

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

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

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 M M M / D D D / Y Y Y Y Y Y in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period 07 / 01 / 2015 through 12 / 31 / 2015

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 David Satterfield

Signature of Treasurer David Satterfield [Electronically Filed] Date 01 / 25 / 2016

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 (Rev. 02/2003)

Page 2

Write or Type Committee Name

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

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="2015"/>		<input type="text" value="157571.16"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="112961.34"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="53698.27"/>	<input type="text" value="81654.07"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="166659.61"/>	<input type="text" value="239225.23"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="23027.85"/>	<input type="text" value="95593.47"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="143631.76"/>	<input type="text" value="143631.76"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

Write or Type Committee Name

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

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).....	16040.00	29990.00
(ii) Unitemized	36358.00	49383.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)..... ▶	52398.00	79373.50
(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)	52398.00	79373.50
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).....	1300.27	2280.57
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))..... ▶	53698.27	81654.07
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	53698.27	81654.07

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	1227.85	2293.47
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1227.85	2293.47
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	21800.00	93300.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (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	0.00
30. Federal Election Activity (2 U.S.C. §431(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)) ..	23027.85	95593.47
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	23027.85	95593.47

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	52398.00	79373.50
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	52398.00	79373.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1227.85	2293.47
37. Offsets to Operating Expenditures (from Line 15, page 3).....	1300.27	2280.57
38. Net Operating Expenditures (subtract Line 37 from Line 36)	-72.42	12.90

**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 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<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)
American Psychological Association Practice Organization Political Action Committee (APAPO-PAC)

A. Dr. Helen L Coons PhD
 Full Name (Last, First, Middle Initial)
 Mailing Address 410 Acoma St
 Unit 305
 City Denver State CO Zip Code 80204-5150
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: APA Division 38 - Health Psychology
 Occupation: Clinical Health Psychologists
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt: 08 / 06 / 2015
Transaction ID : ACA418FFAA25A4B1FAB3
 Amount of Each Receipt this Period: **250.00**

B. Dr. Sharon L Berry PhD
 Full Name (Last, First, Middle Initial)
 Mailing Address Dept of Psychology
 Children's Hosp & Clinics of Mn
 City Minneapolis State MN Zip Code 55404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Children's Hospital
 Occupation: Psychologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt: 08 / 06 / 2015
Transaction ID : AAAC37807D80B4BC88B1
 Amount of Each Receipt this Period: **750.00**

C. Gilbert H Newman PhD
 Full Name (Last, First, Middle Initial)
 Mailing Address 2728 Durant Ave
 City Berkeley State CA Zip Code 94704-1725
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Wright Institute
 Occupation: Dean
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **765.00**

Date of Receipt: 08 / 06 / 2015
Transaction ID : A675F42FE0D0340D38B9
 Amount of Each Receipt this Period: **365.00**

SUBTOTAL of Receipts This Page (optional).....	1365.00
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 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
American Psychological Association Practice Organization Political Action Committee (APAPO-PAC)

A. Dr C Gerald O'Brien Jr
 Full Name (Last, First, Middle Initial)
 Mailing Address 640 Lakeland East Dr
 Ste F
 City Flowood State MS Zip Code 39232-9778
 FEC ID number of contributing federal political committee. **C**
 Name of Employer American Psychological Association
 Occupation Psychologist
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 06 / 2015
Transaction ID : A98014B896D53407D97D
 Amount of Each Receipt this Period
 500.00

B. Dr. Lynn F Bufka PhD
 Full Name (Last, First, Middle Initial)
 Mailing Address 12902 Ruxton Rd
 City Silver Spring State MD Zip Code 20904-5278
 FEC ID number of contributing federal political committee. **C**
 Name of Employer American Psychological Association
 Occupation Psychologist
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 06 / 2015
Transaction ID : A7074B97E1C1D49718EA
 Amount of Each Receipt this Period
 250.00

C. JD Douglas Walter JD
 Full Name (Last, First, Middle Initial)
 Mailing Address 2574 Huey Ave
 City Drexel Hill State PA Zip Code 19026-1318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer American Psychological Association
 Occupation Attorney
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 06 / 2015
Transaction ID : A0907CF520D094BBA822
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	800.00
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 8 OF 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Psychological Association Practice Organization Political Action Committee (APAPO-PAC)

