PAGE 1 / 13

Image# 202209209528593623

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORIVI 3X	For Other Th	an An Authorized	d Committee	Offic	ce Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRIN		ample: If typing, type or the lines.	12FE4M5	
PSYCHOLOGY PAC	OF AMERIC	CAN PSYCHOLO	OGICAL ASSOC	IATION SERVI	CES INC.
ADDRESS (number and street)	PO Box 1544	1			
Check if different than previously reported. (ACC)	Washington			DC 2(0003-0441 -
2. FEC IDENTIFICATION	NUMBER ▼	CITY ▲		STATE A	ZIP CODE ▲
C C00522094		3. IS THIS REPORT	NEW (N) OR	AMEND (A)	ED
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports:	(b) Monthly Report Due On:	Feb 20 (M2) Mar 20 (M3) Apr 20 (M4)	Jun 20 (M6	Sep 20 (M	(Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report July 15 Quarterly Report October 15 Quarterly Report January 31	(Q2) (C) 12-I PRI Rep (Q3)	Day E-Election port for the:	Primary (12P) Convention (12C)	General (12G) Special (12S)	Runoff (12R) in the State of
Year-End Report July 31 Mid-Year Report (Non-elect Year Only) (MY) Termination Report (TER)	(d) 30-l		General (30G)	Runoff (30R)	Special (30S) in the State of
5. Covering Period	08	2022	through 08	M / D D / Y	Y Y Y 2022
I certify that I have examined Type or Print Name of Treasu	Phillips, Justin		wledge and belief it is	true, correct and con	nplete.
Signature of Treasurer Pr	nillips, Justin, , ,		[Electronically Filed]	Date 09	07 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of false, err	oneous, or incomple	ete information may su	ubject the person signing	this Report to the per	nalties of 52 U.S.C. § 30109
Office Use Only				F	EC FORM 3X Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

PSYCHOLOGY PAC OF AMERICAN PSYCHOLOGICAL ASSOCIATION SERVICES INC

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
. (a)	Cash on Hand January 1, 2022		190568.76
(b)	Cash on Hand at Beginning of Reporting Period	183899.75	
(c)	Total Receipts (from Line 19)	7803.17	66234.16
(d)	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	191702.92	256802.92
Tot	ral Disbursements (from Line 31)	1000.00	66100.00
Re	sh on Hand at Close of porting Period btract Line 7 from Line 6(d))	190702.92	190702.92
the	bts and Obligations Owed TO Committee (Itemize all on hedule C and/or Schedule D)	0.00	
the	bts and Obligations Owed BY c Committee (Itemize all on hedule C and/or Schedule D)	0.00	

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

PSYCHOLOGY PAC OF AMERICAN PSYCHOLOGICAL ASSOCIATION SERVICES INC.

R		M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	08 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	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)	5396.67	41748.34
	(ii) Unitemized	2406.50	22485.82
	(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	7803.17	64234.16
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
10	(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) Transfers From Affiliated/Other	7803.17	64234.16
12.	Party Committees	0.00	0.00
13.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
16.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00
17	to Federal Candidates and Other Political Committees Other Federal Receipts	0.00	2000.00
	(Dividends, Interest, etc.) Transfers from Non-Federal and Levin Funds	0.00	0.00
	(a) Non-Federal Account (from Schedule H3)	0.00	0.00
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	7803.17	66234.16
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	7803.17	66234.16

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		Calcinati Ioui to Bute
Activity (from Schedule H4)	0.00	0.00
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating		
Expenditures	10.00	10.00
(c) Total Operating Expenditures	10.00	10.00
(add 21(a)(i), (a)(ii), and (b))	10.00	10.00
Committees	0.00	0.00
Contributions to Federal Candidates/Committees and Other Political Committees	1000.00	64500.00
Independent Expenditures	4 4	45 45
(use Schedule E) Coordinated Party Expenditures (52 U.S.C. § 30116(d))	0.00	0.00
(use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans Made	0.00	0.00
Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	1000	4500.00
man Fontical Committees	-10.00	1590.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds	0.00	0.00
(add Lines 28(a), (b), and (c))	-10.00	1590.00
Other Disbursements (Including		
Non-Federal Donations)	0.00	0.00
Federal Election Activity (52 U.S.C. § 30101(2	2011	
(a) Allocated Federal Election Activity		
(from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) III ovin'i Chara	0.00	0.00
(ii) "Levin" Share(b) Federal Election Activity Paid	0.00	0.00
Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add	7 7	7 7
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))	1000.00	66100.00
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	1000.00	66100.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

rsements
Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	7803.17	64234.16
4. Total Contribution Refunds (from Line 28(d))	-10.00	1590.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7813.17	62644.16
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	10.00	10.00
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	10.00	10.00

