FEC FORM 3X	AN	EPORT O ND DISBU Other Than A	JRSEM	ENTS	ee		Office Use Only	
1. NAME OF COMMITTEE (in fu		FEC MAILING LA		ample:If typing r the lines	, type			
College of America	n Pathologists I	Political Action Con						.
ADDRESS (number and	street)	350 I Street, NW						
Check if differ than previousl reported. (ACC	ent L	Suite 590 Vashington 					20005	-
2. FEC IDENTIFICAT	ION NUMBER	▼	CITY 🛋		S	TATE 🛋	ZIPCO	DE 🔺
C00274944	• • • •		3. IS THIS REPORT		NEW N) OR	AM (A)	IENDED	
July 15 Quarterly October Quarterly January 3	orts: Report(Q1) Report(Q2) 15 Report(Q3)	(b) Monthly Report Due On: (c) 12-Day PRE -Elec: Report for				Sep		Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE) Runoff (12R)
Year Only	on-election	(d) 30-Day Post -Ele Report for		General (300	à)	Runoff (3		Special (30S)
5. Covering Period	09	01 20	10	through	09	30	2010	
I certify that I have exam Type or Print Name of T Signature of Treasurer		Dr. Renee R. Ellert			true, correct a		15	2010
NOTE : Submission of f	alse, erroneous	s, or incomplete info	ormation may su	bject the pers	on signing this	Report to the	penalties of 2 U.S	S.C 437g.
Office Use Only							FEC FOR (Rev. 12/20	M 3X

Image# 10991354625

FEC Form 3X (Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

2 / 67

١	Write or Type Committee Name College of American Pathologists Political	Action Committee	
F	Report Covering the Period: From:	D D Y Y Y Y 01 2010	To:
	-	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1 2010 ^{Y Y Y}		387407.60
	(b) Cash on Hand at Begining of Reporting Period	487768.97]
	(c) Total Receipts (from Line 19)	102592.00	448703.00
	(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	590360.97	836110.60
7.	Total Disbursements (from Line 31)	72565.50	318315.13
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	517795.47	517795.47
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	

X 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

FE6AN026

Image# 10991354626

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

College of American Pathologists Political Action Committee

F	Report Covering the Period: From:	0 1 Y Y W Y 0 1 2 0 1 0	
	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)	95943.00	359936.00
	(ii) Unitemized	6649.00	88767.00
	(iii) TOTAL (add Lines 11(a)(i) and (ii) 🕨	102592.00	448703.00
	(b) Political Party Committees	0.00	0.00
	 (c) Other Political Committees (such as PACs) (d) Total Contributions (add Lines 	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ►	102592.00	448703.00
12.	Transfers From Affiliated/Other 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
	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 Transfer (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))	102592.00	448703.00
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)	102592.00	448703.00

Image# 10991354627

DETAILED SUMMARY PAGE

	FEC Form 3X (Rev. 02/2003)	of Disbursements	4 / 67
	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Shared Federal/Non-Federal		
	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	65.50	1624.35
	Expenditures	05.50	1024.35
	 (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)) 	65.50	1624.35
22.	Transfers to Affiliated/Other Party		
	Committees	0.00	0.00
23.	Contributions to Federal Candidates/Committees	70000.00	010000.00
м	and Other Political Committees Independent Expenditure	72089.90	316280.68
.4.	(use Schedule E)	0.00	0.00
25.	Coordinated Expenditures Made by Party	0.00	0.00
	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26.	Loan Repayments Made	0.00	0.00
	Loans Made	0.00	0.00
8.	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	0.00	0.00
	(such as PACs)	0.00	0.00
	(d) Total Contribution Refunds(add Lines 28(a), (b), and (c))	0.00	0.00
9.	Other Disbursements	410.10	410.10
~			
0.	Federal Election Activity (2 U.S.C 431(20)) (a) Shared 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	0.00	0.00
	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))	72565.50	318315.13
32.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	72565.50	318315.13

FE6AN026

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003) of Disbursements

5 / 67

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)	102592.00	448703.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
 Net Contributions (other than loans) (subtract Line 34 from Line 33) 	102592.00	448703.00
 Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) 	65.50	1624.35
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
 Net Operating Expenditures (subtract Line 37 from Line 36) 	65.50	1624.35

FE6AN026

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for each o Detailed	arate schedule(s) category of the Summary Page	FOR LINE NUMBER: PAGE 6 / 67 (check only one) 11a 11b 11c 12 13 14 15 16 17			
	Any information copied from such Reports and S or for commercial purposes, other than using the	n for the purpose of soliciting contributions solicit contributions from such committee.					
	NAME OF COMMITTEE (In Full)						
	College of American Pathologists Politic	College of American Pathologists Political Action Committee					
A.	Full Name (Last, First, Middle Initial) R Ted Allred, Dr.			Date of Receipt			
	Mailing Address Dept of Pathology 7400 Osborn Rd			0 9 / 2 7 / Y Y Y Y			
	City	State Zip Coo	de	Transaction ID: SA11AI.38848			
	Scottsdale	AZ 85251		Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		500.00			
	Name of Employer Scottsdale Health Care	Occupation Pathologist					
	Receipt For:	Aggregate Year-to-Dat	e 🔻				
	 Primary General Other (specify) ▼ 		500.00				
- B.	Full Name (Last, First, Middle Initial) M. Victor Alvarez, Dr.	Date of Receipt					
	Mailing Address 2970 S Branding Iron	M M / D D / Y Y Y Y 09 14 2010					
	City	State Zip Coo	de	Transaction ID: SA11AI.38849			
	Yuma	AZ 85364-	7444	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		1500.00			
	Name of Employer Yuma Reg Med Ctr	Occupation Pathologist					
	Receipt For:	Aggregate Year-to-Dat	e 🔻				
	Other (specify) ▼		1500.00				
- C.	Full Name (Last, First, Middle Initial) R. William Armstrong, Dr.	I		Date of Receipt			
	Mailing Address Pathology Laboratories 2720 Sunset Blvd	5		09 27 Y Y Y Y 009 27 2010			
	City	State Zip Coo	de	Transaction ID: SA11AI.38852			
	West Columbia	<u>SC 29169-</u>	4810	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		250.00			
	Name of Employer Lexington Med Ctr	Occupation Pathologist					
	Receipt For: Primary General	Aggregate Year-to-Dat	e 🔻				
	Other (specify) v		250.00				
ſ	SUBTOTAL of Receipts This Page (optional)		••••••	2250.00			
ŀ	TOTAL This Period (last page this line number	only)					

Ş	SCHEDULE A (FEC Form 3X))	Use separate schedule(s)	FOR LINE NUMBER: PAGE 7 / 67 (check only one)
ľ	TEMIZED RECEIPTS		for each category of the	X 11a 11b 11c 12
			Detailed Summary Page	
	Any information copied from such Reports and or for commercial purposes, other than using t	I Statements ma he name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)			
	College of American Pathologists Po	olitical Action	Committee	
∠ 4.	Full Name (Last, First, Middle Initial) R. James Baldwin, Dr.	Date of Receipt		
	Mailing Address 2200 W Petty Rd			M + M / D D / Y
	City	State	Zip Code	Transaction ID: SA11AI.38855
	Muncie	IN	47304-3036	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer PA Labs LLC	Occupation Patholog		
	Receipt For:	`	e Year-to-Date V	
	Primary General	33 - 34		
	Other (specify)	0 0	1000.00	
. –	Full Name (Last, First, Middle Initial) Abcar George Bannayan, Dr.			Date of Receipt
	Mailing Address 8026 Floyd Curl Dr	M M / D D / Y Y Y Y 09 03 2010		
	City	State	Zip Code	Transaction ID: SA11AI.38859
	San Antonio	ТХ	78229-3915	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Methodist Hospital	Occupation Patholog		
	Receipt For:	`	e Year-to-Date 🔻	
	Primary General Other (specify) ▼		250.00	
-	Full Name (Last, First, Middle Initial) A. Margaret Batt, Dr.			Date of Receipt
•	A. Margaret Batt, Dr. Mailing Address 9303 Park West Boulevard			0 9 0 3 2 0 1 0
	City	State	Zip Code	Transaction ID: SA11AI.38860
	Knoxville	TN	37923	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Pathology Laboratories We- st	Occupation Patholog		
	Receipt For:	`	e Year-to-Date 🔻	-1
	Primary General Other (specify) ▼		500.00	
Γ	SUBTOTAL of Receipts This Page (optional)			1750.00
F	TOTAL This Period (last page this line numb			
L				-

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 67 (check only one) 11a 11b 11c 12 X 11a 14 15 16 17			
Any information copied from such Reports or for commercial purposes, other than usir	and Statements may not be sold or used by any person ng the name and address of any political committee to s	for the purpose of soliciting contributions			
NAME OF COMMITTEE (In Full) College of American Pathologists					
Full Name (Last, First, Middle Initial) E. Marian Bensema, Dr.		Date of Receipt			
Mailing Address Department of Pa 1740 Nicholasville		M M / D D / Y			
City	State Zip Code	Transaction ID: SA11AI.38861			
Lexington FEC ID number of contributing federal political committee.	KY 40503	Amount of Each Receipt this Period 1000.00			
Name of Employer Central Baptist Hosp	Occupation Pathologist				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00]			
Full Name (Last, First, Middle Initial) Leon Errol Berman, Dr. Mailing Address 94 Old Short Hills	Leon Errol Berman, Dr.				
City	State Zip Code	09 27 2010			
Livingston	NJ 07039-5672	Transaction ID: SA11AI.38864 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	300.00			
Name of Employer St Barnabas Med Ctr	Occupation Pathologist				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00				
Full Name (Last, First, Middle Initial) F. Peter Bernhardt, Dr.		Date of Receipt			
Mailing Address Department of Pa 800 Biesterfield R		09 / 27 / Y Y Y Y 09 27 2010			
City Elk Grove Village	State Zip Code IL 60007-3397	Transaction ID: SA11AI.38865 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	1000.00			
Name of Employer Alexian Brothers Med Ctr	Occupation Pathologist				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00				
SUBTOTAL of Receipts This Page (option	nal)	2300.00			
TOTAL This Period (last page this line nu	mber only)				

