



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

American Clinical Laboratory Associaton PAC (LabPAC)

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"/>		20888.75
(b) Cash on Hand at Beginning of Reporting Period.....	21849.57	
(c) Total Receipts (from Line 19) .....	10461.48	38422.30
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	32311.05	59311.05
7. Total Disbursements (from Line 31).....	9000.00	36000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	23311.05	23311.05
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
  
Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**American Clinical Laboratory Associaton PAC (LabPAC)**

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).....	10461.48	28422.30
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	10461.48	28422.30
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	10000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	10461.48	38422.30
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
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))..... ▶	10461.48	38422.30
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	10461.48	38422.30

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

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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 .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	9000.00	36000.00
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)) ..	9000.00	36000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	9000.00	36000.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	10461.48	38422.30
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	10461.48	38422.30
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. 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 11  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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 Clinical Laboratory Associaton PAC (LabPAC)**

**A. Julie Khani**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1000 New York Ave, NW  
 Suite 725 West  
 City Washington State DC Zip Code 20005  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer American Clinical Laboratory Assoc Occupation Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2480.76

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2015  
**Transaction ID : 1206558**  
 Amount of Each Receipt this Period  
 1500.00

**B. Francesca O'Reilly**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1100 New York Avenue, NW  
 Suite 725 West  
 City Washington State DC Zip Code 20005  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer American Clinical Laboratory Associati Occupation Vice President, Government Relations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1442.28

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2015  
**Transaction ID : 847089**  
 Amount of Each Receipt this Period  
 461.52

**C. Michael Ero**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 206 Vicksburg St  
 City San Francisco State CA Zip Code 94114-3317  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Machon Diagnostics Occupation President  
 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  
 07 / 08 / 2015  
**Transaction ID : 9320529**  
 Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2461.52  
**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 11
	<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 Clinical Laboratory Associaton PAC (LabPAC)**

Full Name (Last, First, Middle Initial) <b>A. Alan B. Mertz</b>		Date of Receipt MM / DD / YYYY 07 / 24 / 2015 <b>Transaction ID : 9337882</b>
Mailing Address 2025 S Lynn St		Amount of Each Receipt this Period 416.66
City Arlington	State VA	Zip Code 22202-2128
FEC ID number of contributing federal political committee. C	Name of Employer American Clinical Laboratory A	Occupation President
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2915.96	

Full Name (Last, First, Middle Initial) <b>B. Alan B. Mertz</b>		Date of Receipt MM / DD / YYYY 08 / 25 / 2015 <b>Transaction ID : 9393706</b>
Mailing Address 2025 S Lynn St		Amount of Each Receipt this Period 416.66
City Arlington	State VA	Zip Code 22202-2128
FEC ID number of contributing federal political committee. C	Name of Employer American Clinical Laboratory A	Occupation President
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3332.62	

Full Name (Last, First, Middle Initial) <b>C. Alan B. Mertz</b>		Date of Receipt MM / DD / YYYY 09 / 30 / 2015 <b>Transaction ID : 9469090</b>
Mailing Address 2025 S Lynn St		Amount of Each Receipt this Period 416.66
City Arlington	State VA	Zip Code 22202-2128
FEC ID number of contributing federal political committee. C	Name of Employer American Clinical Laboratory A	Occupation President
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3749.28	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1249.98
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 11
	<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 Clinical Laboratory Associaton PAC (LabPAC)**

Full Name (Last, First, Middle Initial) <b>A. Nicholas Brownlee</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 08 / 2015 <b>Transaction ID : 9493955</b>
Mailing Address 12 Deer Grass Ln		Amount of Each Receipt this Period 2500.00
City Acton	State MA	Zip Code 01720-4755
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Spectra Laboratories	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) <b>B. Curtis Hanson</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 08 / 2015 <b>Transaction ID : 9493956</b>
Mailing Address 1312 Woodland Drive, SW		Amount of Each Receipt this Period 500.00
City Rochester	State MN	Zip Code 55902
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Mayo Clinic	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. Alan B. Mertz</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 26 / 2015 <b>Transaction ID : 9513606</b>
Mailing Address 2025 S Lynn St		Amount of Each Receipt this Period 416.66
City Arlington	State VA	Zip Code 22202-2128
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer American Clinical Laboratory A	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4165.94	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3416.66
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 OF 11
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**American Clinical Laboratory Associaton PAC (LabPAC)**