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:						PAGE	6	OF	13
(0	che	ck only							
	X 11a 11b					11c	12	2	
	13 14				15	16	6	17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

	the name and address of any political committee	
NAME OF COMMITTEE (In Full) PSYCHOLOGY PAC OF AME	ERICAN PSYCHOLOGICAL ASSO	CIATION SERVICES INC.
Full Name of Individual (Last, First, Middle Wiley, Mary, O'Leary, Dr, PhD	Initial) or Full Organization Name	Date of Receipt
Mailing Address 510 49th St		08 03 / Y = Y = Y = Y = Y
City	State Zip Code	Transaction ID : AC5207AC44D984691909
Altoona	PA 16602-1418	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	1000.00
Name of Employer (for Individual) Self	Occupation (for Individual) Psychologist	Memo Item
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	1000.00	
Full Name of Individual (Last, First, Middle Stettner, Daniel, Charles, Dr,	Initial) or Full Organization Name	Date of Receipt
Mailing Address 12908 Sherwood Dr		08 03 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : AD7B9644CED194A8AB8
Huntington Woods	MI 48070-1458	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer (for Individual) Great Lakes Psychology Group	Occupation (for Individual) Psychologist	Memo Item
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	450.00	
Full Name of Individual (Last, First, Middle Jones, Robert, G, ,	Initial) or Full Organization Name	Date of Receipt
Mailing Address 1039 N Warren St		08
City	State Zip Code	Transaction ID : A2DECA0EDE753494E93
Helena	MT 59601-3454	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer (for Individual) Retired	Occupation (for Individual) Retired	Memo Item
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify)	250.00	
SUBTOTAL of Receipts This Page (optional).		1450.00
TOTAL This Period (last page this line number	·	

Use separate schedule(s) for each category of the Detailed Summary Page

						PAGE	7	OF	13
(0	he	ck only							
X 11a 11b					11c	12	2		
	13 14				15	16	6	17	

	the name and address of any political committee	
NAME OF COMMITTEE (In Full) PSYCHOLOGY PAC OF AME	ERICAN PSYCHOLOGICAL ASS	OCIATION SERVICES INC.
Full Name of Individual (Last, First, Middle Robinson-Hudson, Sarah, J, ,	Initial) or Full Organization Name	Date of Receipt
Mailing Address 15404 Eagle Creek Way		08
City Apple Valley	State Zip Code 55124-7590	Transaction ID : A3DB5A72F6C344E8D98E Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer (for Individual) Hudson Counseling Clinic	Occupation (for Individual) Psychologist	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name of Individual (Last, First, Middle Robinson-Hudson, Sarah, J, , Mailing Address 15404 Eagle Creek Way	Initial) or Full Organization Name	Date of Receipt
City Apple Valley FEC ID number of contributing	State Zip Code 55124-7590	08 04 2022 Transaction ID : AFEF948885FC34AC9A39 Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) Hudson Counseling Clinic	Occupation (for Individual) Psychologist	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00]
Full Name of Individual (Last, First, Middle White, Randall P, , Dr, PhD Mailing Address 3 Grove Isle Dr Apt C509	,	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Miami	State Zip Code FL 33133-4115	Transaction ID : A1FCB66C206AB478A83 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer (for Individual) Executive Development Group LLC Receipt For: Primary General Other (specify)	Occupation (for Individual) Psychologist and Professor Aggregate Year-to-Date 250.00	Memo Item
SUBTOTAL of Receipts This Page (optional)		550.00
TOTAL This Period (last page this line numb	per only)	