SCHEDULE A (FEC FOR ITEMIZED RECEIPTS	orm 3X) Use separate schedule(for each category of the Detailed Summary Page				
Any information copied from such or for commercial purposes, other	ny information copied from such Reports and Statements may not be sold or used by any persor r for commercial purposes, other than using the name and address of any political committee to s				
NAME OF COMMITTEE (In Fu College of American Patho	ull) plogists Political Action Committee				
Full Name (Last, First, Middle In K. James Billman, Dr.	nitial)	Date of Receipt			
Mailing Address 1520 7th S	St 6th Floor	M M / D D / Y Y Y Y 09 17 2010			
City	State Zip Code	Transaction ID: SA11AI.38866			
Moline	IL 61265-2986	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	500.00			
Name of Employer Metropolitan Medical Lab	Occupation Pathologist				
Receipt For:	Aggregate Year-to-Date ▼				
Other (specify)	500.00				
Full Name (Last, First, Middle I Mulkey Melissa Blann, Dr.	nitial)	Date of Receipt			
Mailing Address 3810 152n	d St	09 / Y Y Y Y 14 2010			
City	State Zip Code	Transaction ID: SA11AI.38869			
Lubbock	TX 79423-6310	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	1000.00			
Name of Employer Covenant Med Ctr-Lakeside	Occupation Pathologist				
Receipt For: Primary Genera	Aggregate Year-to-Date ▼				
Other (specify)	1000.00				
Full Name (Last, First, Middle I G. Jared Block, Dr.	nitial)	Date of Receipt			
Mailing Address 2928 Fore	st Park Dr	09 15 Y Y Y Y 09 15 2010			
City	State Zip Code	Transaction ID: SA11AI.38870			
Charlotte	NC 28209-1402	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	200.00			
Name of Employer Carolinas Med Ctr - Unive- rsity	Occupation Pathologist				
Receipt For:	Aggregate Year-to-Date ▼				
Other (specify) ▼	400.00				
SUBTOTAL of Receipts This Pac	ge (optional)	1700.00			
	- (

c	SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 10/67				
		Use separate schedule(s) for each category of the	(check only one)				
		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17				
	Any information copied from such Reports and St or for commercial purposes, other than using the	atements may not be sold or used by any persor name and address of any political committee to s	n for the purpose of soliciting contributions				
	NAME OF COMMITTEE (In Full)	NAME OF COMMITTEE (In Full)					
	College of American Pathologists Politi	cal Action Committee					
Α.	Full Name (Last, First, Middle Initial) M. Andrea Blumstein, Dr.		Date of Receipt				
	Mailing Address 5400 Pearl St		M M / D D / Y				
	City	State Zip Code	Transaction ID: SA11AI.38872				
	Rosemont	IL 60018-5305	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	250.00				
	Name of Employer ACL Illinois Central Labo- ratory	Occupation Pathologist					
	Receipt For:	Aggregate Year-to-Date ▼	-				
	Primary General Other (specify) ▼	250.00					
— В.	Full Name (Last, First, Middle Initial) W. Henry Bockelman, Dr.		Date of Receipt				
	Mailing Address Department of Patholog 600 Mary Street	ĴŶ	0 9 / D D / Y Y Y Y 2 4 2 0 1 0				
	City	State Zip Code	Transaction ID: SA11AI.38873				
	Evansville	IN 47747	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	1000.00				
	Name of Employer Deaconess Hosp	Occupation Pathologist					
	Receipt For:	Aggregate Year-to-Date V					
	Primary General Other (specify)	1000.00					
– c.	Full Name (Last, First, Middle Initial) L. David Booker, Dr.		Date of Receipt				
	Mailing Address Department of Patholog 2260 Wrightsboro Rd.	Эу	M M / D D / Y Y Y Y 09 / 15 / 2010				
	City	State Zip Code	Transaction ID: SA11AI.38874				
	Augusta	GA 30904	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	250.00				
	Name of Employer St. Joseph Hosp	Occupation Pathologist					
	Receipt For:	Aggregate Year-to-Date 🔻					
	Primary General Other (specify) ▼	1750.00					
Γ	SUBTOTAL of Receipts This Page (optional)		1500.00				
	TOTAL This Period (last page this line number of						