A. Dr. Jo Linder-Crow PhD
 Full Name (Last, First, Middle Initial)
 Mailing Address 1231 I St
 Ste 204
 City Sacramento State CA Zip Code 95814-2933
 FEC ID number of contributing federal political committee. **C**
 Name of Employer California Psychological Association Occupation CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 06 / 2015
Transaction ID : A84F14F9DB1274FA1B27
 Amount of Each Receipt this Period
 200.00

B. Dr. Lindsey Renee Buckman PsyD
 Full Name (Last, First, Middle Initial)
 Mailing Address 818 E Osborn Rd
 Ste 107
 City Phoenix State AZ Zip Code 85014-5218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Arizona Psychological Association Occupation Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 06 / 2015
Transaction ID : A983F180B16CB4C6C94B
 Amount of Each Receipt this Period
 150.00

c. Dr Dea C Silbertrust PhD
 Full Name (Last, First, Middle Initial)
 Mailing Address 14 S Bryn Mawr Ave
 Ste 203
 City Bryn Mawr State PA Zip Code 19010-3216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Employed Occupation Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 06 / 2015
Transaction ID : AFA3CEA3501074A5C89F
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 850.00
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 9 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
American Psychological Association Practice Organization Political Action Committee (APAPO-PAC)

A. Dr Robin McLeod PhD
 Full Name (Last, First, Middle Initial)
 Mailing Address 7582 Currell Blvd
 Ste 108
 City Woodbury State MN Zip Code 55125-8210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Minnesota Psychological Association Occupation Psychologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1250.00**

Date of Receipt **08 / 06 / 2015**
Transaction ID : A22E1FB7C5A8A4AAD879
 Amount of Each Receipt this Period **150.00**

B. Dr. Kathleen Sitley Brown PhD
 Full Name (Last, First, Middle Initial)
 Mailing Address 2743 1st St
 Apt 1105
 City Fort Myers State FL Zip Code 33916-1869
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Committee for the Advancement of Profe Occupation Rehabilitation Psychologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **08 / 07 / 2015**
Transaction ID : A59A26E65042A4D49907
 Amount of Each Receipt this Period **250.00**

C. Dr Roy Y Aranda
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 Waterford Dr
 City Wheatley Hts State NY Zip Code 11798-1110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer New York State Psychological Associati Occupation Psychologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt **08 / 07 / 2015**
Transaction ID : A9ED39FF9C93B47148D7
 Amount of Each Receipt this Period **500.00**

SUBTOTAL of Receipts This Page (optional)..... **900.00**
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 10 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
American Psychological Association Practice Organization Political Action Committee (APAPO-PAC)

A. Dr Virginia Waters PhD
 Full Name (Last, First, Middle Initial)
 Mailing Address 8 Central Ave
 City Cranford State NJ Zip Code 07016-2103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer New York State Psychological Associati Occupation Psychology
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 07 / 2015
Transaction ID : A534907BAC38542DC966
 Amount of Each Receipt this Period
 500.00

B. Dr. Katherine C Nordal PhD
 Full Name (Last, First, Middle Initial)
 Mailing Address 25015 Dunterry Ct Apt 1109
 City Gaithersburg State MD Zip Code 20882-3605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer American Psychological Association Pra Occupation Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 07 / 2015
Transaction ID : A95EF8A1A10D9409FB2D
 Amount of Each Receipt this Period
 500.00

c. Dr. Mark Kamena PhD
 Full Name (Last, First, Middle Initial)
 Mailing Address 11 Sagebrush Ct # 1B
 City San Rafael State CA Zip Code 94901-1591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer California Psychological Association Occupation Licensed Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2015
Transaction ID : AEDFC83ADFC5544FE9A2
 Amount of Each Receipt this Period
 500.00

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) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 35
<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)
American Psychological Association Practice Organization Political Action Committee (APAPO-PAC)

A. Jennifer S Johnson
Full Name (Last, First, Middle Initial)
Mailing Address 750 1st St NE
City Washington State DC Zip Code 20002-4241
FEC ID number of contributing federal political committee. **C**
Name of Employer APAPO Occupation APAPO-PAC Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 09 / 2015
Transaction ID : A145F104B9A6A4DFA925
Amount of Each Receipt this Period 500.00