Use separate schedule(s) for each category of the Detailed Summary Page

	FOR LINE NUMBER:						PAGE	8	OF	13
(check only one)										
	X 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 t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) PSYCHOLOGY PAC OF AME	ERICAN PSYCHOLOGICAL ASSO	CIATION SERVICES INC.
Full Name of Individual (Last, First, Middle Gillaspy, Stephen, Ross, Dr., Mailing Address 750 1st St NE City Washington FEC ID number of contributing federal political committee. Name of Employer (for Individual) APA Receipt For: Primary General Other (specify)	State DC Zip Code 20002-4241 C Occupation (for Individual) Psychologist Aggregate Year-to-Date ▼	Date of Receipt 08 06 2022 Transaction ID: A98AB1E96173B4167A37 Amount of Each Receipt this Period 250.00 Memo Item
Full Name of Individual (Last, First, Middle Diaz-Granados, Jim, , Dr., Mailing Address 6507 Cavalier Dr City Alexandria FEC ID number of contributing federal political committee. Name of Employer (for Individual) APA Receipt For: Primary General Other (specify)	Initial) or Full Organization Name State Zip Code 22307-1306 C Occupation (for Individual) Executive Aggregate Year-to-Date ▼	Date of Receipt M M M / D G / 2022 Transaction ID : A22F230694F024C30853 Amount of Each Receipt this Period 500.00 Memo Item
Full Name of Individual (Last, First, Middle Howell, Gary, L, Dr., Mailing Address 4400 W Spruce St Apt 489 City Tampa FEC ID number of contributing federal political committee. Name of Employer (for Individual) Private practice Receipt For: Primary General Other (specify)	Initial) or Full Organization Name State Zip Code FL 33607-4244 C Occupation (for Individual) Psychologist Aggregate Year-to-Date ▼	Date of Receipt 08 06 2022 Transaction ID : A65CDBCA7678E461EAC Amount of Each Receipt this Period 500.00 Memo Item
SUBTOTAL of Receipts This Page (optional).	>	1250.00
TOTAL This Period (last page this line number	er only)	4-14-14-14-1

Use separate schedule(s) for each category of the Detailed Summary Page

	FOR LINE NUMBER:						PAGE	9	OF	13
(check only one)										
	X 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 a	ddress of any political committee	to solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) PSYCHOLOGY PAC OF AM	ERICAN PS	SYCHOLOGICAL ASSO	OCIATION SERVICES INC.			
Full Name of Individual (Last, First, Middle Gopal, Kalyani, , Dr., PhD.	Initial) or Full O	rganization Name	Date of Receipt			
Mailing Address 7725 Broadway Ste A	Ste A					
City Merrillville	State IN	Zip Code 46410-4787	Transaction ID : AC8FDFFBBD1B6442C8A Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		250.00			
Name of Employer (for Individual) Mid America		upation (for Individual)	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00				
Full Name of Individual (Last, First, Middle Howard, Bruce, A, Dr., PhD Mailing Address 1460 7th St	Initial) or Full O	rganization Name	Date of Receipt			
Ste 300 City Santa Monica	State CA	Zip Code 90401-2632	08 12 2022 Transaction ID : AAC083A9843EF4625A4F Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С	50.00				
Name of Employer (for Individual) Self		upation (for Individual) chologist	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 400.00				
Full Name of Individual (Last, First, Middle BlancoOilar, Christiane, , Dr., P		rganization Name	Date of Receipt			
Mailing Address 20423 State Road 7 Ste F6			08 21 2022			
City Boca Raton	State FL	Zip Code 33498-6792	Transaction ID : A61814BD29E4C4E12838 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		46.67			
Name of Employer (for Individual) Florida Psychological Association	Pres	upation (for Individual) sident	Memo Item			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 373.36				
SUBTOTAL of Receipts This Page (optional)		>	346.67			
TOTAL This Period (last page this line numb	per only)	>				

Receipt For:

C.