I	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 67 (check only one) 11a X 11a 11b 13 14 15 16 17
,	Any information copied from such Reports and S or for commercial purposes, other than using the	on for the purpose of soliciting contributions o solicit contributions from such committee.		
$\left \right $	NAME OF COMMITTEE (In Full) College of American Pathologists Poli	itical Action (Committee	
А.	Full Name (Last, First, Middle Initial) Miller Alyson Booth, Dr.			Date of Receipt
	Mailing Address 1840 Wealthy St SE			M M / D D / Y Y Y Y 09 27 2010
	City	State	Zip Code	Transaction ID: SA11AI.38875
	Grand Rapids	MI	49506-2921	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		2000.00
	Name of Employer Spectrum Health	Occupation Patholog		
	Receipt For:		Year-to-Date 🔻	
	Primary General Other (specify)		2000.00]
- В.	Full Name (Last, First, Middle Initial) M David Borel, Dr.			Date of Receipt
	Mailing Address 5650 SW 29th St		M + M / D + D / Y + Y + Y Y	
	City	State	Zip Code	Transaction ID: SA11AI.38876
	Topeka	KS	66614-2443	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Pathology Services PA	Occupation Patholog		
	Receipt For:	Aggregate	Year-to-Date 🔻	_
	Primary General Other (specify) ▼	0 0	250.00]
- С.	Full Name (Last, First, Middle Initial) W. Arthur Bracey, Dr.	1		Date of Receipt
	Mailing Address Department of Patholo 6720 Bertner	ogy-P125E		M M / D D / Y
	City Houston	State TX	Zip Code 77030	Transaction ID: SA11AI.38877
	FEC ID number of contributing federal political committee.	C	//030	Amount of Each Receipt this Period
	Name of Employer St. Luke's Episcopal Hosp	Occupation		
	Receipt For:	Patholog	IST Year-to-Date ▼	_
	Primary General Other (specify) ▼		1000.00]
Γ	SUBTOTAL of Receipts This Page (optional)	1		3250.00
F	TOTAL This Period (last page this line number			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER FOR LINE NUMBER Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of solid or for commercial purposes, other than using the name and address of any political committee to solid contributions from NAME OF COMMITTEE (in Full) Date of Receipt NAME OF COMMITTEE (in Full) Date of Receipt Date of Receipt Anight Address 2078 Fargo Blvd. City State Zip Code Geneva IL 60134 Amount of Each F FEC ID number of contributing federal political committee. C Amount of Each F Name (Last, First, Middle Initial) Pathologist Amount of Each F And and derses Dopt of Path Lab Siste Zip Code City General Occupation Pathologist Philip Thomas Brien, Dr. Date of Receipt Siste Zip Code City Siste Zip Code Transaction ID: Siste Zip Code City Siste Zip Code Amount of Each F Siste Zip Code City Siste Zip Code Transaction ID: Siste Zip Code Amo	PAGE 12/67
Teinize Diffection region Detailed Summary Page X 11 a 11 b Intermetion copied from such Reports and Statements may not be sold or used by any parson for the purpose of soli of for committee to solicit contributions from the numeral address of any political committee to solicit contributions from the numeral address of any political committee to solicit contributions from the number of contributions from the number of contributions from the number of contributing tederal political committee. Date of Receipt Name (Last, First, Middle Initia) Ann Marybe Brankew, Dr. Date of Receipt Mailing Address 2078 Fargo Bivd. Transaction ID: 2 City State Zip Code Geneva IL 60134 FEC ID number of contributing tederal political committee. C Aggregate Year-to-Date ✓ Aggregate Year-to-Date ✓ Aggregate Year-to-Date ✓ Mailing Address Dept of Path Lab 2525 DeSales Ave Ø City State Zip Code Chattanooga TN 37404-1102 FEC ID number of contributing tederal political committee. C Amourt of Each F PEC On umber of contributing tederal political committee. C Transaction ID: 2 R	
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soli or for commercial purposes, other than using the name and address of any political committee to solicit contributions from NAME OF COMMITTEE (in Full) NAME OF COMMITTEE (in Full) Date of Receipt Mailing Address 2078 Fargo Blvd. City State Zip Code Geneva IL 60134 FEC ID number of contributing federal political committee. C Amount of Each P Name of Employer ACL links Central Labo Coccupation Pathologist Amount of Each P FUI Name (Last, First, Middle Initial) Aggregate Year-to-Date ▼ Date of Receipt Maiing Address Dept of Path Lab 22 Transaction ID: S Maiing Address Dept of Path Lab 23 Amount of Each P City State Zip Code Transaction ID: S Maiing Address Dept of Path Lab 24 Transaction ID: S City State Zip Code Transaction ID: S Amount of Each P FEC ID number of contributing federal political committee. C Transaction ID: S Amount of Each P Vintance C C Transaction ID: S Amount of Each	11c 12 15 16
College of American Pathologists Political Action Committee Full Name (Last, First, Middle Initial) Ann Marylee Braniecki, Dr. Mailing Address 2078 Fargo Blvd. City State Zip Code Geneva IL 60134 FEC ID number of contributing federal political committee. C Amount of Each R Name of Employer ACL Illinos Central Labo- ratory Occupation Pathologist Aggregate Year-to-Date Image: Common Pathologist Receipt For: Primary General 500.00 Image: Common Pathologist Mailing Address Dept of Path Lab 20 Image: Common Pathologist Preceipt For: Primary General Image: Common Pathologist Mailing Address Dept of Path Lab Zip Code City State Zip Code City General Occupation Primary General Occupation Mailing Address Pathologist Aggregate Year-to-Date Receipt For: Aggregate Year-to-Date Transaction ID: S Mamount of Each R Aggregate Year-to-Date Transaction ID: S Mailing Address Patholo	citing contributions
Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address 2078 Fargo Blvd. City State Zip Code Geneva IL 60134 FEC ID number of contributing C Transaction ID: S Mailing Address 2078 Fargo Blvd. Mailing Address Annount of Each P Receipt For: Occupation Pathologist Annount of Each P Name of Employer Aggregate Year-to-Date ▼ Date of Receipt Mailing Address Philip Thomas Bren, Dr. Aggregate Year-to-Date ▼ Date of Receipt Mailing Address Pathologist Mailing Address Dept of Path Lab Date of Receipt 2525 DeSales Ave City State Zip Code City State Zip Code Transaction ID: S Mailing Address Dept of Path Lab Aggregate Year-to-Date Amount of Each P Memorial Hosp-Chatanacoga Occupation Pathologist Amount of Each P Memorial Hosp-Chatanacoga Occupation Pathologist Amount of Each P Mailing Address Pathology Department 2213 Cherry Street Transaction ID: S Amount o	
Ann Maryles Braniecki, Dr. Date of Receipt Mailing Address 2078 Fargo Blvd. City State Zip Code Geneva IL 60134 FEC ID number of contributing rederal political committee. C Transaction ID: S Name of Employer ACL lilinois Central Labo- ratery Occupation Pathologist Annount of Each R Peceipt For: Peceipt For: Other (specify) ▼ Occupation Pathologist Date of Receipt Mailing Address Dept of Path Lab 2525 DeSales Ave Transaction ID: S City State Zip Code Transaction ID: S Mailing Address Dept of Path Lab 2525 DeSales Ave Date of Receipt City State Zip Code Transaction ID: S Name of Employer Memorial Hosp-Chattanooga Pathologist Amount of Each R Receipt For: Other (specify) ▼ Occupation Pathologist Date of Receipt Mailing Address Pathology Department 2213 Cherry Street Date of Receipt Mailing Address Pathology Department 2213 Cherry Street Transaction ID: S City State Zip Code Transaction ID: S Toledo OH 43608 Amount of Ea	
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NAME OF COMMITTEE (In Full) College of American Pathologists F	NAME OF COMMITTEE (In Full) College of American Pathologists Political Action Committee Full Name (Last, First, Middle Initial)				
Full Name (Last, First, Middle Initial) L Irwin Browarsky, Dr.					
Mailing Address 1 Tampa General C	09 / 17 / Y Y Y Y 09 17				
City	State Zip Code	Transaction ID: SA11AI.38882			
Tampa	FL 33606-3571	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	500.00			
Name of Employer Tampa General Hospital	Occupation Pathologist				
Receipt For:	Aggregate Year-to-Date ▼				
Primary General Other (specify)	500.00				
Full Name (Last, First, Middle Initial) D Linda Burkhardt, Dr.		Date of Receipt			
Mailing Address 151 S 297th Pl		M M / D D Y			
City	State Zip Code	Transaction ID: SA11AI.38883			
Federal Way	WA 98003-3629	Amount of Each Receipt this Period			
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Name of Employer Puget Sound Inst of Patho- logy PLLC	Occupation Pathologist				
Receipt For:	Aggregate Year-to-Date 🔻				
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Full Name (Last, First, Middle Initial) C. Neil Caliman, Dr.		Date of Receipt			
Mailing Address 1650 Ramblewook	Ste 100	M M / D D / Y Y Y Y 09 27 2010			
City	State Zip Code	Transaction ID: SA11AI.38885			
East Lasing	MI 48823	Amount of Each Receipt this Period			
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Name of Employer Michigan Gastroerology In- st	Occupation Pathologist				
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	NAME OF COMMITTEE (In Full) College of American Pathologists Political Action Committee				
Full Name (Last, First, Mid K. David Carter, Dr.	dle Initial)	Date of Receipt			
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Duluth FEC ID number of contribu	MN	55805	Amount of Each Receipt this Period		
federal political committee.	C		500.00		
Name of Employer St. Mary's/Duluth Clinic	Occupation Pathology				
Health System Receipt For:	`	e Year-to-Date 🔻	_		
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Full Name (Last, First, Mid Victor Casas	dle Initial)		Date of Receipt		
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Name of Employer John F. Kennedy Med Ctr	Occupation Pathology		_		
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	NAME OF COMMITTEE (In Full) College of American Pathologists Poli			
A .	Full Name (Last, First, Middle Initial) A. Barbara Centeno, Dr.			Date of Receipt
	Mailing Address Laboratory 12902 Magnolia Drive			09 27 Y Y Y Y 09 27 2010
	City	State	Zip Code	Transaction ID: SA11AI.38889
	<u>Tampa</u>	FL	33612	Amount of Each Receipt this Period
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	Name of Employer H Lee Moffitt Cancer Ctr	Occupation Patholog		
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В.	Full Name (Last, First, Middle Initial) L. Lisa Chandler, Dr.			Date of Receipt
	Mailing Address Laboratory PO Box 279			M M M / D D / Y Y Y Y Y 0 9 2 7 2 0 1 0 10
	City Oxford	State MS	Zip Code 38655	Transaction ID: SA11AI.38890
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	NAME OF COMMITTEE (In Full)					
	College of American Pathologists Polit	College of American Pathologists Political Action Committee				
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	Long Beach	CA	90815-4129	Amount of Each Receipt this Period		
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в.	Full Name (Last, First, Middle Initial) S. DeWitt Davenport, Dr.			Date of Receipt		
υ.	Mailing Address 5013 Oakmont					
	City	State	Zip Code	Transaction ID: SA11AI.38902		
	Harlingen	ТХ	78552	Amount of Each Receipt this Period		
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A.	Full Name (Last, First, Middle Initial) B Kevin Dole, Dr.	Date of Receipt		
	Mailing Address Department of Patho 2100 Dorchester Ave			M M / D D Y
	City	State	Zip Code	Transaction ID: SA11AI.38904
	Boston	MA	02124	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Carney Hosp	Occupation Pathologi		_
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- В.	Full Name (Last, First, Middle Initial) W. Jordan Eggers, Dr.			Date of Receipt
	Mailing Address 38 Woodland Dr			M M / D D / Y
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- C.	Full Name (Last, First, Middle Initial) L. Marianne Feran, Dr.	1		Date of Receipt
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	Melrose	MA	02176-3601	Amount of Each Receipt this Period
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	COMMITTEE (In Full)			
College of	f American Pathologists Pol	itical Action C	ommittee	
A. Michael Jose	Last, First, Middle Initial) eph Foley, Dr.	Date of Receipt		
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	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 19/67
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	TEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
	Any information copied from such Reports and Sta or for commercial purposes, other than using the	atements may name and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	College of American Pathologists Politi	ical Action (Committee	
Α.	Full Name (Last, First, Middle Initial) P. John Fullenwider, Dr.	Date of Receipt		
	Mailing Address Department of Patholog 2301 South Lamar Blvd	M M / D D / Y Y Y Y </th		
	City	State	Zip Code	Transaction ID: SA11AI.38914
	Oxford	MS	38655	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Baptist Memorial Hosp	Occupatio Patholog		
	Receipt For:		e Year-to-Date V	
	Primary General	Aggregate		1
	Other (specify)	0 0	250.00	
в.	Full Name (Last, First, Middle Initial) J. Michael Gandour, Dr.			Date of Receipt
	Mailing Address Dept of Path/Lab 4500 13th St			09 / 17 / Y Y Y Y 09 / 17
	City State		Zip Code	Transaction ID: SA11AI.38915
	<u>Gulfport</u>	MS	39501	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Memorial Hosp @ Gulfport	Occupatio Patholog		
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼	0 0	500.00]
С.	Full Name (Last, First, Middle Initial) F. Eric Glassy, Dr.			Date of Receipt
•	Mailing Address 19951 Mariner Ave Ste	160		M M / D D / Y Y Y Y 09 14 2010
	City	State	Zip Code	Transaction ID: SA11AI.38916
	Torrance	CA	90503-1738	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Little Company of Mary Ho- sp-Torrance	Occupatio Patholog		
	<u>spronance</u>		e Year-to-Date 🔻	7
	Primary General		500.00	1
	Other (specify) v			
	SUBTOTAL of Receipts This Page (optional)		••••••	1250.00
	TOTAL This Period (last page this line number of	only)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 67 (check only one) 11a X 11a 11b 11c 12 13 14 15 16 17				
Γ	Any information copied from such Reports and s or for commercial purposes, other than using the	Any information copied from such Reports and Statements may not be sold or used by any persor or for commercial purposes, other than using the name and address of any political committee to s					
	NAME OF COMMITTEE (In Full) College of American Pathologists Pol	itical Action Committee					
۷ A .	Full Name (Last, First, Middle Initial) M Allen Gown, Dr.	Date of Receipt					
	Mailing Address 551 N 34th St Ste 100	M M / D D / Y Y Y Y 09 14 2010					
	City	State Zip Code	Transaction ID: SA11AI.38918				
	Seattle	WA 98103-8675	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	1500.00				
	Name of Employer PhenoPath Labs	Occupation Pathologist					
	Receipt For:	Aggregate Year-to-Date ▼	1				
	Primary General Other (specify) ▼	1500.00					
– В.	Full Name (Last, First, Middle Initial) Jacqueline Granese]	Date of Receipt				
	Mailing Address 240 Bent Creek Dr		09 / 24 / Y Y Y Y 2010				
	City	State Zip Code	Transaction ID: SA11AI.38919				
	Bowling Green	KY 42103	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.		500.00				
	Name of Employer Univ of Tennessee HSC	Occupation Pathologist					
	Receipt For: Primary General	Aggregate Year-to-Date ▼					
	Other (specify) v	500.00					
– C.	Full Name (Last, First, Middle Initial) C Joyce Greathouse		Date of Receipt				
	Mailing Address 760 Airport Rd		M M / D D / Y Y Y Y 09 03 2010				
	City	State Zip Code	Transaction ID: SA11AI.38920				
	Panama City	FL 32405-4003	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.		1000.00				
	Name of Employer Bay Pathology Associates	Occupation Pathologist					
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00					
Γ	SUBTOTAL of Receipts This Page (optional) .	· ·····	3000.00				
F	TOTAL This Period (last page this line number	r only)					

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and	for each category of the Detailed Summary Page Statements may not be sold or used by any perso	FOR LINE NUMBER: PAGE 21 / 67 (check only one) 11a X 11a 11b 11c 12 13 14 15 16 17 on for the purpose of soliciting contributions			
	or for commercial purposes, other than using th	r for commercial purposes, other than using the name and address of any political committee to so				
	College of American Pathologists Po					
A.	Full Name (Last, First, Middle Initial) M Vito Gulli, Dr.	Date of Receipt				
	Mailing Address 1 Channel Dr Unit 12		09 / 08 / Y Y Y Y 2010			
	City	State Zip Code	Transaction ID: SA11AI.38921			
	Monmouth Beach	NJ 07750	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.		1500.00			
	Name of Employer Unaffiliated	Occupation Pathologist				
	Receipt For:	Aggregate Year-to-Date V	_			
	Other (specify) ▼	1500.00]			
в.	Full Name (Last, First, Middle Initial) A. Jedd Hagen, Dr.		Date of Receipt			
	Mailing Address West Central Patholo PO Box 841	0 9 / D D / Y Y Y Y 2 4 2 0 1 0				
	City Carroll	State Zip Code	Transaction ID: SA11AI.38922			
	FEC ID number of contributing federal political committee.	IA 51401	Amount of Each Receipt this Period			
	Name of Employer St. Anthony Hosp	Occupation Pathologist				
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date 500.00]			
с.	Full Name (Last, First, Middle Initial) Dwayne Brent Hall, Dr. Mailing Address PO Box 1818		Date of Receipt			
	City	State Zip Code	0 9 2 7 2 0 1 0 Transaction ID: SA11AI.38923			
	Boone	NC 28607-1818	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.		1000.00			
	Name of Employer unaffiliated	Occupation Pathologist				
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date 1000.00]			
	SUBTOTAL of Receipts This Page (optional)	······	3000.00			
	TOTAL This Period (last page this line number	er only)				

