PAGE 1 / 11

Image# 202303159579056593

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORWI 3X	For Other	Than An Au	thorized	Commit	tee		Office Us	se Only	
NAME OF COMMITTEE (in full)	TYPE OR P	RINT ▼		ple: If typ the lines.	oing, type	12FE4	M5		
College of Americar	n Pathologis	sts Political	Action C	ommitt	ee			<u> </u>	
	1 1 1 1 1								
ADDRESS (number and street)	1001 G S	treet NW	1 1 1 1				1 1 1		
▼	Suite 425	West							
Check if different than previously reported. (ACC)	Washingt	on				DC	20001	<u> </u>	
2. FEC IDENTIFICATION	NUMBER ▼	Cl	TY 🛦			STATE ▲		ZIP CODE	A
C C00274944			IS THIS REPORT	×	NEW (N) OR		AMENDED (A)		
4. TYPE OF REPORT (Choose One)	(b) Mont Repo	ort On:	o 20 (M2) or 20 (M3)		May 20 (M5)		ug 20 (M8)	L (N	lov 20 (M11) lon-Election ear Only) lec 20 (M12)
(a) Quarterly Reports:			r 20 (M4)	H	Jul 20 (M7)		ct 20 (M10)	Ϋ́є	Ion-Electiòn ear Only) an 31 (YE)
April 15 Quarterly Repor	rt (Q1)	ш.		<u> </u>				-	
July 15 Quarterly Repor		12-Day PRE-Election Report for the:	H	Primary (12 Convention		_	al (12G) al (12S)	П	unoff (12R)
October 15 Quarterly Repor	rt (Q3)								_
January 31 Year-End Repor	rt (YE)	Electi	on on	M = M	/ D D /	Y	T	in the State of	
July 31 Mid-Yea Report (Non-ele Year Only) (MY	ection (u)	30-Day POST-Election Report for the:	G	General (30	0G)	Runof	(30R)	Sı	pecial (30S)
Termination Rep (TER)	port	Electi	on on	M = M		Y Y Y Y	Y	in the State of	
5. Covering Period	02 01	2023	Y	through	M M 02	/ D D D 28	202		
I certify that I have examined		nd to the best o	f my knowl	edge and	belief it is tr	ue, correct	and comple	te.	
Type or Print Name of Treas		SSICA, A, DI, IVID							
Signature of Treasurer	Kozel, Jessica, A, D	r, MD	[]	Electronica	lly Filed]	Date 03			2023
NOTE: Submission of false, er	rroneous, or inco	mplete information	on may subj	ject the pe	erson signing t	his Report to	the penalti	es of 52 U.	S.C. § 30109
Office Use								FORM Rev. 05/2016	

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)
Page 2

Write or Type Committee Name

College of American Pathologists Political Action Committee

Report Covering the Period: From: 02 01 2023 To: 02 28 2023

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2023		288924.88
	(b) Cash on Hand at Beginning of Reporting Period	313085.68	
	(c) Total Receipts (from Line 19)	9866.01	34296.02
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	322951.69	323220.90
7.	Total Disbursements (from Line 31)	4258.14	4527.35
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	318693.55	318693.55
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

College of American Pathologists Political Action Committee

01 2023 02 28 2023 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 8416.67 28333.34 (i) Itemized (use Schedule A)..... 1449.34 5962.68 (ii) Unitemized (iii) TOTAL (add 34296.02 9866.01 Lines 11(a)(i) and (ii).....▶ 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 0.00 (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 34296.02 9866.01 Totals to Line 33, page 5)▶ 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees..... 0.00 0.00 13. All Loans Received..... 0.00 0.00 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other 0.00 0.00 Political Committees..... 17. Other Federal Receipts 0.00 (Dividends, Interest, etc.)..... 0.00 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3)..... 0.00 0.00 (b) Levin Funds (from Schedule H5) (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))....... 9866.01 34296.02 20. Total Federal Receipts 9866.01 34296.02 (subtract Line 18(c) from Line 19)▶