Primary

Other (specify)

General

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the 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

FOR LINE NUMBER:					PAGE	 10	OF	13		
	(check only one)									
		X	11a		11b		11c	12		
			13		14		15	16	;	17

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) PSYCHOLOGY PAC OF AMERICAN PSYCHOLOGICAL ASSOCIATION SERVICES INC. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Fuller, Gerald, B, Dr., Date of Receipt Mailing Address 3362 Blossom Ridge Blvd 2022 City State Zip Code Transaction ID: A89986A8D512242EE906 MI Rochester 48306-3367 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) Clinical Psychologist Retired 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. Ramey, Michael, , , Date of Receipt Mailing Address 4190 Skyline Ranch Ct 80 2022 City State Zip Code Transaction ID: AD345AAE772AC462D866 Rapid City SD 57701-8942 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) Self Psychologist

Full Name of Individual (Last, First, Middle Spears, Gayle, , Dr., PhD	Date of Receipt		
Mailing Address 160 Red Bluff Dr			08 25 2022
City Athens	State GA	Zip Code 30607-6562	Transaction ID : AC5EB19DEDC2F41FDAA5 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer (for Individual) GA Psychological Asso		ation (for Individual) ive Director	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Ye	ar-to-Date ▼ 400.00	
SUBTOTAL of Receipts This Page (optional	l)	>	550.00

250.00

Aggregate Year-to-Date ▼

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

7

Name of Employer (for Individual)

Other (specify)

General

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

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

Erik Sorensen Receipt For:

B.

Primary

Use separate schedule(s) for each category of the Detailed Summary Page

						PAGE	 11	OF	13	
(check only one)										
		X	11a		11b		11c	12		
			13		14		15	16		17

Memo Item

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) PSYCHOLOGY PAC OF AMERICAN PSYCHOLOGICAL ASSOCIATION SERVICES INC. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Sorensen, Erik, D, , PhD Date of Receipt Mailing Address 511 E 12th Ave 2022 City State Zip Code Transaction ID: A65DDD33F4E1E4347808 OR Eugene 97401-3608 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee.

Occupation (for Individual)

250.00

Erik Sorensen

Aggregate Year-to-Date ▼

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

			1
Full Name of Individual (Last, First, Middle In Clayton, Susan, D, , PhD	nitial) or Full Org	anization Name	Date of Receipt
Mailing Address The Col of Wooster	M = M / D = D / Y = Y = Y		
Morgan Hall			08 27 2022
City	State	Zip Code	Transaction ID : AE0DD6435064841E48CE
Wooster	ОН	44691	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer (for Individual) College of Wooster		nation (for Individual) ssor of Psychology	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 250.00	
Fig. No. and a finally delicated the set. Final Addates to	- iti - I\ FII O	t At N	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Madsen, Sabra, , Dr., Date of Receipt Mailing Address 3409 Deininger Rd 2022 City State Zip Code Transaction ID: A9EC738BBD9ED4F88969 PΑ York 17406-6911 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) Yorlan Psychological Associates Licensed Psychologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 750.00

Use separate schedule(s) for each category of the Detailed Summary Page

	FOR LINE NUMBER: (check only one)						PAGE	 12	OF	13
(check only one)										
		X	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) PSYCHOLOGY PAC OF AMERICAN PSYCHOLOGICAL ASSOCIATION SERVICES INC. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Proto, Daniel, , Dr., Date of Receipt Mailing Address Joint Ambulatory Care Center 790 Veterans Way 2022 City Zip Code State Transaction ID: ACA63E595B05F433BA70 Pensacola FL 32507 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) Neurocognitive Specialty Group Neuropsychologist 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. Stewart, Sunita, Mahtani, Dr., PhD Date of Receipt Mailing Address Univ of Texas SW Med Ctr at Dall D 80 28 2022 Dept OF City State Zip Code Transaction ID: A93FB82E4D7744211A35 TX **Dallas** 75390-0001 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) University of Texas Southwestern Professor Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 250.00 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) 500.00 SUBTOTAL of Receipts This Page (optional)..... 5396.67 TOTAL This Period (last page this line number only).....