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Statements ma	Use separate schedule(s) for each category of the Detailed Summary Page y not be sold or used by any pers	FOR LINE NUMBER:PAGE $22/67$ (check only one)(check only one)X11a11b131415151617son for the purpose of soliciting contributions on participut from such committee
	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) College of American Pathologists Po	o solicit contributions from such committee.		
Α.	Full Name (Last, First, Middle Initial) E Allan Hallquist, Dr.	Date of Receipt		
	Mailing Address 13351 Rosehawk Dr	09 24 Y Y Y Y 2010		
	City	State	Zip Code	Transaction ID: SA11AI.38924
	Morningview	KY	41063	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Kings Daughters Med Ctr	Occupatio Patholog		
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	_
	Other (specify) ▼	0 0	500.00	
В.	Full Name (Last, First, Middle Initial) Rasheed Hammadeh			Date of Receipt
	Mailing Address 1029 Oakwood Dr			09 27 Y Y Y Y 009 27 2010
	City	State	Zip Code	Transaction ID: SA11AI.38926
	Westmont	IL	60559-1039	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Advocate Christ Medical Center	Occupatio Patholog		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 250.00	
C.	Full Name (Last, First, Middle Initial) J. Daniel Hanson, Dr.			Date of Receipt
	Mailing Address 5347 Farmington Rd			0 9 / D D / Y Y Y Y 2 4 2 0 1 0
	City	State	Zip Code	Transaction ID: SA11AI.38927
	Toledo	OH	43623	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer unafilliated	Occupatio Patholog	pist	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)			1000.00
	SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number			• 1000.00

	SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page d Statements may not be sold or used by any perso the name and address of any political committee to	FOR LINE NUMBER: PAGE 23 / 67 (check only one) 11a 11b 11c 12 13 14 15 16 17 on for the purpose of soliciting contributions solicit contributions solicit contributions
	NAME OF COMMITTEE (In Full) College of American Pathologists P	Solicit contributions from SUCH Committee.	
A.	Full Name (Last, First, Middle Initial) J. Daniel Hanson, Dr.	Date of Receipt	
	Mailing Address 5347 Farmington R	09 27 Y Y Y Y 2010	
	City	State Zip Code	Transaction ID: SA11AI.38928
	Toledo	OH 43623	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		250.00
	Name of Employer unafilliated	Occupation Pathologist	
	Receipt For:	Aggregate Year-to-Date ▼	
	 Primary General Other (specify) ▼ 	500.00	
- B.	Full Name (Last, First, Middle Initial) C. John Harrison, Dr.		Date of Receipt
	Mailing Address 2904 Westcorp Blvo	0 9 / 0 3 / Y Y Y Y 0 9 / 0 3 / 2 0 1 0	
	City	State Zip Code	Transaction ID: SA11AI.38929
	Huntsville	AL 35805-6437	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	300.00
	Name of Employer Pathology Associates PC	Occupation Pathologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00]
- C.	Full Name (Last, First, Middle Initial) E James Haswell, Dr.		Date of Receipt
	Mailing Address 11 Greystone Farm	Ln	09 / Y Y Y Y 09 24 2010
	City	State Zip Code	Transaction ID: SA11AI.38930
	Westport	CT 06880-2750	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer Griffin Hosp	Occupation Pathologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00]
ſ	SUBTOTAL of Receipts This Page (optiona	l)	1550.00
	TOTAL This Period (last page this line numl	ber only)	

	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 24/67		
	ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)		
			Detailed Summary Page	X 11a 11b 11c 12		
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any pers dress of any political committee t	13 14 15 16 17 son for the purpose of soliciting contributions to solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full)					
	College of American Pathologists Polit	College of American Pathologists Political Action Committee				
A.	Full Name (Last, First, Middle Initial) N. Gene Herbek, Dr.	Date of Receipt				
	Mailing Address The Pathology Center 8303 Dodge St	09 / D D / Y Y Y Y 2010				
	City	State	Zip Code	Transaction ID: SA11AI.38932		
	Omaha	NE	68114	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		225.00		
	Name of Employer Methodist Hospital	Occupation Patholog				
	Receipt For:	Aggregate	e Year-to-Date 🔻			
	Primary General Other (specify) ▼	0 0	900.00			
В.	Full Name (Last, First, Middle Initial) S David Hewitt, Dr.			Date of Receipt		
	Mailing Address 316 S Dunworth St			M M / D D / Y Y Y Y 0 9 0 3 2 0 1 0		
	City	State	Zip Code	Transaction ID: SA11AI.38935		
	Visalia	CA	93292-6702	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		500.00		
	Name of Employer Visalia Path Grp	Occupation Patholog				
	Receipt For:	Aggregate	e Year-to-Date 🔻			
	Primary General Other (specify) ▼	0 0	500.00			
C.	Full Name (Last, First, Middle Initial) G Thomas Hirose, Dr.			Date of Receipt		
	Mailing Address 4061 Davenport Dr			M M / D D / Y Y Y Y 09 03 2010		
	City	State	Zip Code	Transaction ID: SA11AI.38937		
	Huntington Beach	CA	92649-4223	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		500.00		
	Name of Employer Good Samaritan Hosp	Occupation Patholog	gist			
	Receipt For:	Aggregate	e Year-to-Date 🔻	_		
	Other (specify) ▼		500.00			
	SUBTOTAL of Receipts This Page (optional)			1225.00		
	TOTAL This Period (last page this line number			•		

	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 25 / 67
	ITEMIZED RECEIPTS	for each category of the	(check only one)	
			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
[Any information copied from such Reports and	Statomanta m-	v not be cold or used by only and	
	or for commercial purposes, other than using the	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	College of American Pathologists Pol	litical Action	Committee	
•	, Full Name (Last, First, Middle Initial) C. David Hoak, Dr.	Date of Receipt		
Α.	Mailing Address PO Box 3405			
	Maining Address PO Box 3403			09 24 2010
	City	State	Zip Code	Transaction ID: SA11AI.38938
	Spokane	WA	99220-3405	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		1500.00
	Name of Employer	Occupatio		
	InCyte Pathology PS	Occupatio Patholog		
	Receipt For:	~	e Year-to-Date 🔻	
	Primary General	, iggi egale		
	Other (specify)		1500.00	
- ·	Full Name (Last, First, Middle Initial)			
В.	D Pamela Holder, Dr.			Date of Receipt
	Mailing Address 8022 Clarion Way			0 9 1 4 2 0 1 0
	City	State	Zip Code	Transaction ID: SA11AI.38940
	Houston	TX	77040-2582	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		500.00
	Name of Employer Laboratory Corporation of	Occupatio Patholog		
	America Receipt For:	×		
	Primary General	Aggregate	e Year-to-Date	
	Other (specify)		500.00	
				-
-	Full Name (Last, First, Middle Initial)			
C.	N. Ronald Horowitz, Dr.			Date of Receipt
	Mailing Address Department of Pathol PO Box 30480	ogy		09 24 2010
	City	State	Zip Code	Transaction ID: SA11AI.38941
	Lansing	MI	48909-7980	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		350.00
				_
	Name of Employer Sparrow Health Sys	Occupatio		
	Receipt For:	Patholog	·	
	Primary General	Aggregate	e Year-to-Date 🔻	-
	Other (specify)		350.00	
				-
[-		
	SUBTOTAL of Receipts This Page (optional).			2350.00
	TOTAL This Period (last page this line number	r only)		
I				