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date				
Operating Expenditures: (a) Allocated Federal/Non-Federal		Outchau 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	250.44	507.05				
Expenditures(c) Total Operating Expenditures	258.14	527.35				
(add 21(a)(i), (a)(ii), and (b))▶	258.14	527.35				
Transfers to Affiliated/Other Party Committees	0.00	0.00				
Contributions to Federal Candidates/Committees and Other Political Committees	4000.00	4000.00				
Independent Expenditures	4000.00	1000.00				
(use Schedule E)	0.00	0.00				
(52 U.S.C. § 30116(d)) (use Schedule F)	0.00	0.00				
Loan Repayments Made	0.00	0.00				
Loans Made Refunds of Contributions To:	0.00	0.00				
(a) Individuals/Persons Other Than Political Committees	0.00	0.00				
(b) Political Party Committees	0.00	0.00				
(c) Other Political Committees	0.00	45 45 45				
(such as PACs)(d) Total Contribution Refunds	0.00	0.00				
(add Lines 28(a), (b), and (c))	0.00	0.00				
Other Disbursements (Including						
Non-Federal Donations)	0.00	0.00				
Federal Election Activity (52 U.S.C. § 30101(20	0))					
(a) Allocated Federal Election Activity						
(from Schedule H6) (i) Federal Share	0.00					
(i) i ederal Share	0.00	0.00				
(ii) "Levin" Share(b) Federal Election Activity Paid	0.00	0.00				
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00				
(c) Total Federal Election Activity (add	4 4					
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))	4258.14	4527.35				
Total Federal Disbursements						
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	4258.14	4507.05				
	4200.14	4527.35				

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 05/2016)

of Disbursements

Page 5

- (,		3
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)	9866.01	34296.02
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	9866.01	34296.02
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	258.14	527.35
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	258.14	527.35

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the

FOR LINE NUMBER:						PAGE	6	OF 11						
(0	che	ck only	or	ne)										
	X	11a		11b		11c	12							
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Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) College of American Pathologists Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Abbott, Jared, , Dr., MD, PhD Date of Receipt Mailing Address 305 41st St 2023 City Zip Code State Transaction ID: SA11AI.61692 IΑ West Des Moines 50265-3874 Amount of Each Receipt this Period FEC ID number of contributing 2000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Pathology Laboratory Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Berardo, Melora, D, Dr., MD Date of Receipt Mailing Address 9600 DataPoint Dr 80 2023 City State Zip Code Transaction ID: SA11AI.61677 TX San Antonio 78229-2028 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Pathology Reference Laboratory LLC Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 250.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Carlile, Brian, Keith, Dr., DO Date of Receipt Mailing Address Pathology 23 2023 1400 8th Ave City State Zip Code Transaction ID: SA11AI.61691 TX Fort Worth 76104-4110 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **Baylor-All Saints Medical Center** Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 2500.00 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 11c 12

11

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) College of American Pathologists Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Carmona, Pedro, A, Dr, MD Date of Receipt Mailing Address Path Dept 951 N Washington Ave 2023 City Zip Code State Transaction ID: SA11AI.61690 FL Titusville 32796-2163 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Parrish Med Ctr Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Durden, Angela, Fay, Dr., MD Date of Receipt Mailing Address 2900 12th Ave N Ste 295W 2023 City State Zip Code Transaction ID: SA11AI.61703 MT Billings 59101-7504 Amount of Each Receipt this Period FEC ID number of contributing 416.67 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Yellowstone Pathology Institute Inc Bi Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 833.34 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Fekete, Paul, , S., Dr. Date of Receipt Mailing Address PO Box 190 24 2023 City State Zip Code Transaction ID: SA11AI.61695 GΑ Dacula 30019-0004 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Gwinnett Med Ctr Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1916.67 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

Primary

C.