S 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) PSYCHOLOGY PAC OF AMERICAN PSYCHOLOGICAL ASSOCIATION SERVICES INC. Full Name (Last, First, Middle Initial)	SCHEDULE B (FEC Form 3X)	He	anata and - did-()	FOR LINE	OR LINE NUMBER: PAGE 13 OF 13					
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of seliciting contributions for for commercial purposes, other than using the name and address of any political committee to sold or contributions for for such committee. NAME OF COMMITTEE (in Full) PSYCHOLOGY PAC OF AMERICAN PSYCHOLOGICAL ASSOCIATION SERVICES INC. Full Name (Last, First, Middle Initial) A. MARK DESAULNIER FOR CONGRESS Mailing Address 1605 Russell Road City Purpose of Disbursement Contribution to Committee Catalogate Name DeSaulnier, Mark , Rep. Office Suplit: Full Name (Last, First, Middle Initial) B. Mailing Address City State: Disbursement For: Senate President Disbursement Catalogate Purpose of Disbursement Catalogate Purpose of Disbursement Catalogate Fell Initiation Mailing Address City State: District: District: Full Name (Last, First, Middle Initial) B. Date of Disbursement Catalogate Fell Initiation Catalogate President District: Full Name (Last, First, Middle Initial) C. Mailing Address City State: District: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State: District: Full Name (Last, First, Middle Initial) C. Catalogate Amount of Each Disbursement this Period Type Office Sought: Fell Centification Number Catalogate Fell Centification Number Catal	ITEMIZED DISBURSEMENTS			1 ` —						
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 Fill) PSYCHOLOGY PAC OF AMERICAN PSYCHOLOGICAL ASSOCIATION SERVICES INC. Full Name (Last, First, Middle Initial) A. MARK DESAULNIER FOR CONGRESS Mailing Address 1606 Russell Raad City Alexandria Purpose of Disbursement Contribution to Committee Candidate Name DeSaulnier, Mark, Rep. Office Sought: Full Name (Last, First, Middle Initial) B. Mailing Address City State: City Alexandria Primaty Primaty Ceneral Primaty Ceneral Primaty Ceneral Primaty Ceneral Primaty Category/ Type Tecl Identification Number FEC Identification Number FEC Identification Number FEC Identification Number Category/ Type Tecl Identification Number FEC Identification Number FEC Identification Number FULL Types of Disbursement Candidate Name Category/ Type Office Sought: Full Name (Last, First, Middle Initial) Date of Disbursement Type T										
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 PTIII) PSYCHOLOGY PAC OF AMERICAN PSYCHOLOGICAL ASSOCIATION SERVICES INC. Full Name (Last, First, Middle Initial) A. MARK DESAULNIER FOR CONGRESS Mailing Address 1605 Russell Road City Alexandria City Alexandria Purpose of Disbursement State: Cardidate Name Category Prisedent State: City State Code Chercel City State	Any information copied from such Reports and State	ements mav	not be sold or use							
PSYCHOLOGY PAC OF AMERICAN PSYCHOLOGICAL ASSOCIATION SERVICES INC. Full Name (Last, First, Middle Initial) A. MARK DESAULNIER FOR CONGRESS Mailing Address 1605 Russell Road City State Zip Code Alexandria VA 20006 Purpose of Disbursement Contribution to Committee Candidate Name DeSaulnier, Mark , Rep., Office Sought: X House President President President Other (specify) V State: Disbursement Disbursement For: 2022 Full Name (Last, First, Middle Initial) B. Mailing Address City State: Disbursement Por: Senate President Other (specify) General President State: District: 10 Disbursement For: Disbursement For: President Other (specify) General State: District: District: District: District: District: Pull Name (Last, First, Middle Initial) Cadegory/ Type Office Sought: House President Other (specify) General State: District: District: District: Pull Name (Last, First, Middle Initial) Category/ Type Office Sought: House President Disbursement For: Category/ Type Office Sought: House President State Disbursement For: Senate Primary General President State: District: Pull Name (Last, First, Middle Initial) Category/ Type Office Sought: House Senate Primary General Primary General President State: District: Primary General President State: District: Memoritem Memoritem Memoritem State: District: Memoritem	or for commercial purposes, other than using the na									