:	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 26 / 67
	ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12
Г				
	Any information copied from such Reports and Sta or for commercial purposes, other than using the r	atements may name and ado	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)		2	
	College of American Pathologists Politi	cal Action (Committee	
A.	Full Name (Last, First, Middle Initial) Ellen Jeanne Hryciuk, Dr.			Date of Receipt
	Mailing Address 4539 A Da Hi Court			0 9 2 7 2 0 1 0
	City	State	Zip Code	Transaction ID: SA11AI.38943
	Hubertus	WI	53033	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Wheaton Franciscan Labs	Occupatio Patholog		
	Receipt For:		e Year-to-Date 🔻	
	Primary General		1000.00	1
	Other (specify)	0 0		1
- В.	Full Name (Last, First, Middle Initial) J. Robert Hubbard, Dr.			Date of Receipt
	Mailing Address Dept. of Laboratory Ser			M M / D D / Y Y Y Y
	1805 Medical Center Dr City	rive State	Zip Code	0 9 2 7 2 0 1 0 Transaction ID: SA11AI.38944
	San Bernardino	CA	92411	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		750.00
	Name of Employer San Bernardino Community	Occupatio		
	Hosp Receipt For:	Patholog	e Year-to-Date 🔻	_
	Primary General	Aggregate		1
	Other (specify)	0 0	750.00	
- C.	Full Name (Last, First, Middle Initial) Andrew Michael Huening, Dr.			Date of Receipt
	Mailing Address Department of Patholog WakeMed Health & Hos]y spitals		0 9 0 3 2 0 1 0
	City	State	Zip Code	Transaction ID: SA11AI.38945
	Raleigh	NC	27610-1231	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		750.00
	Name of Employer Raleigh Pathology Lab Ass- oc PA	Occupatio Patholog		
	Receipt For:	v	e Year-to-Date V	_
	Primary General Other (specify) ▼	0 0	750.00]
Γ				2500.00
┝	SUBTOTAL of Receipts This Page (optional)			
	TOTAL This Period (last page this line number of	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 67 (check only one) 11a 11b 11c 12 13 14 15 16 17 on for the purpose of soliciting contributions 100 100 100
	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) College of American Pathologists Pol	solicit contributions from such committee.	
Α.	Full Name (Last, First, Middle Initial) O. Dervila Jonas, Dr.	Date of Receipt	
	Mailing Address 418 Mosby Dr. S.W.		09 / 14 / Y Y Y Y 09 / 14
	City	State Zip Code	Transaction ID: SA11AI.38947
		VA 20175	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		500.00
	Name of Employer Inova Loudoun Hosp	Occupation Pathologist	
	Receipt For:	Aggregate Year-to-Date ▼	7
	Primary General Other (specify) ▼	500.00]
в.	Full Name (Last, First, Middle Initial) T. Michael Kafka, Dr.		Date of Receipt
	Mailing Address Department of Pathole 2720 Stone Park Blvd		M M / D D / Y Y Y Y 09 10 2010
	City	State Zip Code	Transaction ID: SA11AI.38949
	Sioux City FEC ID number of contributing federal political committee.	IA 51104	Amount of Each Receipt this Period
	Name of Employer St. Luke's Reg Med Ctr	Occupation Pathologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00]
C.	Full Name (Last, First, Middle Initial) Alexandre Andre Kajdacsy-Balla, Dr. Mailing Address Dept of Path 840 S Wood St CSN	130	Date of Receipt
	City	State Zip Code	Transaction ID: SA11AI.38951
	<u>Chicago</u>	IL 60612-4356	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Univ of Illinois at Chica- go	Occupation Pathologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date 250.00]
	SUBTOTAL of Receipts This Page (optional).	······	2250.00
	TOTAL This Period (last page this line number	r only)	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedu for each category of t Detailed Summary Pa	he X 11a 11b 11c 12 age 13 14 15 16 17
	or for commercial purposes, other than using the	name and address of any political com	any person for the purpose of soliciting contributions mittee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) College of American Pathologists Politi	cal Action Committee	
Α.	Full Name (Last, First, Middle Initial) H Richard Kelty, Dr.	Date of Receipt	
	Mailing Address 3664 Twin Lake Ridge		09 / D D / Y Y Y Y 09 / 14 / 2010
	City	State Zip Code	Transaction ID: SA11AI.38953
	Westlake Village FEC ID number of contributing	CA 91361-3927	Amount of Each Receipt this Period
	federal political committee.		
	Name of Employer Los Robles Reg Med Ctr	Occupation Pathologist	
	Receipt For:	Aggregate Year-to-Date ▼	
	Other (specify)	250	.00
В.	Full Name (Last, First, Middle Initial) S Oliver Kim, Dr.		Date of Receipt
	Mailing Address Department of Patholog 450 West Hwy 22	У	M M / D D / Y
	City Barrington	State Zip Code	Transaction ID: SA11AI.38955
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
	Name of Employer Good Shepherd Hosp	Occupation Pathologist	
	Receipt For:	Aggregate Year-to-Date ▼	
	Other (specify) ▼	1000	.00
C.	Full Name (Last, First, Middle Initial) L. Lynn Kleopfer, Dr.		Date of Receipt
	Mailing Address 200 Portland St		0 9 2 4 2 0 1 0
	City	State Zip Code	Transaction ID: SA11AI.38956
	Columbia FEC ID number of contributing federal political committee.	MO 65201-6525	Amount of Each Receipt this Period 250.00
	Name of Employer Boyce & Bynum PS Inc	Occupation Pathologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250	.00
	SUBTOTAL of Receipts This Page (optional)		
	TOTAL This Period (last page this line number of	nly)	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for each Detailed tatements may not be solo	parate schedule(s) category of the Summary Page d or used by any perso	FOR LINE NUMBER: PAGE 29 / 67 (check only one) 11c 12 X 11a 11b 11c 12 13 14 15 16 17 n 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 Polit	ical Action Committee	9	
Α.	Full Name (Last, First, Middle Initial) C Nancy Kois, Dr.	Date of Receipt		
	Mailing Address 1577 E Holly St			M M / D D / Y
	City	State Zip Co	de	Transaction ID: SA11AI.38957
	Boise	ID 83712		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer St. Alphonsus Regional Med Ctr	Occupation Pathologist		_
	Receipt For:	Aggregate Year-to-Da	ite 🔻	-
	Primary General		250.00	
	Other (specify) ▼	0 0 0 0	250.00	
в.	Full Name (Last, First, Middle Initial) Shannon Kratzer			Date of Receipt
	Mailing Address 2323 Matador Cir			0 9 1 7 2 0 1 0
	City	State Zip Co	de	Transaction ID: SA11AI.38959
	Austin	TX 78746	;	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Clinical Pathology Assoc	Occupation Pathologist		
	Receipt For:	Aggregate Year-to-Da	ite 🔻	
	Primary General Other (specify) ▼		500.00	
C.	Full Name (Last, First, Middle Initial) Alan Levin			Date of Receipt
	Mailing Address Laboratory 1800 SE Tiffany			M M / D D / Y Y Y Y 09 24 2010
	City	State Zip Co	de	Transaction ID: SA11AI.38963
	Port St Lucie	FL 34952		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer St. Lucie Medical Centerr	Occupation Pathologist		
	Receipt For:	Aggregate Year-to-Da	ite 🔻	
	Primary General Other (specify) ▼		500.00	
	SUBTOTAL of Receipts This Page (optional)			1250.00
	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 30 / 67
	ITEMIZED RECEIPTS		for each category of the	(check only one)
			Detailed Summary Page	
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements ma	ay not be sold or used by any perso Idress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Ň	NAME OF COMMITTEE (In Full)			
	College of American Pathologists Polit	tical Action	Committee	
A.	Full Name (Last, First, Middle Initial) P Rodger Lewis, Dr.			Date of Receipt
	Mailing Address PO Box 870 1209 Bishop ST			09 / D D / Y Y Y Y 09 / 03 / 2010
	City	State	Zip Code	Transaction ID: SA11AI.38965
	Union City	TN	38281-0870	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		350.00
	Name of Employer Baptist Memorial Hosp-Uni-	Occupation Patholog		
	on City Receipt For:	· · · · · · · · · · · · · · · · · · ·	e Year-to-Date V	_
	Primary General		350.00	1
_	Other (specify)	0 0		
в	Full Name (Last, First, Middle Initial) F. Edward Loeb, Dr.			Date of Receipt
В.	Mailing Address Lab			
	1212 Pleasant St Ste L			09 24 2010
	City	State	Zip Code	Transaction ID: SA11AI.38969
	Des Moines	IA	50309-1460	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Iowa Pathology Assocs, PC	Occupation Patholog		
	Receipt For:	· · · · · · · · · · · · · · · · · · ·	e Year-to-Date 🔻	
	Primary General	Aggregat		1
	Other (specify)	0 0	500.00	
- С.	Full Name (Last, First, Middle Initial) S Judy Lyzak, Dr.	•		Date of Receipt
	Mailing Address 2434 Interstate PIz Dr			M M / D D / Y Y Y Y 09 03 2010
	City	State	Zip Code	Transaction ID: SA11AI.38973
	Hammond	IN	46324	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Alverno Clinical Lab Inc	Occupation Patholog		
	Receipt For:	Aggregat	e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	1000.00]
[CURTOTAL of Doppinto This Dopp (anti-			1850.00
┝	SUBTOTAL of Receipts This Page (optional)		••••••	
	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 atements may not be sold or used by any perso	FOR LINE NUMBER: PAGE 31 / 67 (check only one) 11c 12 X 11a 11b 11c 12 13 14 15 16 17 n 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.
	College of American Pathologists Politi	cal Action Committee	
Α.	Full Name (Last, First, Middle Initial) Alan Lawrence Machtinger, Dr.	Date of Receipt	
	Mailing Address 14 Oakcliff Dr		M M / D D / Y Y Y Y 09 24 2010
	City	State Zip Code	Transaction ID: SA11AI.38974
	Laguna Niguel	CA 92677-5650	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer South Coast Med Ctr	Occupation Pathologist	_
	Receipt For:	Aggregate Year-to-Date V	-
	Primary General		
	Other (specify)	250.00	
В.	Full Name (Last, First, Middle Initial) David Daniel Mais, Dr.		Date of Receipt
	Mailing Address Lab 111 Dallas St		M M / D D / Y Y Y Y 09 14 2010
	City	State Zip Code	Transaction ID: SA11AI.38975
	San Antonio	TX 78205-1201	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer Baptist Med Ctr	Occupation Pathologist	
	Receipt For:	Aggregate Year-to-Date ▼	_
	Other (specify) ▼	1000.00	
C.	Full Name (Last, First, Middle Initial) E Charles Mangum, Dr.		Date of Receipt
-	Mailing Address PO Box 1709 North Texas Pathology	Laboratories	M M / D D / Y Y Y Y 09 27 2010
	City	State Zip Code	Transaction ID: SA11AI.38979
	Rowlett	TX 75030-1709	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer North Texas Path Labs	Occupation Pathologist	-
	Receipt For:	Aggregate Year-to-Date 🔻	7
	Other (specify) ▼	1000.00	
	SUBTOTAL of Receipts This Page (optional)	·····	2250.00
	TOTAL This Period (last page this line number of	only)	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and S or for commercial purposes, other than using the	for De tatements may not b	e separate schedule(s) each category of the tailed Summary Page e sold or used by any perso of any political committee to	FOR LINE NUMBER: PAGE 32 / 67 (check only one) 11a X 11a 13 14 15 16 17 on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) College of American Pathologists Polit	ical Action Comm	nittee	
Α.	Full Name (Last, First, Middle Initial) Jean Monna Marolt, Dr. Mailing Address 25181 Firefly Ave			Date of Receipt
		Ctoto 7	in Codo	09 14 2010
	City Wyoming		ip Code 5092	Transaction ID: SA11AI.38980 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Univ of Minnesota Med Ctr, Fairview	Occupation Pathologist		_
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-	to-Date ▼ 1000.00]
- В.	Full Name (Last, First, Middle Initial) A. Carlos Mattioli, Dr. Mailing Address 900 S. Bryan Rd.			Date of Receipt
				09 27 2010
	City		ip Code	Transaction ID: SA11AI.38983
	Mission FEC ID number of contributing federal political committee.	TX 7	8572	Amount of Each Receipt this Period
	Name of Employer Mission Hosp	Occupation Pathologist		
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-	to-Date V 1000.00]
- С.	Full Name (Last, First, Middle Initial) E. John McDonald, Dr.			Date of Receipt
	Mailing Address Dept of Pathology 4401 Booth Calloway			M M / D D / Y Y Y Y 09 / 13 / 2010
	City North Richland Hil		ip Code ′6180	Transaction ID: SA11AI.38986
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
	Name of Employer North Hills Hosp	Occupation Pathologist		
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-	to-Date V 1000.00]
	SUBTOTAL of Receipts This Page (optional)			3000.00
	TOTAL This Period (last page this line number	only)		

