		11b		11c	12	2		
			13		14		15	16	6		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.

or	for commercial purposes, other than using the	name and add	dress of any political committee to	o solicit contributions from such committee.
$\setminus$	NAME OF COMMITTEE (In Full) PSYCHOLOGY PAC OF AMER	ICAN PS	CHOLOGICAL ASSO	CIATION SERVICES INC.
A.	Full Name of Individual (Last, First, Middle Initial AUERBACH, ANITA, L, Dr., PhD  Mailing Address Director  Commowealth Psychological Asterial City  Mclean  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  Commonwealth Psychological Associates  Receipt For:  Primary General	ssoc P State VA  C Occup Clinica	Zip Code 22101-4549  pation (for Individual) al Psychologist ear-to-Date ▼	Date of Receipt    M
В.	Other (specify) ▼  Full Name of Individual (Last, First, Middle Initimular Murphy, Leah, A, Dr,  Mailing Address 1960 S Easton Rd  City  Doylestown  FEC ID number of contributing federal political committee.  Name of Employer (for Individual) Private Practice Independent Contracto  Receipt For:  Primary General  Other (specify) ▼	State PA Occup	Zip Code 18901-2313  Dation (for Individual) nologist (children, adolescents, fear-to-Date   500.00	Date of Receipt    Date of Receipt
C.	Full Name of Individual (Last, First, Middle Initi  Mailing Address  City  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  Receipt For:  Primary General Other (specify)	State C Occup	zip Code  Zip Code  pation (for Individual)  ear-to-Date ▼	Date of Receipt  Amount of Each Receipt this Period  Memo Item
	SUBTOTAL of Receipts This Page (optional)		<b>&gt;</b>	1000.00
Т	TOTAL This Period (last page this line number o	nlv)		2000.00

## S 17

SCHEDULE B (FEC Form 3X)	lle:	water ask - did - ( )	FOR LINE NUMBER: PAGE 8 OF 10				
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(check only	one) 22 <b>X</b> 23 26 27			
		Summary Page	210 28a	28b 28c 29 30b			
Any information copied from such Reports and State	ments mav i	not be sold or use					
or for commercial purposes, other than using the na							
NAME OF COMMITTEE (In Full)		ALIA: A =:=					
PSYCHOLOGY PAC OF AMERIC	AN PSY	CHOLOGIC	AL ASSO	CIATION SERVICES INC.			
Full Name (Last, First, Middle Initial)							
A. Paul Tonko For Congress				Date of Disbursement			
Mailing Address 011 Central Avenue #221				02 14 2022			
Mailing Address 911 Central Avenue #221				02 14 2022			
City	State	Zip Code		FEC Identification Number			
Albany Purpose of Disbursement	NY	12206		000450040			
Contribution to Committee			· · · ·	C C00450049			
Candidate Name			Category/	Transaction ID: BF724688717  Amount of Each Disbursement this Period			
Tonko, Paul, D., Rep.,			Type				
	ment For: 2			2500.00			
Senate x	Primary	General					
State: NY District: 20	Other (spec	∍iiy) ♥		Memo Item			
Full Name (Last, First, Middle Initial)							
B. JUDY CHU FOR CONGRESS				Date of Disbursement			
				M = M / D = D / Y = Y = Y			
Mailing Address 1531 Purdue Avenue	02 14 2022						
City	State	Zip Code		FFO Identification Number			
Los Angeles	CA	91436		FEC Identification Number			
Purpose of Disbursement Contribution to Committee				C C00458125			
Candidate Name				Transaction ID : BFFD8256537			
Chu, Judy, , Rep.,			Category/ Type	Amount of Each Disbursement this Period			
	ment For: 2	2022	. , , , ,	2500.00			
Senate	Primary	General					
President	Other (spec	cify)		Memo Item			
State: CA District: 27				<del></del>			
Full Name (Last, First, Middle Initial)  C. PEOPLE FOR PATTY MURRAY				Date of Disbursement			
				M M / D D / Y Y Y Y			
Mailing Address 1602 Belle View Blvd				02 14 2022			
#510 City	State	Zip Code					
Alexandria	VA	98124		FEC Identification Number			
Purpose of Disbursement	I			C C00257642			
Contribution to Committee				Transaction ID : B60E06CE04			
Candidate Name Murray Patty Sen			Category/	Amount of Each Disbursement this Period			
Murray, Patty, , Sen.,  Office Sought:   House   Disburse	ement For: 2	2022	Туре	3500.00			
Senate	Primary	General		4 4			
President	Other (spec			Memo Item			
State: WA District:	-			Wienie Rein			
				0500.00			
SUBTOTAL of Disbursements This Page (optional).			·····•	8500.00			
TOTAL This Period (last page this line number only	<i>(</i> )						