A MARK DESAULNIER FOR CONGRESS Mailing Address 1605 Russell Road City State Zip Code 20006 Purpose of Disbursement Contribution to Committee Candidate Name DeSaulnier, Mark, Rep, Office Sought: Y House Senate Primary General Purpose of Disbursement Candidate Name Category Sype Transaction ID: B156ABF7Ac Amount of Each Disbursement his Period Transaction ID: B156ABF7Ac Amount of Each Disbursement his Period Transaction ID: B156ABF7Ac Amount of Each Disbursement his Period Transaction ID: B156ABF7Ac Amount of Each Disbursement his Period Transaction ID: B156ABF7Ac Amount of Each Disbursement his Period Transaction ID: B156ABF7Ac Amount of Each Disbursement his Period Transaction ID: B156ABF7Ac Amount of Each Disbursement his Period Transaction ID: B156ABF7Ac Amount of Each Disbursement his Period Transaction ID: B156ABF7Ac Amount of Each Disbursement his Period Transaction ID: B156ABF7Ac Amount of Each Disbursement his Period Transaction ID: B156ABF7Ac Amount of Each Disbursement his Period Transaction ID: B156ABF7Ac Amount of Each Disbursement his Period Transaction ID: B156ABF7Ac Amount of Each Disbursement his Period Transaction ID: B156ABF7Ac Amount of Each Disbursement his Period Transaction ID: B156ABF7Ac Amount of Each Disbursement his Period Transaction ID: B156ABF7Ac Amount of Each Disbursement his Period Transaction ID: B156ABF7Ac Amount of Each Disbursement his Period Transaction ID: B156ABF7Ac Amount of Each Disbursement his Period Transaction ID: B156ABF7Ac Amount of Each Disbursement his Period Transaction ID: B156ABF7Ac Amount of Each Disbursement his Period Transaction ID: B156ABF7Ac Amount of Each Disbursement his Period Transaction ID: B156ABF7Ac Amount of Each Disbursement his Period Transaction ID: B156ABF7Ac Amount of Each Disbursement his Period Transaction ID: B156ABF7Ac Amount of Each Disbursement his Period Transaction ID: B156ABF7Ac Amount of Each Disbursement his Period Transaction ID: B156ABF7Ac Amount of Each Disbursement his Period Transaction ID:			(011010010		014710N 05B) #050 INO					
A. MARK DESAULNIER FOR CONGRESS Mailing Address 1605 Russell Road City	PSYCHOLOGY PAC OF AMERIC	JAN PSY	CHOLOGIC	AL ASSOC	CIATION SERVICES INC.					
City	,									
Mailing Address 1605 Russell Road City State Zip Code VA 20006 Purpose of Disbursement Contribution to Committee C Co0554709 Transaction ID : 8165ABF7A6 Amount of Each Disbursement his Period Memo Item Full Name (Last, First, Middle Initial) B. Mailing Address Disbursement C Category Type City State Zip Code Primary Category Type Type Type City State Zip Code Primary Category Type	A. MARK DESAULNIER FOR CONC	GRESS								
City Alexandria Purpose of Disbursement Contribution to Committee Candidate Name DeSaulnier, Mark., Rep., Office Sought: Y Nouse Disbursement For: 2022 Transaction ID: 8156ABF7A6 Amount of Each Disbursement this Period Memo Item	Mailing Address 1605 Russell Road				1 1 1 1 1 1 1					
Alexandria Purpose of Disbursement Contribution to Committee Candidate Name DeSaulnier, Mark, , Rep., Office Sought: State: CA District: 10 Full Name (Last, First, Middle Initial) B. Mailing Address City Office Sought: Feel Name Category/ Type Office Sought: Category/ Type Office Sought: Category/ Type Disbursement For: 2022 Primary Amount of Each Disbursement this Period Date of Disbursement Category/ Type Date of Disbursement Category/ Type Category/ Type Disbursement Category/ Type Tech Identification Number Tech Identification Number Category/ Type Tech Identification Number Category/ Type Tech Identification Number Tech Ide										
Purpose of Disbursement Contribution to Committee Candidate Name DeSaulnier, Mark, , Rep., Office Sought:	•		l '		FEC Identification Number					
Candidate Name DeSaulnier, Mark, , Rep., Office Sought:			20006		C C00554709					
Cardidate Name DeSaulnier, Mark, , Rep., Office Sought:	Contribution to Committee									
Office Sought:										
Senate Primary X General Other (specify) Full Name (Last, First, Middle Initial) B.		ement For:	2022	Туре	1000.00					
State: CA District: 10 Full Name (Last, First, Middle Initial) B. Mailing Address City										
B. Mailing Address City Purpose of Disbursement Candidate Name Office Sought: House Primary General State: Disbursement Candidate Name Category/ Type Office Sought: President Disbursement For: Senate Primary General Other (specify) City State: Disbursement For: Senate Primary General Other (specify) City State: Disbursement For: Senate Primary General Other (specify) Memo Item FEC Identification Number Category/ Type Date of Disbursement this Period FEC Identification Number Category/ Type Date of Disbursement this Period Fec Identification Number Category/ Type Category/ Type Office Sought: House Disbursement For: General Primary General Other (specify) ▼ Senate President Other (specify) ▼ Senate Primary General Other (specify) ▼ Substortal of Disbursements This Page (optional)	President	Other (spe	ecify) 🔻		Memo Item					
Mailing Address City										
City	,	Full Name (Last, First, Middle Initial)								