Full Name (Last, First, Middle Initial) <b>A. Alan B. Mertz</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 25 / 2015 <b>Transaction ID : 9555798</b>
Mailing Address 2025 S Lynn St		Amount of Each Receipt this Period 416.66
City Arlington	State VA	Zip Code 22202-2128
FEC ID number of contributing federal political committee. C		
Name of Employer American Clinical Laboratory A	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4582.60	

Full Name (Last, First, Middle Initial) <b>B. Nicholas Brownlee</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 25 / 2015 <b>Transaction ID : 9555799</b>
Mailing Address 12 Deer Grass Ln		Amount of Each Receipt this Period 2500.00
City Acton	State MA	Zip Code 01720-4755
FEC ID number of contributing federal political committee. C		
Name of Employer Spectra Laboratories	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>C. Alan B. Mertz</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 24 / 2015 <b>Transaction ID : 9606507</b>
Mailing Address 2025 S Lynn St		Amount of Each Receipt this Period 416.66
City Arlington	State VA	Zip Code 22202-2128
FEC ID number of contributing federal political committee. C		
Name of Employer American Clinical Laboratory A	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4999.26	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3333.32
<b>TOTAL</b> This Period (last page this line number only).....▶	10461.48

**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 Clinical Laboratory Associaton PAC (LabPAC)**

Full Name (Last, First, Middle Initial)

**A. Bennet For Colorado**

Mailing Address PO Box 3078

City State Zip Code  
Denver CO 80201

Purpose of Disbursement  
Direct Contribution

011

Candidate Name

**Sen. Michael Bennet**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: CO District:

Date of Disbursement

MM / DD / YYYY  
09 / 17 / 2015

**Transaction ID : 9442766**

Amount of Each Disbursement this Period

1500.00

Direct Contribution

Full Name (Last, First, Middle Initial)

**B. People For Patty Murray**

Mailing Address PO Box 3662

City State Zip Code  
Seattle WA 98124

Purpose of Disbursement  
Direct Contribution

011

Candidate Name

**Sen. Patty Murray**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: WA District:

Date of Disbursement

MM / DD / YYYY  
09 / 28 / 2015

**Transaction ID : 9456007**

Amount of Each Disbursement this Period

2000.00

Direct Contribution

Full Name (Last, First, Middle Initial)

**C. Friends of Schumer**

Mailing Address 426 C Street NE

City State Zip Code  
Washington DC 20002-5839

Purpose of Disbursement  
Direct Contribution

011

Candidate Name

**Charles Schumer**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: NY District:

Date of Disbursement

MM / DD / YYYY  
09 / 28 / 2015

**Transaction ID : 9456008**

Amount of Each Disbursement this Period

1000.00

Direct Contribution

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

4500.00

**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 Clinical Laboratory Associaton PAC (LabPAC)**

Full Name (Last, First, Middle Initial)

**A. Brady For Congress**

Mailing Address P.O. Box 8277

City State Zip Code  
The Woodlands TX 77387

Purpose of Disbursement  
Direct Contribution

011

Candidate Name

**Rep. Kevin Brady**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: TX District: 08

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 05 / 2015

**Transaction ID : 9471359**

Amount of Each Disbursement this Period

2000.00

Direct Contribution

Full Name (Last, First, Middle Initial)

**B. Pascrell for Congress**

Mailing Address P.O. Box 100

City State Zip Code  
Teaneck NJ 07666

Purpose of Disbursement  
Direct Contribution

011

Candidate Name

**Bill Pascrell**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: NJ District: 08

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 16 / 2015

**Transaction ID : 9493861**

Amount of Each Disbursement this Period

2500.00

Direct Contribution

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

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

4500.00

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

9000.00