B. Karen Studwell
Full Name (Last, First, Middle Initial)
Mailing Address 6508 Cygnet Dr
City Alexandria State VA Zip Code 22307-1312
FEC ID number of contributing federal political committee. **C**
Name of Employer APA Occupation Lobbyist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 375.00

Date of Receipt 08 / 20 / 2015
Transaction ID : A09E25D6EC92A48ADA3B
Amount of Each Receipt this Period 365.00

c. Dr Kim Marie Dell'Angela PhD
Full Name (Last, First, Middle Initial)
Mailing Address 252 Home Ave
City Oak Park State IL Zip Code 60302-3102
FEC ID number of contributing federal political committee. **C**
Name of Employer TCSPP Occupation Clintologist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 20 / 2015
Transaction ID : AF8BCD0B81C3644BEB58
Amount of Each Receipt this Period 150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1015.00
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 12 OF 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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)
American Psychological Association Practice Organization Political Action Committee (APAPO-PAC)

A. Ronald E Fox PhD
Full Name (Last, First, Middle Initial)

Mailing Address 303 S Carolina Ave SE

City Washington State DC Zip Code 20003-4213

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 02 / 2015
Transaction ID : A2CF0C803CFE04EBC823

Amount of Each Receipt this Period 600.00

B. Dr. Jim Diaz-Granados
Full Name (Last, First, Middle Initial)

Mailing Address Dept Of Psychology & Neuroscience
Baylor Univ

City Waco State TX Zip Code 76798

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

Name of Employer American Psychological Association Occupation Executive Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 16 / 2015
Transaction ID : A543A18398CEC4F238D2

Amount of Each Receipt this Period 450.00

C. Dr Louise Ann Douce PhD
Full Name (Last, First, Middle Initial)

Mailing Address 4707 Blue Church Rd

City Sunbury State OH Zip Code 43074-9519

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

Name of Employer APA/APAAPO Board of Directors Occupation Psychologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 10 / 18 / 2015
Transaction ID : A0395A3B8E93B414FA4F

Amount of Each Receipt this Period 150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1200.00

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 13 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
American Psychological Association Practice Organization Political Action Committee (APAPO-PAC)

A. Dr. Jennifer F Kelly PhD
 Full Name (Last, First, Middle Initial)
 Mailing Address 2325 Log Cabin Dr SE
 Ste 105
 City Atlanta State GA Zip Code 30339-6742
 Name of Employer APA/APAAPO Board of Directors Occupation Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 18 / 2015
Transaction ID : A4B2283A59FBF4C8BBA0
 Amount of Each Receipt this Period 100.00

B. Gilbert H Newman PhD
 Full Name (Last, First, Middle Initial)
 Mailing Address 2728 Durant Ave
 City Berkeley State CA Zip Code 94704-1725
 Name of Employer Wright Institute Occupation Dean
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 865.00

Date of Receipt 10 / 18 / 2015
Transaction ID : A7361A5BEB1924E00B1A
 Amount of Each Receipt this Period 100.00

C. Dr. Kevin David Arnold PhD
 Full Name (Last, First, Middle Initial)
 Mailing Address 4624 Sawmill Rd
 City Columbus State OH Zip Code 43220-2247
 Name of Employer CCBT Occupation Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 20 / 2015
Transaction ID : A14BECDF A45FA4D97885
 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
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 14 OF 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Psychological Association Practice Organization Political Action Committee (APAPO-PAC)

A. David R Cox PhD
 Full Name (Last, First, Middle Initial)
 Mailing Address 600 Market St
 Ste 201
 City Chapel Hill State NC Zip Code 27516-4056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Employed
 Occupation Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2015
Transaction ID : AE9923E86E711444A9C2
 Amount of Each Receipt this Period
 150.00

B. Martin Gerard Wunsch PhD
 Full Name (Last, First, Middle Initial)
 Mailing Address 1728 Brentwood Dr
 # 487
 City Troy State MI Zip Code 48098-2630
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Employed
 Occupation Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2015
Transaction ID : A287B65B43F154A51AF4
 Amount of Each Receipt this Period
 400.00

C. Dr Mary E Halpin PhD
 Full Name (Last, First, Middle Initial)
 Mailing Address 505 N Lake Shore Dr
 Apt 6005
 City Chicago State IL Zip Code 60611-6452
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Employed
 Occupation Clinical Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2015
Transaction ID : A5E1F97911FF942F38F5
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional).....▶	1050.00
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 15 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
American Psychological Association Practice Organization Political Action Committee (APAPO-PAC)