ľ	CHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 67 (check only one) (check only one) X 11a 11b 11c 12 13 14 15 16 1
/	ny information copied from such Reports and S r for commercial purposes, other than using the	on for the purpose of soliciting contributions o solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full) College of American Pathologists Poli	tical Action Committee	
×.	Full Name (Last, First, Middle Initial) W. Philip McGuire, Dr.	Date of Receipt	
	Mailing Address 1660 Hogan Avenue		M + M / D - D / Y Y + Y Y 09 14 2010
	City	State Zip Code	Transaction ID: SA11AI.38987
	<u>Chesterton</u> FEC ID number of contributing federal political committee.	IN 46304-9378	Amount of Each Receipt this Period
	Name of Employer St. Anthony Mem Hith Ctr	Occupation Pathologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date 1000.00]
	Full Name (Last, First, Middle Initial) A Michelangelo Milano, Dr. Mailing Address Dept Of Pathology	1	Date of Receipt
	800 W Central Rd	State Zip Code	0 9 2 4 2 0 1 0 Transaction ID: SA11AI.38990
	Arlington Heights	IL 60005-2349	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Northwest Cmnty Hosp	Occupation Pathologist	_
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date 250.00]
	Full Name (Last, First, Middle Initial) Gerald Minkowitz	1	Date of Receipt
	Mailing Address 904 49th St		M M / D D / Y Y Y Y Y 09 27 2010
	City Brooklyn	State Zip Code NY 11219	Transaction ID: SA11AI.38991 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Minkowitz Consultant Path- ology	Occupation Pathologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00]
	SUBTOTAL of Receipts This Page (optional)	۱ 	1750.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 / 67 (check only one) 11a X 11a 11b 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	on for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full) College of American Pathologists Polit	tical Action Co	mmittee	
∠ A.	Full Name (Last, First, Middle Initial) R. James Morris, Dr.			Date of Receipt
	Mailing Address 2650 Thornhill Drive			09 14 Y Y Y 2010
	City	State	Zip Code	Transaction ID: SA11AI.38993
	Flatwoods	KY	41139-2402	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Our Lady of Bellefonte Ho- sp	Occupation Pathologist		
	Receipt For:	Aggregate Ye	ear-to-Date 🔻	
	Primary General Other (specify) ▼		500.00]
в.	Full Name (Last, First, Middle Initial) Saeid Movahedi-Lankarani	•		Date of Receipt
	Mailing Address Dept Of Path Internal 800 E 28th St	•		09 / D D / Y Y Y Y 24 2010
	City Minneapolis	State MN	Zip Code 55407-3723	Transaction ID: SA11AI.38994 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		
	Name of Employer Abbott Northwestern Hosp	Occupation Pathologist		
	Receipt For:	Aggregate Ye	ear-to-Date 🔻	_
	Primary General Other (specify) ▼	0 0 0	1000.00]
- C.	Full Name (Last, First, Middle Initial) Luis Ricardo Munoz, Dr.	I		Date of Receipt
	Mailing Address Dept of Pathology 8100 Chancellor Dr Ste	e 130		M M / D D / Y
	City	State	Zip Code	Transaction ID: SA11AI.38995
	Orlando	FL	32809-7664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer AmeriPath	Occupation Pathologist		
	Receipt For: Primary General	Aggregate Ye	ear-to-Date 🔻	_
	Other (specify) ▼	0 0 0	500.00	
ſ	SUBTOTAL of Receipts This Page (optional)	•		2000.00
Ī	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule for each category of th Detailed Summary Pag	
	Any information copied from such Reports and or for commercial purposes, other than using th	Statements may not be sold or used by an e name and address of any political comm	ny person for the purpose of soliciting contributions nittee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) College of American Pathologists Pol	itical Action Committee	
Α.	Full Name (Last, First, Middle Initial) F. Gary Neitzel, Dr.	Date of Receipt	
	Mailing Address ACL Laboratories 2900 W. Oklahoma A	venue	09 / 27 / Y Y Y 2010
	City	State Zip Code	Transaction ID: SA11AI.38996
	Milwaukee	WI 53215-4330	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer St. Luke's Med Ctr	Occupation Pathologist	
	Receipt For:	Aggregate Year-to-Date V	
	Other (specify) ▼	1000.	
в.	Full Name (Last, First, Middle Initial) Irene Lauren O Brien, Dr.		Date of Receipt
	Mailing Address Path Clin Lab 100 W California Blvc		M M / D D / Y
	City Pasadena	State Zip Code CA 91105-3010	Transaction ID: SA11AI.39001
	FEC ID number of contributing federal political committee.	CA 91105-3010	Amount of Each Receipt this Period
	Name of Employer Huntington Mem Hosp	Occupation Pathologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.	00
с.	Full Name (Last, First, Middle Initial) P Scott Otteson, Dr. Mailing Address Dept of Path		Date of Receipt
	801 W Maple St		09 03 2010
	City Farmington	State Zip Code NM 87401	Transaction ID: SA11AI.39002 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		1000.00
	Name of Employer Tres Rios Pathology PC	Occupation Pathologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.	00
	SUBTOTAL of Receipts This Page (optional)	•	2500.00
	TOTAL This Period (last page this line numbe	r only)	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 / 67 (check only one) 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	L tatements may not be sold or used by any perso name and address of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) College of American Pathologists Polit	ical Action Committee	
Α.	Full Name (Last, First, Middle Initial) N. Ronald Padgett, Dr. Mailing Address PO Box 1089		Date of Receipt
	419 E Prudhomme St		09 14 Y Y Y Y 2010
	City	State Zip Code	Transaction ID: SA11AI.39003
	Opelousas	LA 70571	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer Pecot & Padgett APMC	Occupation Pathologist	
	Receipt For:	Aggregate Year-to-Date 🔻	
	Primary General Other (specify) ▼	1000.00]
в.	Full Name (Last, First, Middle Initial) W. Robert Palmer, Dr.		Date of Receipt
	Mailing Address 304 University Avenue		0 9 / 27 / Y Y Y Y 0 9 / 27 / 2010
	City	State Zip Code	Transaction ID: SA11AI.39004
	Marshall FEC ID number of contributing federal political committee.	TX 75670	Amount of Each Receipt this Period
	Name of Employer Marshall Professional Bui- Iding	Occupation Pathologist	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	250.00]
с.	Full Name (Last, First, Middle Initial) A Felipe Querimit, Dr.		Date of Receipt
	Mailing Address Dept of Pathology 651 Willow Grove St		0 9 / D D / Y Y Y Y 2 4 2 0 1 0
	City Hackettstown	State Zip Code NJ 07840-1799	Transaction ID: SA11AI.39012
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 500.00
	Name of Employer Hackettstown Regional Med- ical Center	Occupation Pathologist	
	Receipt For:	Aggregate Year-to-Date 🔻	
	Primary General Other (specify) ▼	500.00]
	SUBTOTAL of Receipts This Page (optional)	······	1750.00
	TOTAL This Period (last page this line number	only)	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		
	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) College of American Pathologists Politi		to solicit contributions from such committee.
Α.	Full Name (Last, First, Middle Initial) Scott Michael Rabkin, Dr.		Date of Receipt
	Mailing Address 419 2nd Ave		M · M / D · D / Y · Y · Y · Y Y Y · Y Y
	City	State Zip Code	Transaction ID: SA11AI.39013
	Tarenum	PA 15084	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Rabkin Dermatopathology Lab	Occupation Pathologist	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	500.00	
В.	Full Name (Last, First, Middle Initial) Anwar Zarina Rasheed, Dr.		Date of Receipt
	Mailing Address Pathology Dept 306 Stanaford Rd		M M / D D / Y Y Y Y 09 / 24 2010
	City	State Zip Code	Transaction ID: SA11AI.39017
	Beckley FEC ID number of contributing federal political committee.	WV 25801-3142	Amount of Each Receipt this Period
	Name of Employer Beckley Appalachian Regio- nal Hospital Receipt For:	Occupation Pathologist Aggregate Year-to-Date	
	Primary General Other (specify) ▼	500.00	
C.	Full Name (Last, First, Middle Initial) P Richard Regan, Dr.		Date of Receipt
	Mailing Address Dept of Path 800 W Central Rd		M · M / D · D / Y · Y · Y · Y Y Y · Y · Y Y
	City	State Zip Code	Transaction ID: SA11AI.39018
	Arlington Heights	IL 60005	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Northwest Community Hosp	Occupation Pathologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)		▶ 1500.00
	TOTAL This Period (last page this line number of	only)	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 / 67 (check only one) 11a X 11a 11b 11c 12 13 14 15 16 17		
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.		
	College of American Pathologists Politi	tical Action Committee			
Α.	Full Name (Last, First, Middle Initial) D Dennis Reinke, Dr.	Date of Receipt			
	Mailing Address 1209 Brook Ave		09 / 15 / Y Y Y 2010		
		State Zip Code	Transaction ID: SA11AI.39019		
	Wichita Falls	TX 76301-4308	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.		1000.00		
	Name of Employer Pathology Associates	Occupation Pathologist			
	Receipt For:	Aggregate Year-to-Date V			
	Other (specify) ▼	1000.00			
в.	Full Name (Last, First, Middle Initial) G Victoria Reyes, Dr.		Date of Receipt		
	Mailing Address Dept of Pathology 365 Montauk Ave		M = M / D = D / Y = Y = Y Y 0 9 2 9 2 0 1 0		
	City New London	State Zip Code CT 06320-4700	Transaction ID: SA11AI.39020		
	FEC ID number of contributing federal political committee.	CT 06320-4700	Amount of Each Receipt this Period 750.00		
	Name of Employer Lawrence & Memorial Hosp	Occupation Pathologist	_		
	Receipt For:	Aggregate Year-to-Date ▼			
	Other (specify)	750.00			
C.	Full Name (Last, First, Middle Initial) M. Cliff Richmond, Dr.	I	Date of Receipt		
	Mailing Address 9600 Datapoint Dr		M M / D D / Y Y Y Y 09 15 2010		
	City	State Zip Code	Transaction ID: SA11AI.39021		
	San Antonio FEC ID number of contributing	TX 78229-2028	Amount of Each Receipt this Period		
	federal political committee.		500.00		
	Name of Employer Path Ref Lab	Occupation Pathologist			
	Receipt For:	Aggregate Year-to-Date 🔻			
	Other (specify) ▼	500.00			
	SUBTOTAL of Receipts This Page (optional)	· · · · · · · · · · · · · · · · · · ·	2250.00		
	TOTAL This Period (last page this line number only)				

ç	SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 39 / 67
	TEMIZED RECEIPTS	Use separate schedule(s) for each category of the	(check only one)
1		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using th	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions
Ν	NAME OF COMMITTEE (In Full)		
	College of American Pathologists Pol	itical Action Committee	
م. م.	Full Name (Last, First, Middle Initial) H. Linda Riley, Dr.		Date of Receipt
	Mailing Address 1116 138th Ave NW		M M / D D / Y Y Y Y 09 / 03 / 2010
	City	State Zip Code	Transaction ID: SA11AI.39022
	Andover	MN 55304	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer United Hosp	Occupation Pathologist	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	500.00	
- 3.	Full Name (Last, First, Middle Initial) Mazhar Rishi	1	Date of Receipt
	Mailing Address Department of Pathol 7th and Clayton Stree	M M / D D Y	
	City	State Zip Code	Transaction ID: SA11AI.39023
	Wilmington	DE 19805-0500	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		250.00
	Name of Employer St. Francis Hosp	Occupation Pathologist	
	Receipt For:	Aggregate Year-to-Date V	
	Primary General Other (specify) Image: Content of the specify of the specific of the specifi	250.00	
-	Full Name (Last, First, Middle Initial) A Thomas Roisum, Dr.		Date of Receipt
	Mailing Address 6000 Hospital Dr		M = M / D = D / Y
	City	State Zip Code	Transaction ID: SA11AI.39025
	Hannibal	MO 63401	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer Hannibal Reg Hosp	Occupation Pathologist	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1000.00	
Γ	SUBTOTAL of Receipts This Page (optional).		1750.00
┢		P	
	TOTAL This Period (last page this line numbe	r only)	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 40 / 67 (check only one) 11a X 11a 11b 11c 12 13 14 15 16 17
Ai	ny information copied from such Reports and S for commercial purposes, other than using the	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions
$\left \right\rangle$	NAME OF COMMITTEE (In Full) College of American Pathologists Pol	itical Action Committee	
 A.	Full Name (Last, First, Middle Initial) F Charles Romberger, Dr.		Date of Receipt
	Mailing Address 555 N. Duke St. P.O. Box 3555		M · M / D · D / Y · Y · Y · Y Y 0 9 1 3 2 0 1 0
	City	State Zip Code	Transaction ID: SA11AI.39026
	Lancaster	PA 17604-3555	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer unaffiliated	Occupation Pathologist	
	Receipt For:	Aggregate Year-to-Date ▼	1
	Primary General Other (specify)	1000.00	
— B.	Full Name (Last, First, Middle Initial) A Arno Roscher, Dr.		Date of Receipt
	Mailing Address Corporate Office 22515 La Quilla Dr		0 9 1 7 2 0 1 0
	City	State Zip Code	Transaction ID: SA11AI.39027
	Chatsworth	CA 91311-1226	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	200.00
	Name of Employer Unaffiliated	Occupation Pathologist	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) The second	300.00	
 c.	Full Name (Last, First, Middle Initial) Charles Roussel	1	Date of Receipt
	Mailing Address 325 Waukegan Rd		0 9 / 0 8 2 0 1 0
	City	State Zip Code	Transaction ID: SA11AI.39029
	Northfield	IL 60093-2750	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		2500.00
	Name of Employer College of Ameri Patholog- ists	Occupation CAP	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify)	2500.00	
	SURTOTAL of Respire This Page (apticast)	l	3700.00
F	SUBTOTAL of Receipts This Page (optional).	•	
т	OTAL This Period (last page this line number	r only)	

	SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 41 / 67 (check only one) X X 11a 11b 11c
Γ	Any information copied from such Reports an or for commercial purposes, other than using	d Statements may not be sold or used by any persor the name and address of any political committee to	13 14 15 16 17 n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) College of American Pathologists P		
⊻ A.	Full Name (Last, First, Middle Initial) W. David Roycroft, Dr.		Date of Receipt
	Mailing Address 9388 Charity Hwy		M M / D D / Y Y Y Y 09 03 2010
	City	State Zip Code	Transaction ID: SA11AI.39030
	Ferrum	VA 24088	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer unaffiliated	Occupation Pathologist	_
	Receipt For:	Aggregate Year-to-Date 🔻	
	Primary General Other (specify) ▼	1000.00	
– В.	Full Name (Last, First, Middle Initial) L Rachel Rucker-Schmidt, Dr.		Date of Receipt
	Mailing Address 3413 Southwestern	Blvd	M M / D D / Y Y Y Y 09 14 2010
	City	State Zip Code	Transaction ID: SA11AI.39031
	Dallas	TX 75225-7656	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer MD Pathology	Occupation Pathologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
- C.	Full Name (Last, First, Middle Initial) D. Clifford Sauls, Dr.		Date of Receipt
	Mailing Address 4899 Montrose Blvd	Apt 1510	0 9 2 7 2 0 1 0
	City	State Zip Code	Transaction ID: SA11AI.39032
	Houston	TX 77006-6170	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		500.00
	Name of Employer Houston Pathology Associa- tes	Occupation Doctor	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Γ)	2000.00

	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 42/67
			Use separate schedule(s) for each category of the	(check only one)
	ITEMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
[13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	e name and add	y not be sold or used by any perso dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	College of American Pathologists Polit	tical Action (Committee	
A.	Full Name (Last, First, Middle Initial) A. Peter Scully, Dr.			Date of Receipt
	Mailing Address Laboratory 4230 Burnham Ave			09 24 Y Y Y Y 009 24 2010
	City	State	Zip Code	Transaction ID: SA11AI.39037
	Las Vegas	NV	89119	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer	Occupatio	n	-
	Name of Employer Associated Pathologists Chartered	Patholog		
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General		500.00	1
	Other (specify)	0 0	500.00	
в.	Full Name (Last, First, Middle Initial) Suash Sharma	•		Date of Receipt
	Mailing Address Dept of Pathology, BA 1120 15th St	E 2575		M M / D D / Y Y Y Y 09 27 2010
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C.	Full Name (Last, First, Middle Initial) E. Mark Shertzer, Dr.			Date of Receipt
0.	Mailing Address 25 Harrington Lane			
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City State Zip Code Tarpon Springs FL 34689-9907 FEC ID number of contributing federal political committee. C Transaction ID: SA11AL.39048 Amount of Each Receipt Hor: Occupation Primary General Occupation Other (specify) ▼ Aggregate Year-to-Date ▼ Transaction ID: SA11AL.39048 Amount of Each Receipt Hor: Aggregate Year-to-Date ▼ Date of Receipt Other (specify) ▼ State Zip Code Full Name (Last, First, Middle Initial) E Joe Snodgrass, Dr. Date of Receipt Mailing Address 2609 North Van Buren OK 73703 City State Zip Code Transaction ID: SA11AL.39049 Amount of Each Receipt Hor: Occupation Pathologist Pathologist Aggregate Year-to-Date ▼ 500.00 Receipt For: Aggregate Year-to-Date ▼ 500.00 Name of Employer Occupation Fathologist Receipt For: Aggregate Year-to-Date ▼ 500.00 Name of Employer Aggregate Year-to-Date ▼ 500.00	- 3.			Date of Receipt
Tarpon Springs FL 34689-9907 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. C 500.00 Name of Employer Helen Ellis Memorial Hosp Occupation Pathologist 500.00 Receipt For: Other (specify) ▼ Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) 500.00 500.00 Je Joe Snodgrass, Dr. Date of Receipt Mailing Address 2609 North Van Buren Date of Receipt City State Zip Code Field D number of contributing federal political committee. C Transaction ID: SA11AI.39049 Amount of Each Receipt For: Primary General Occupation Pathologist Amount of Each Receipt this Period Name of Employer Enid Occupation Pathologist Aggregate Year-to-Date Transaction ID: SA11AI.39049 Name of Employer Enid Pathology Consultants Occupation Pathologist S00.00 Transaction ID: SA11AI.39049 Name of Employer Enid Pathology Consultants Aggregate Year-to-Date ▼ S00.00 S00.00		Mailing Address 1395 S Pinellas Ave	nue	
FEC ID number of contributing federal political committee. C 500.00 Name of Employer Helen Ellis Memorial Hosp Occupation Pathologist 500.00 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Image: Committee C		City		Transaction ID: SA11AI.39048
federal political committee. 0 Name of Employer Helen Ellis Memorial Hosp Occupation Pathologist Receipt For: Other (specify) ▼ Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) E Joe Snodgrass, Dr. Date of Receipt Mailing Address 2609 North Van Buren Date of Receipt City State Zip Code OK Transaction ID: SA11AI.39049 FEC ID number of contributing federal political committee. Occupation Pathologist Amount of Each Receipt this Period Name of Employer Enid Occupation Pathologist State Zip Code State Primary General Of consultants Occupation Pathologist Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Occupation Pathologist Aggregate Year-to-Date ▼		Tarpon Springs	FL 34689-9907	Amount of Each Receipt this Period
Receipt For: Aggregate Year-to-Date ▼ Other (specify) ▼ Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) 500.00 E Joe Snodgrass, Dr. Date of Receipt Mailing Address 2609 North Van Buren City State Zip Code Enid OK 73703 FEC ID number of contributing federal political committee. Occupation Name of Employer Enid Pathology Consultants Occupation Primary General Occupation Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00			C	500.00
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) 500.00 E Joe Snodgrass, Dr. Date of Receipt Mailing Address 2609 North Van Buren City State Zip Code Enid OK 73703 FEC ID number of contributing federal political committee. C Name of Employer Enid Pathology Consultants Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00		Name of Employer Helen Ellis Memorial Hosp		
Other (specify) ▼ 500.00 Full Name (Last, First, Middle Initial) Date of Receipt E Joe Snodgrass, Dr. Date of Receipt Mailing Address 2609 North Van Buren City State Zip Code Enid OK 73703 FEC ID number of contributing federal political committee. C Transaction ID: SA11AI.39049 Name of Employer Occupation 500.00 Primary General Other (specify) ▼ 2500.00			Aggregate Year-to-Date 🔻	
E Joe Snodgrass, Dr. Date of Receipt Mailing Address 2609 North Van Buren City State Zip Code Enid OK 73703 FEC ID number of contributing federal political committee. C Amount of Each Receipt this Period Name of Employer Enid Pathology Consultants Occupation Pathologist State 500.00 Receipt For: Aggregate Year-to-Date ▼ 500.00 2000.00			500.00	
City State Zip Code Enid OK 73703 FEC ID number of contributing federal political committee. C Amount of Each Receipt this Period Name of Employer Enid Pathology Consultants Occupation Pathologist 500.00 Receipt For: Aggregate Year-to-Date ▼ 500.00 Primary General 500.00	-			Date of Receipt
Enid OK 73703 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. C 500.00 Name of Employer Enid Pathology Consultants Occupation Pathologist 500.00 Receipt For: Aggregate Year-to-Date ▼ 500.00 Primary General 500.00 2000.00		Mailing Address 2609 North Van Bure	en	
FEC ID number of contributing federal political committee. C 500.00 Name of Employer Enid Pathology Consultants Occupation Pathologist 6 Receipt For: Aggregate Year-to-Date ▼ 500.00 Primary General 500.00 Other (specify) ▼ 500.00 2000.00		-		
federal political committee. 00000 Name of Employer Enid Pathology Consultants Occupation Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 500.00		Enid	OK 73703	Amount of Each Receipt this Period
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00 2000.00			C	500.00
Primary General Other (specify) ▼ 500.00				
Other (specify) ▼ 500.00			Aggregate Year-to-Date V	
SUBTOTAL of Receipts This Page (optional)			500.00	
	Γ	SUBTOTAL of Receipts This Page (optional)	·	2000.00
TOTAL This Period (last page this line number only)	F			

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and S	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:PAGE $45/67$ (check only one) X 11a11b11c121314151617n for the purpose of soliciting contributions
	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and address of any political committee to	solicit contributions from such committee.
	College of American Pathologists Polit	ical Action Committee	
Α.	Full Name (Last, First, Middle Initial) A Joseph Sonnier, Dr.		Date of Receipt
	Mailing Address 4603 21st St		M · M / D · D / Y · Y · Y · Y Y 0 9 0 3 2 0 1 0
	City	State Zip Code	Transaction ID: SA11AI.39050
	Lubbock	TX 79407-2311	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer AmeriPath Lubbock	Occupation Pathologist	
	Receipt For:	Aggregate Year-to-Date ▼	_
	Primary General Other (specify) ▼	1000.00	
В.	Full Name (Last, First, Middle Initial) Grazia Maria Sparacino, Dr.		Date of Receipt
	Mailing Address PO Box 187		M M / D D / Y
	City	State Zip Code	Transaction ID: SA11AI.39051
	Cleveland	MS 38732-0187	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer Bolivar County Hospital	Occupation Pathologist	
	Receipt For:	Aggregate Year-to-Date 🔻	
	Primary General Other (specify) ▼	1000.00	
C.	Full Name (Last, First, Middle Initial) H. James Spigel, Dr.	l	Date of Receipt
	Mailing Address Department of Patholo 1100 Central Ave SE	ду	M M / D D Y
	City	State Zip Code	Transaction ID: SA11AI.39052
	Albuquerque FEC ID number of contributing	NM 87106	Amount of Each Receipt this Period
	federal political committee.		300.00
	Name of Employer Presbyterian Hosp	Occupation Pathologist	
	Receipt For:	Aggregate Year-to-Date 🔻	
	Other (specify) ▼	300.00	
	SUBTOTAL of Receipts This Page (optional)	·	2300.00
	TOTAL This Period (last page this line number	only)	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Statements may	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:PAGE 46 / 67(check only one) X 11a11b11c12 X 11a11b11c121314151617on for the purpose of soliciting contributions colicit contributions from such committee1017
	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) College of American Pathologists Po	o Solicit contributions from SUCN Committee.		
Α.	Full Name (Last, First, Middle Initial) Shantha Sreekanth Mailing Address Department of Patho	logy		Date of Receipt
	17800 South Kedzie	nogy		09 27 2010
	City	State	Zip Code	Transaction ID: SA11AI.39053
	Hazel Crest FEC ID number of contributing federal political committee.	C	60429	Amount of Each Receipt this Period
	Name of Employer Advocate South Suburban Hosp Receipt For:	Occupation Pathologis	st	
	Primary General Other (specify) ▼	Aggregate	Year-to-Date 250.00	
В.	Full Name (Last, First, Middle Initial) Ray Jesse Stafford, Dr. Mailing Address 8 Memorial Medical C	Ct		Date of Receipt
	Ste 1	State	Zip Code	
	Greenville	Scale	29605	Transaction ID: SA11AI.39054 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Pathology Associates	Occupation Pathologis	st	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date 250.00	
C.	Full Name (Last, First, Middle Initial) U. Ailyn Tan, Dr. Mailing Address 5025 N Paulina			Date of Receipt
	City	State	Zin Code	09 03 2010
	Chicago	IL	Zip Code 60640	Transaction ID: SA11AI.39057 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Methodist Hosp of Chicago	Occupation Pathologis	st	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date 500.00	
	SUBTOTAL of Receipts This Page (optional)			1000.00
	TOTAL This Period (last page this line number	er only)		