Other (specify)

General

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

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) College of American Pathologists Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Hosfield, Elizabeth, Margaret, Dr., MD Date of Receipt Mailing Address Dept of Path 2023 350 Saint Josephs Ave City State Zip Code Transaction ID: SA11AI.61683 CA San Francisco 94115-3255 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Kaiser Foundation Hospital Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Liu, Fangluo, , Dr., MD Date of Receipt Mailing Address 420 34th St 2023 City State Zip Code Transaction ID: SA11AI.61697 Bakersfield CA 93301-2237 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Bakersfield Memorial Hosp Lab Pathologist Receipt For: Aggregate Year-to-Date ▼

		4	
Full Name of Individual (Last, First, Middle In Saad, Assad, J, Dr., MD	itial) or Full Orga	anization Name	Date of Receipt
Mailing Address Dept of Path 1411 N Beckley Ave Ste 174			02 12 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID : SA11AI.61684
Dallas	TX	75203	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		2500.00
Name of Employer (for Individual)	Occupa	ation (for Individual)	Memo Item
Prism Pathology	Patholo	ogist	
Receipt For: Primary General Other (specify)	Aggregate Ye	ear-to-Date ▼ 2500.00	
LIDTOTAL of Descripts This Days (estimal)			3000.00

250.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: **PAGE** 9 Use separate schedule(s) (check only one) **X** 11a 11b 11c

OF

11

for each category of the 12 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) College of American Pathologists Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Valdes, C. Leilani, , Dr., MD, MBA Date of Receipt Mailing Address 608 W Commercial St 2023 City Zip Code State Transaction ID: SA11AI.61696 TX Victoria 77901-6302 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Citizens Medical Center Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1000.00 SUBTOTAL of Receipts This Page (optional)..... 8416.67 TOTAL This Period (last page this line number only).....

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SCHEDULE B (FEC Form 3X)			FOR	LINE I	NUMBER	:		F	AGE	10 O	F 11
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NAME OF COMMITTEE (In Full)											
College of American Pathologists P	Political A	Action Com	mittee								
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A. Truist Bank					Date o	t Disb					
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SCHEDULE B (FEC Form 3X)	Use sepa	rate schedule(s)						
ITEMIZED DISBURSEMENTS	for each of	category of the Summary Page	21b 28a	22 X 23 26 27 28b 28c 29 30b				
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam								
NAME OF COMMITTEE (In Full) College of American Pathologists P		,,		Zaman de la la casa de				
Full Name (Last, First, Middle Initial) A. JASON SMITH FOR CONGRESS				Date of Disbursement				
Mailing Address 439 New Jersey Avenue, SE				02 15 2023				
,	State DC	Zip Code 20003		FEC Identification Number				
Candidate Name			Category/	C C00541862 Transaction ID : SB23.61673 Amount of Each Disbursement this Period				
Senate x	nent For: 2 Primary Other (spec	General	Туре	2000.00 Memo Item				
Full Name (Last, First, Middle Initial) 3. MATSUI FOR CONGRESS Mailing Address P.O. BOX 83142				Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
,	State MD	Zip Code 20883		FEC Identification Number				
Candidate Name			Category/ Type	C C00409219 Transaction ID: SB23.61674 Amount of Each Disbursement this Period				
Senate x	nent For: 2 Primary Other (spec	General		1000.00 Memo Item				
Full Name (Last, First, Middle Initial) VERN BUCHANAN FOR CONGRE	ESS			Date of Disbursement				
Mailing Address P.O. BOX 15239				02 15 2023				
,	State DC	Zip Code 20003		FEC Identification Number C C00412759				
Candidate Name			Category/ Type	Transaction ID: SB23.61675 Amount of Each Disbursement this Period				
Senate x	nent For: 21 Primary Other (spec	General	Zr ·	1000.00 Memo Item				
SUBTOTAL of Disbursements This Page (optional)				4000.00				
TOTAL This Period (last page this line number only)				4000.00				