A. Marc Antony Gironda PsyD
 Full Name (Last, First, Middle Initial)
 Mailing Address 37 Lenape Trl
 City Chatham State NJ Zip Code 07928-1812
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Bounty Healthcare Center Occupation Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 10 / 24 / 2015
Transaction ID : A6E0100D8C0ED42F19FF
 Amount of Each Receipt this Period
 225.00

B. Dr Alexander Hecht Levi PhD
 Full Name (Last, First, Middle Initial)
 Mailing Address 211 Central Park W # 21F
 City New York State NY Zip Code 10024-6020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Employed Occupation Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 10 / 25 / 2015
Transaction ID : AC28333BA6102431482B
 Amount of Each Receipt this Period
 250.00

C. Dr Reuben J Silver PhD
 Full Name (Last, First, Middle Initial)
 Mailing Address 8137 Blue Heron Dr E # C202
 City Wilmington State NC Zip Code 28411-7639
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Employed Occupation Pyschologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 10 / 26 / 2015
Transaction ID : A3D9FCAB0434549D798F
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 975.00
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 16 OF 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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)
American Psychological Association Practice Organization Political Action Committee (APAPO-PAC)

A. Dr Leah D Dick PhD
Full Name (Last, First, Middle Initial)

Mailing Address 1001 SW B Ave
Ste 120

City Lawton State OK Zip Code 73501-3967

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

Name of Employer Self Employed
Occupation Psychologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
10 / 26 / 2015
Transaction ID : **AFFD75BDC9CC4400801**

Amount of Each Receipt this Period
300.00

B. Charles E Burt PhD
Full Name (Last, First, Middle Initial)

Mailing Address 1800 Michael Faraday Dr
Ste 206

City Reston State VA Zip Code 20190-5312

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

Name of Employer Self Employed
Occupation Psychologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
11 / 01 / 2015
Transaction ID : **A5E340068D48044C487D**

Amount of Each Receipt this Period
400.00

C. Elizabeth A Garrison PhD
Full Name (Last, First, Middle Initial)

Mailing Address 4131 Spicewood Springs Rd
Ste P2

City Austin State TX Zip Code 78759-8664

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

Name of Employer Self Employed
Occupation Psychologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
11 / 02 / 2015
Transaction ID : **A0DD85D7EC35B4912B54**

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
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 17 OF 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Psychological Association Practice Organization Political Action Committee (APAPO-PAC)

A. Seymour Z Gross PhD
 Full Name (Last, First, Middle Initial)
 Mailing Address 1941 Drew Ave S
 City Minneapolis State MN Zip Code 55416-3617
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Minnesota Psychological Association Occupation Senior Clinical Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 11 / 09 / 2015
Transaction ID : A2EAB0BD71E42473EAB2
 Amount of Each Receipt this Period
 500.00

B. Janine A Tiago De Melo PhD
 Full Name (Last, First, Middle Initial)
 Mailing Address 51 7th Ave S Apt 5C
 City New York State NY Zip Code 10014-6705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Employed Occupation Clinical Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 11 / 18 / 2015
Transaction ID : AECEF51817E1F4D77B16
 Amount of Each Receipt this Period
 220.00

c. Dr Suzanne M Zilber PhD
 Full Name (Last, First, Middle Initial)
 Mailing Address Catalyst Counslg Plc 600 5th St Ste 302
 City Ames State IA Zip Code 50010-6072
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Employed Occupation Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 11 / 19 / 2015
Transaction ID : AD06F0B1648D044018B7
 Amount of Each Receipt this Period
 300.00

SUBTOTAL of Receipts This Page (optional).....▶	1020.00
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 19 OF 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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)
American Psychological Association Practice Organization Political Action Committee (APAPO-PAC)

A. Dr Mary E Halpin PhD
 Full Name (Last, First, Middle Initial)
 Mailing Address 505 N Lake Shore Dr
 Apt 6005
 City Chicago State IL Zip Code 60611-6452
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Employed
 Occupation Clinical Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 29 / 2015
Transaction ID : A37A4F17D22CC4F45A0F
 Amount of Each Receipt this Period
 500.00