City					M = M / D = D / Y = Y = Y					
Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Primary General District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Purpose of Disbursement Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Disbursement Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Disbursement Initial Disbursement For: Senate Primary General Disbursement For: Senate Primary General Disbursement For: Senate Primary General Disbursement For: State: District: Memo Item Substitute Disbursement This Page (optional) Memo Item	Mailing Address									
Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Primary General District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Purpose of Disbursement Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Disbursement Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Disbursement Initial Disbursement For: Senate Primary General Disbursement For: Senate Primary General Disbursement For: Senate Primary General Disbursement For: State: District: Memo Item Substitute Disbursement This Page (optional) Memo Item	City	State	Zip Code							
Candidate Name Category/ Type Office Sought:					FEC Identification Number					
Office Sought: House Senate Primary General Primary General Disbursement for: State: District: Memo Item Date of Disbursement City State Zip Code Purpose of Disbursement Candidate Name Candidate Name Office Sought: House Senate Primary General Disbursement Candidate Name Office Sought: House Disbursement For: Senate Primary General Disbursement this Period Type Office Sought: House Disbursement For: Senate Primary General Disbursement this Period Memo Item Substitute: District: Substitute: District: Memo Item FEC Identification Number Category/ Type Memo Item 1000.00	Purpose of Disbursement				C					
Office Sought: House Senate Primary General Other (specify) State: District: Memo Item Date of Disbursement For: Mailing Address Disbursement For: Senate Primary General Other (specify) Type Disbursement Date of D	Candidate Name			Catagony	Amount of Each Dishuranment this Period					
Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code FEC Identification Number Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) Memo Item State: District: Subtrotal of Disbursements This Page (optional)					Amount of Each Dispursement this Period					
State: District: Other (specify) Memo Item		_								
State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Primary General Other (specify) State: District: Substoctal of Disbursements This Page (optional)		,								
City State Zip Code FEC Identification Number Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ State: District: M M M / D D / YYYYY FEC Identification Number Category/ Type Amount of Each Disbursement this Period Memo Item 1000.00		_ other (ope	oony)		Memo Item					
Mailing Address City State Zip Code FEC Identification Number Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ Subtotal of Disbursements This Page (optional)	,									
City State Zip Code FEC Identification Number Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ State: District: Substrict: Memo Item 1000.00	C.				Date of Disbursement					
City Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary Primary General Other (specify) State: Substrict: Substrict: State: State: State: Disbursement For: Senate Primary General Other (specify) Memo Item 1000.00	Mailing Address				M M / D D / Y Y Y Y					
Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General President State: District: Substrict: Memolitem Amount of Each Disbursement this Period Memo Item 1000.00										
Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ Substrict: Memo Item 1000.00	City	State	Zip Code		FEC Identification Number					
Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) ▼ Substrict: Substrict: Memo Item 1000.00	Purpose of Disbursement			C						
Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District: SUBTOTAL of Disbursements This Page (optional)	Out distant Name									
Office Sought: House Disbursement For: Senate Primary General President Other (specify) ▼ Subtrotal of Disbursements This Page (optional)	Candidate Name	Amount of Each Disbursement this Period								
State: Other (specify) Substrict: Memo Item 1000.00	Office Sought: House Disburs	Office Sought: House Disbursement For:								
State: District: Memo Item SUBTOTAL of Disbursements This Page (optional)										
SUBTOTAL of Disbursements This Page (optional)		Other (specify) ▼			Memo Item					
1000 00	State. District.									
1000.00	SUBTOTAL of Disbursements This Page (optional)				1000.00					
				<u>-</u> _	1000.00					