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SCHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 9 OF 1				
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	(check only	nly one)			
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Г			28a	28b 28c 29 30b			
Any information copied from such Reports and State or for commercial purposes, other than using the national commercial purposes.							
NAME OF COMMITTEE (In Full) PSYCHOLOGY PAC OF AMERIC	AN PSY	CHOLOGIC	AL ASSOC	CIATION SERVICES INC.			
Full Name (Last, First, Middle Initial)							
A. PEOPLE FOR PATTY MURRAY				Date of Disbursement			
Mailing Address 1602 Belle View Blvd #510		1		02 14 2022			
City Alexandria	State VA	Zip Code 98124		FEC Identification Number			
Purpose of Disbursement Contribution to Committee		00.21		C C00257642			
Candidate Name			Category/	Transaction ID : B27C09FBFF Amount of Each Disbursement this Period			
Murray, Patty, , Sen.,  Office Sought:   House   Disburse			Type	1500.00			
Office Sought: House Disburse	ment For: 2 Primary	2022 General		1300.00			
President State: WA District:	Other (spec	cify) 🔻		Memo Item			
Full Name (Last, First, Middle Initial)							
В.				Date of Disbursement			
Mailing Address				M M / D D / Y Y Y Y			
City	State	Zip Code		FEC Identification Number			
Purpose of Disbursement			· · · ·	C			
Candidate Name			Category/ Type	Amount of Each Disbursement this Period			
	ment For:		71	4 1 4 1 4			
Senate President	Primary Other (spec	General Cify)		Memo Item			
State: District:							
Full Name (Last, First, Middle Initial)  C.				Date of Disbursement			
Mailing Address				M M / D D / Y Y Y Y			
City	State	Zip Code		FEC Identification Number			
Purpose of Disbursement				C			
Candidate Name			Category/ Type	Amount of Each Disbursement this Period			
Office Sought: House Disburse Senate	ment For:	General					
President State: District:	Other (spec			Memo Item			
				1500.00			
SUBTOTAL of Disbursements This Page (optional).			·····•	1300.00			
TOTAL This Period (last page this line number only	·)			10000.00			

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S	CHEDULE B (FEC Form 3X)							
ΙT	EMIZED DISBURSEMENTS		Use separate schedule(s) (ch		(check only one)			
			for each category of the Detailed Summary Page		22 23 26 27			
_				<b>★</b> 28a	28b 28c 29 30b			
	ny information copied from such Reports and State for commercial purposes, other than using the nar							
	NAME OF COMMITTEE (In Full)							
$ \rangle$	PSYCHOLOGY PAC OF AMERIC	AN PSY	CHOLOGIC	AL ASSOC	CIATION SERVICES INC.			
<u></u>	Full Name (Last, First, Middle Initial)							
Α.	Ferguson, Debra, K, Dr.,				Date of Disbursement			
	Mailing Address 11130 Fairfax Blvd				02 01 2022			
	Ste 305		T					
	City Fairfax	State VA	Zip Code 22030-5035		FEC Identification Number			
	Purpose of Disbursement		22000 0000		С			
	Refund				Transaction ID : BF572F65799			
	Candidate Name			Category/	Amount of Each Disbursement this Period			
	Office Sought: House Disburse	ment For:		Type	500.00			
	Senate Disburse	Primary	General		7 7 7			
	President	Other (spec	cify) ▼		Memo Item			
_	State: District:							
B	Full Name (Last, First, Middle Initial) Herz, Gordon, I, Dr, PhD.				Date of Disbursement			
	Herz, Gordon, I, DI, FIID.				M M / D D / Y Y Y Y			
	Mailing Address 478 Commerce Dr Ste 204	02 04 2022						
	City	State WI	Zip Code		FEC Identification Number			
	Madison Purpose of Disbursement	VVI	53719-5099		С			
	Partial Refund of 12/31/2021 contribution				Transaction ID : B4895849C02			
	Candidate Name			Category/	Amount of Each Disbursement this Period			
	Office Sought: House Disburse	ment For:		Туре	475.00			
	Senate	Primary	General		7 7			
	President	Other (spec	cify)		Memo Item			
_	State: District:							
C.	Full Name (Last, First, Middle Initial) Unmacht, John, Joseph, Dr.,				Date of Disbursement			
	Moiling Address 4000 NAM FEET CO.				M M / D D / Y Y Y Y			
	Mailing Address 4300 N MILLER RD STE 110				02 28 2022			
	City	State	Zip Code		FEC Identification Number			
	SCOTTSDALE Purpose of Disbursement	AZ	85251-3638		С			
	Refund				Transaction ID : B8A4F5C32C			
	Candidate Name			Category/	Amount of Each Disbursement this Period			
	Office Sought: House Disburse	ment For:		Туре	125.00			
	Senate Disburse	Primary	General		7 7			
	President	Other (spec	cify) 🔻		Memo Item			
_	State: District:				Ц			
,	SUBTOTAL of Disbursements This Page (optional).				1100.00			
F	ODITIONE OF DISDUISEMENTS THIS Page (OPHONAI).	•••••						
т	OTAL This Period (last page this line number only	·)			1100.00			