B. Bonnie Markham PsyD
 Full Name (Last, First, Middle Initial)
 Mailing Address 52 Pearl St
 City Metuchen State NJ Zip Code 08840-1831
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 APA/APAAPO Board of Directors Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2015
Transaction ID : ADCF57C2B79344D3BBEA
 Amount of Each Receipt this Period
 500.00

c. Dr Rosemarie Ciccarello PhD
 Full Name (Last, First, Middle Initial)
 Mailing Address 33 Plymouth St
 Ste 208
 City Montclair State NJ Zip Code 07042-2677
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self Employed Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2015
Transaction ID : A7284C700F86E4B59832
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	1250.00
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 20 OF 35
	<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)
American Psychological Association Practice Organization Political Action Committee (APAPO-PAC)

A. Faith A Benton PhD
 Full Name (Last, First, Middle Initial)
 Mailing Address 30 Vine St
 City Winchester State MA Zip Code 01890-1823
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Employed Occupation Psychologist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2015
Transaction ID : A1C0905182E094045AE4
 Amount of Each Receipt this Period
 400.00

B. MaryBeth M Cresci PhD
 Full Name (Last, First, Middle Initial)
 Mailing Address 10 Pineapple St
 City Brooklyn State NY Zip Code 11201-1615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Employed Occupation Psychologist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2015
Transaction ID : AD81AA392D20149A78B6
 Amount of Each Receipt this Period
 225.00

C. Dr Diane K Klisz-Karle PhD
 Full Name (Last, First, Middle Initial)
 Mailing Address 36385 Harper Ave
 City Clinton Township State MI Zip Code 48035-2958
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Michael Vredevoogd, P.C. Occupation Psychologist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2015
Transaction ID : A478CDB66B59C49A7871
 Amount of Each Receipt this Period
 240.00

SUBTOTAL of Receipts This Page (optional).....	865.00
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 21 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
American Psychological Association Practice Organization Political Action Committee (APAPO-PAC)

A. Dr Sandra L Adams PhD
 Full Name (Last, First, Middle Initial)
 Mailing Address 6746 E Bay Blvd
 City Navarre State FL Zip Code 32566-8002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Employed
 Occupation Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2015
Transaction ID : A64E4021734374A70AB7
 Amount of Each Receipt this Period
 110.00

B. Dr Carol Watkins Tierney PhD
 Full Name (Last, First, Middle Initial)
 Mailing Address 4770 Baseline Rd Ste 300
 City Boulder State CO Zip Code 80303-2669
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Employed
 Occupation Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 18 / 2015
Transaction ID : AED43F9FB2A554B53852
 Amount of Each Receipt this Period
 110.00

C. Kenneth Neil Siegel PhD
 Full Name (Last, First, Middle Initial)
 Mailing Address 2869 Motor Ave
 City Los Angeles State CA Zip Code 90064-3439
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Employed
 Occupation Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 21 / 2015
Transaction ID : A669E442961D74F6D8EC
 Amount of Each Receipt this Period
 230.00

SUBTOTAL of Receipts This Page (optional).....▶	450.00
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: PAGE 22 OF 35
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Psychological Association Practice Organization Political Action Committee (APAPO-PAC)

A. Full Name (Last, First, Middle Initial)
Patricia Arredondo

Mailing Address 1717 S Prairie Ave
 Apt 1910

City Chicago State IL Zip Code 60616-4346

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

Name of Employer The Chicago School Occupation University Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 21 / 2015

Transaction ID : ABEC0FD17800E4B79989

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	16040.00

**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 23 OF 35
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
American Psychological Association Practice Organization Political Action Committee (APAPO-PAC)

Full Name (Last, First, Middle Initial)
A. American Psychological Association Practice Organization (APAPO)

Mailing Address 750 1st St NE

City Washington State DC Zip Code 20002-4241

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1073.17

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2015

Transaction ID : A5B00ABF1C7124984A62

Amount of Each Receipt this Period
92.87

Offset for June 2015 Administrative Fees

Full Name (Last, First, Middle Initial)
B. American Psychological Association Practice Organization (APAPO)

Mailing Address 750 1st St NE

City Washington State DC Zip Code 20002-4241

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1103.17

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015

Transaction ID : AE65F7985BE93454F910

Amount of Each Receipt this Period
30.00

Offset for July 2015 Administrative Fees

Full Name (Last, First, Middle Initial)
C. American Psychological Association Practice Organization (APAPO)

Mailing Address 750 1st St NE

City Washington State DC Zip Code 20002-4241

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1709.92

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2015

Transaction ID : AC37C4C989ADB4EE88C0

Amount of Each Receipt this Period
606.75

Offset for August 2015 Administrative Fees

SUBTOTAL of Receipts This Page (optional).....▶	729.62
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 24 OF 35
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
American Psychological Association Practice Organization Political Action Committee (APAPO-PAC)

Full Name (Last, First, Middle Initial)
A. American Psychological Association Practice Organization (APAPO)

Mailing Address 750 1st St NE

City Washington State DC Zip Code 20002-4241

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1747.42

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2015
Transaction ID : A0134283EBE0D4E1F809

Amount of Each Receipt this Period
37.50

Offset for September 2015 Administrative Fees

Full Name (Last, First, Middle Initial)
B. American Psychological Association Practice Organization (APAPO)

Mailing Address 750 1st St NE

City Washington State DC Zip Code 20002-4241

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1898.92

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 31 / 2015
Transaction ID : A138098E2E7AF4B30B09

Amount of Each Receipt this Period
151.50

Offset for October 2015 Administrative Fees

Full Name (Last, First, Middle Initial)
C. American Psychological Association Practice Organization (APAPO)

Mailing Address 750 1st St NE

City Washington State DC Zip Code 20002-4241

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2108.92

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 30 / 2015
Transaction ID : A5FEF38888CA345A4846

Amount of Each Receipt this Period
210.00

Offset for November 2015 Administrative Fees

SUBTOTAL of Receipts This Page (optional).....	399.00
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: PAGE 25 OF 35
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Psychological Association Practice Organization Political Action Committee (APAPO-PAC)

A. Full Name (Last, First, Middle Initial)
American Psychological Association Practice Organization (APAPO)

Mailing Address 750 1st St NE

City Washington State DC Zip Code 20002-4241

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2280.57

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : A042AA51505FB4F649A9

Amount of Each Receipt this Period
171.65

Offset for December 2015 Administrative Fees

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	171.65
TOTAL This Period (last page this line number only).....▶	1300.27

**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"/> 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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. PayPal

Mailing Address 2211 N 1st St

City San Jose State CA Zip Code 95131-2021

Purpose of Disbursement
Monthly Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 03 / 2015

Transaction ID : BFAC73F66EA0C42BA9A6

Amount of Each Disbursement this Period

30.00

B. CampaignContribution.com

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
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2015

Transaction ID : B2CBC076130C14621926

Amount of Each Disbursement this Period

606.75

C. CampaignContribution.com

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
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2015

Transaction ID : B6869451844CD411FA28

Amount of Each Disbursement this Period

37.50

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

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

674.25

**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"/> 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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. CampaignContribution.com

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
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 31 / 2015

Transaction ID : B940262280D1A4DE4850

Amount of Each Disbursement this Period

151.50

Full Name (Last, First, Middle Initial)

B. CampaignContribution.com

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
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 30 / 2015

Transaction ID : BBEA82977476E4DCA8AC

Amount of Each Disbursement this Period

160.45

Full Name (Last, First, Middle Initial)

C. CampaignContribution.com

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
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : B7E51CE4643684F2BA41

Amount of Each Disbursement this Period

171.65

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

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

483.60

1157.85

**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"/> 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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. FRIENDS OF SCHUMER

Mailing Address 192 LEXINGTON AVENUE SUITE 1001

City NEW YORK State NY Zip Code 10016

Purpose of Disbursement

Candidate Name

Sen. Charles E. Schumer

Category/Type

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: NY District:

Date of Disbursement

MM / DD / YYYY
07 / 14 / 2015

Transaction ID : B011BE5B78D4E4A37A31

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Friends of Michelle

Mailing Address 7240 Evans Mill Road

City McLean State VA Zip Code 22101-3422

Purpose of Disbursement

Candidate Name

Rep. Michelle Lujan Grisham

Category/Type

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: NM District: 01

Date of Disbursement

MM / DD / YYYY
07 / 21 / 2015

Transaction ID : B5E4E6613AFCE4927A46

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. GEORGIANS FOR ISAKSON

Mailing Address POST OFFICE BOX 250116

City ATLANTA State GA Zip Code 30325

Purpose of Disbursement

Candidate Name

Sen. Johnny Isakson

Category/Type

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: GA District:

Date of Disbursement

MM / DD / YYYY
07 / 28 / 2015

Transaction ID : B3860CF0336C549A8B48

Amount of Each Disbursement this Period

1000.00

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"/> 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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. BLUMENAUER FOR CONGRESS

Mailing Address 830 NE HOLLADAY, #105

City PORTLAND State OR Zip Code 97232

Purpose of Disbursement

Candidate Name

Rep. Earl Blumenauer

Office Sought: House Senate President

State: OR District: 03

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			16			2015			

Transaction ID : B1D6D13D2E3964702B7E

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. BEN CARDIN FOR SENATE

Mailing Address P.O. BOX 21093

City CATONSVILLE State MD Zip Code 21228

Purpose of Disbursement

Candidate Name

Sen. Ben L. Cardin

Office Sought: House Senate President

State: MD District:

Disbursement For: 2018
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			16			2015			

Transaction ID : B2FEB7F19F7B946F59ED

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. TIM MURPHY FOR CONGRESS

Mailing Address PO BOX 24551

City PTTSBURGH State PA Zip Code 15234

Purpose of Disbursement

Candidate Name

Rep. Tim F. Murphy

Office Sought: House Senate President

State: PA District: 18

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			26			2015			

Transaction ID : B4DC802C4A0E846419E7

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

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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:
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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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. MARSHA BLACKBURN FOR CONGRESS, INC.

Mailing Address PO BOX 3750

City BRENTWOOD State TN Zip Code 37024

Purpose of Disbursement

Candidate Name

Rep. Marsha Blackburn

Office Sought: House Senate President

State: TN District: 07

Disbursement For: 2016 Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 26 / 2015

Transaction ID : B91A5B3C1EA3A46E29EB

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. TONY CARDENAS FOR CONGRESS

Mailing Address 3700 WILSHIRE BLVD SUITE 1050-B

City LOS ANGELES State CA Zip Code 90010

Purpose of Disbursement

Candidate Name

Rep. Tony Cardenas

Office Sought: House Senate President

State: CA District: 29

Disbursement For: 2016 Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 26 / 2015

Transaction ID : BADB644FCDEEC4AAAA4

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. PALLONE FOR CONGRESS

Mailing Address PO BOX 3176

City LONG BRANCH State NJ Zip Code 07740

Purpose of Disbursement

Candidate Name

Rep. Frank J. Pallone Jr.

Office Sought: House Senate President

State: NJ District: 06

Disbursement For: 2016 Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 26 / 2015

Transaction ID : B1DEEE645C435457B86A

Amount of Each Disbursement this Period

1000.00

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"/> 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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. DAVIS FOR CONGRESS/FRIENDS OF DAVIS

Mailing Address 5956 W. RACE AVENUE

City State Zip Code
CHICAGO IL 60644

Purpose of Disbursement

Candidate Name

Rep. Danny K. Davis

Office Sought: House
 Senate
 President
State: IL District: 07

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2015

Transaction ID : B001F1FA72C0847EEA59

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. SCHATZ FOR SENATE

Mailing Address PO BOX 3828

City State Zip Code
HONOLULU HI 96812

Purpose of Disbursement
Re-issue of contribution

Candidate Name

Sen. Brian E. Schatz

Office Sought: House
 Senate
 President
State: HI District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 27 / 2015

Transaction ID : B4BFFEF52523340F4901

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. SCHATZ FOR SENATE

Mailing Address PO BOX 3828

City State Zip Code
HONOLULU HI 96812

Purpose of Disbursement
Original Check Never Cashed (6/18/15)

Candidate Name

Sen. Brian E. Schatz

Office Sought: House
 Senate
 President
State: HI District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 27 / 2015

Transaction ID : B619834E9CFAD4C29B35

Amount of Each Disbursement this Period

-1000.00

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

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

1000.00

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

Use separate schedule(s)
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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"/> 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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. FRIENDS OF ERIK PAULSEN

Mailing Address P.O. BOX 44369
250 PRAIRIE CENTER DRIVE

City EDEN PRAIRIE State MN Zip Code 55344

Purpose of Disbursement
Re-issue of contribution

Candidate Name

Rep. Erik Paulsen

Office Sought: House
 Senate
 President
State: MN District: 03

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2015

Transaction ID : BCEF896DC8A184EC6933

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. FRIENDS OF ERIK PAULSEN

Mailing Address P.O. BOX 44369
250 PRAIRIE CENTER DRIVE

City EDEN PRAIRIE State MN Zip Code 55344

Purpose of Disbursement
Original Check Never Cashed (6/18/15)

Candidate Name

Rep. Erik Paulsen

Office Sought: House
 Senate
 President
State: MN District: 03

Disbursement For: 2015
 Primary General
 Other (specify) ▼
Other2015

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2015

Transaction ID : B94E42F4A52E944D5855

Amount of Each Disbursement this Period

-1000.00

Full Name (Last, First, Middle Initial)

C. COLLINS FOR SENATOR

Mailing Address PO BOX 1096

City BANGOR State ME Zip Code 04402

Purpose of Disbursement

Candidate Name

Sen. Susan M. Collins

Office Sought: House
 Senate
 President
State: ME District:

Disbursement For: 2020
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		04		2015

Transaction ID : B9B6BBB76783A4F2D935

Amount of Each Disbursement this Period

1000.00

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

1000.00

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

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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"/> 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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. ADRIAN SMITH FOR CONGRESS

Mailing Address 3321 AVENUE I
SUITE 6

City SCOTTSBLUFF State NE Zip Code 69361-4587

Purpose of Disbursement

Candidate Name

Rep. Adrian M. Smith

Office Sought: House
 Senate
 President
State: NE District: 03

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2015

Transaction ID : BF4C6BEBB67024B94A22

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. TENN PAC

Mailing Address 228 S Washington St Ste 115

City Alexandria State VA Zip Code 22314-5404

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼ Other2015

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2015

Transaction ID : B6B0F927E8B6F485D818

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. JOHN LEWIS FOR CONGRESS

Mailing Address P.O. BOX 2323

City ATLANTA State GA Zip Code 30301

Purpose of Disbursement

Candidate Name

Rep. John R. Lewis

Office Sought: House
 Senate
 President
State: GA District: 05

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	12	/	2015

Transaction ID : B7E1C8911F12D46FA89B

Amount of Each Disbursement this Period

1000.00

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

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

3000.00

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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"/> 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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. Vine PAC

Mailing Address 700 13th Street NW
Suite 600

City Washington State DC Zip Code 20005-5998

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) Other2015

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			12			2015			

Transaction ID : BBC6F72B020764E6282D

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. MIKE THOMPSON FOR CONGRESS

Mailing Address 5429 MADISON AVENUE

City SACRAMENTO State CA Zip Code 95841

Purpose of Disbursement

Candidate Name

Rep. Mike Thompson

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: CA District: 05

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			23			2015			

Transaction ID : BBF4CCD409F8045D1B7C

Amount of Each Disbursement this Period

800.00

Full Name (Last, First, Middle Initial)

C. CARPER FOR SENATE

Mailing Address PO BOX 2882

City WILMINGTON State DE Zip Code 19805

Purpose of Disbursement

Candidate Name

Sen. Tom R. Carper

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: DE District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			23			2015			

Transaction ID : BBA896D42B1484F03B05

Amount of Each Disbursement this Period

1000.00

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

3300.00

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

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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"/> 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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. Grassley Hawkeye Fund

Mailing Address P.O. Box 25132

City State Zip Code
Saint Paul MN 55125-0132

Purpose of Disbursement

Candidate Name

Sen. Chuck Grassley

Office Sought: House
 Senate
 President

State: IA District:

Disbursement For: 2015
 Primary General
 Other (specify) Other2015

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		23		2015

Transaction ID : B9EA0D699BAD949F69D3

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. KRISTI FOR CONGRESS

Mailing Address PO BOX 852

City State Zip Code
SIOUX FALLS SD 57101

Purpose of Disbursement

Candidate Name

Rep. Kristi Lynn Noem

Office Sought: House
 Senate
 President

State: SD District: 01

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		23		2015

Transaction ID : BBCE3AAA9326B4400900

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. KIND FOR CONGRESS COMMITTEE

Mailing Address 205 5TH AVENUE SOUTH

City State Zip Code
LA CROSSE WI 54601

Purpose of Disbursement

Candidate Name

Rep. Ron J. Kind

Office Sought: House
 Senate
 President

State: WI District: 03

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		08		2015

Transaction ID : BFD84EF7CEF1A438EA7E

Amount of Each Disbursement this Period

1000.00

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

4500.00

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

21800.00