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S	CHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 47 / 67 (check only one)
IT	EMIZED RECEIPTS	for each category of the	X 11a $11b$ 11c 12
		Detailed Summary Page	
A	ny information copied from such Reports and S for commercial purposes, other than using the	Statements may not be sold or used by any perso	n for the purpose of soliciting contributions
∇	NAME OF COMMITTEE (In Full)		
	College of American Pathologists Poli	tical Action Committee	
	Full Name (Last, First, Middle Initial) P. Peter Tomas, Dr.		Date of Receipt
	Mailing Address Laboratory 333 Madison St		M · M / D · D / Y · Y · Y · Y Y Y · Y · Y Y <thy< td=""></thy<>
	City	State Zip Code	Transaction ID: SA11AI.39060
	Joliet	IL 60435-8200	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer Provena St. Joseph Med Ctr	Occupation Pathologists	
	Receipt For:	Aggregate Year-to-Date V	1
	Primary General	1000.00	1
	Other (specify)		
	Full Name (Last, First, Middle Initial) V. Devendra Trivedi, Dr.		Date of Receipt
	Mailing Address Peoria-Tazewell Patho 221 NE Glen Oak Ave	nue	M M / D D / Y Y Y Y 09 27 2010
	City	State Zip Code	Transaction ID: SA11AI.39061
	Peoria	IL 61636	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Methodist Med Ctr of Illi- nois	Occupation Pathologist	
	Receipt For:	Aggregate Year-to-Date V	
	Primary General Other (specify) Image: Contract of the second	250.00]
	Full Name (Last, First, Middle Initial) Winbern John Turner, Dr.	I	Date of Receipt
	Mailing Address 2201 Carbon Hill Dr		M M / D D / Y Y Y Y 09 15 2010
	City	State Zip Code	Transaction ID: SA11AI.39062
	Midlothian	VA 23113-2516	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	100.00
	Name of Employer Commonwealth Lab Consulta- nts	Occupation Pathologist	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	900.00]
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	SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 48/67		
	· · ·	Use separate schedule(s) for each category of the	(check only one)		
	ITEMIZED RECEIPTS	Detailed Summary Page	X 11a 11b 11c 12		
			13 14 15 16 17		
	Any information copied from such Reports and Sta or for commercial purposes, other than using the r	atements may not be sold or used by any person name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.		
	College of American Pathologists Polition	cal Action Committee			
Α.	Full Name (Last, First, Middle Initial) J. Francis Varga, Dr.		Date of Receipt		
	Mailing Address Department of Patholog 1235 E Cherokee St	У	09 / 27 / Y Y Y 2010		
	City	State Zip Code	Transaction ID: SA11AI.39065		
	Springfield	MO 65804-2263	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.		250.00		
	Name of Employer St John's Hospital	Occupation Pathologist			
	Receipt For:	Aggregate Year-to-Date V	-		
	Primary General		1		
	Other (specify) v	250.00			
В.	Full Name (Last, First, Middle Initial) L Richard Voet, Dr.		Date of Receipt		
	Mailing Address Dept of Path 8200 Walnut Hill Ln		09 / 15 / Y Y Y Y 2010		
	City	State Zip Code	Transaction ID: SA11AI.39068		
	Dallas	TX 75231-4426	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C	500.00		
	Name of Employer Presbyterian Hospital Dal- las	Occupation Pathologist	-		
	Receipt For:	Aggregate Year-to-Date ▼			
	Primary General	500.00	1		
	Other (specify)				
C.	Full Name (Last, First, Middle Initial) Layne Stephen Walter, Dr.		Date of Receipt		
	Mailing Address 801 Clarksville Ste C		M M / D D / Y Y Y Y 09 / 14 2010		
	City	State Zip Code	Transaction ID: SA11AI.39069		
	<u>Paris</u>	TX 75460	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C	2500.00		
	Name of Employer Red River Valley Path Lab	Occupation Pathologist			
	Receipt For:	Aggregate Year-to-Date ▼			
	Primary General Other (specify) ▼	5000.00]		
	SUBTOTAL of Receipts This Page (optional)	······	3250.00		
	TOTAL This Period (last page this line number only)				

	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 49 / 67 (check only one)
	ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	$\begin{array}{c c c c c c c c c c c c c c c c c c c $
	Any information copied from such Reports and S or for commercial purposes, other than using the			on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)		0	
	College of American Pathologists Polit	ical Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Karls Bretta Warren, Dr.			Date of Receipt
	Mailing Address 800 W Central Rd			09 / D D / Y Y Y Y 2010
	City	State	Zip Code	Transaction ID: SA11AI.39071
	Arlington Heights	<u>IL</u>	60005-2392	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		468.00
	Name of Employer Northwest Cmnty Hosp	Occupation Patholog		
	Receipt For:	· · · · · · · · · · · · · · · · · · ·	e Year-to-Date 🔻	-
	Primary General	39.294	468.00	1
-	Other (specify)	0 0	+00.00	
в.	Full Name (Last, First, Middle Initial) F Michael Weiner, Dr.			Date of Receipt
	Mailing Address Dept of Path 500 S University Ave S	Ste 411		M M / D D / Y Y Y Y 0 9 0 3 2 0 1 0
	City	State	Zip Code	Transaction ID: SA11AI.39073
		AR	72205-5329	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Arkansas Path Assoc	Occupation Patholog		
	Receipt For:	, I Š	e Year-to-Date V	-
	Primary General Other (specify) ▼		250.00]
	Full Name (Last, First, Middle Initial)			
C.	H. Michael Weinstein, Dr.			Date of Receipt
	Mailing Address Dept of Pathology 3000 New Bern Ave			09 / 24 / 2010
	City	State	Zip Code	Transaction ID: SA11AI.39074
	Raleigh	NC	27610-1231	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Wake Med Ctr	Occupation Patholog		
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼		1000.00]
	SUBTOTAL of Receipts This Page (optional)	I		1718.00
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	TOTAL This Period (last page this line number	only)		

Ċ	SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 50 / 67
	· · · · ·	Use separate schedule(s) for each category of the	(check only one)
I	TEMIZED RECEIPTS	Detailed Summary Page	
	Any information copied from such Reports and S or for commercial purposes, other than using the		
	NAME OF COMMITTEE (In Full)		
	College of American Pathologists Polit	ical Action Committee	
, ∠ A.	Full Name (Last, First, Middle Initial) B. Robert Wells, Dr.		Date of Receipt
	Mailing Address 1726 S Beckham		09 / 27 / Y Y Y 2010
	City	State Zip Code	Transaction ID: SA11AI.39075
	Tyler	TX 75701-5701	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Pathology Associates of	Occupation Pathologist	
	Tyler Receipt For:	Pathologist Aggregate Year-to-Date	
	Primary General		1
	Other (specify)	500.00	
а. В.	Full Name (Last, First, Middle Initial) W Donald West, Dr.		Date of Receipt
	Mailing Address 3rd FIr Path 1214 Coolidge Blvd		M M / D D / Y Y Y Y 09 24 2010
	City	State Zip Code	Transaction ID: SA11AI.39077
	Lafayette	LA 70503-2621	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Preferred Anatomic Pathol-	Occupation	
	ogy Services	Pathologist	
	Receipt For: Primary General	Aggregate Year-to-Date 🔻	1
	Other (specify)	500.00	
-).	Full Name (Last, First, Middle Initial) M. Thomas Wheeler, Dr.		Date of Receipt
	Mailing Address Department of Patholo One Baylor Plaza	ду	M M / D D / Y
	City	State Zip Code	Transaction ID: SA11AI.39078
	Houston	TX 77030	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer Baylor College of Medicine	Occupation Pathologist	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1000.00]
Γ	SUBTOTAL of Receipts This Page (optional)	L	2000.00
┢		•	
	TOTAL This Period (last page this line number	only)	

	SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	
	NAME OF COMMITTEE (In Full) College of American Pathologists Pe		ittee to solicit contributions from such committee.
Α.	Full Name (Last, First, Middle Initial) S. David Wilkinson, Dr. Mailing Address Department of Patho	bloav	Date of Receipt
	PO Box 980662		09 20 2010
	City Richmond	State Zip Code VA 23298-0662	Transaction ID: SA11AI.39079
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
	Name of Employer VCU Health System	Occupation Pathologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.0	0
В.	Full Name (Last, First, Middle Initial) H Arthur Williams, Dr. Mailing Address 525 N Garfield Ave		Date of Receipt
	City	State Zip Code	Transaction ID: SA11AI.39081
	Monterey Park	CA 91754-1205	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Garfield Med Ctr	Occupation Pathologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date 500.0	0
C.	Full Name (Last, First, Middle Initial) R. Bruce Williams Mailing Address 2915 Missouri Aven	Je	Date of Receipt
	City	State Zip Code	0 9 1 7 2 0 1 0 Transaction ID: SA11AI.39082
	<u>Shreveport</u>	LA 71109	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer The Delta Pathology Group, LLP	Occupation Pathologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.0	0
	SUBTOTAL of Receipts This Page (optional		1500.00
	TOTAL This Period (last page this line numb	er only)	•

S	CHEDULE A (FEC Form 3X		FOR LINE NUMBER: PAGE 52 / 67 (check only one)
Ľ	TEMIZED RECEIPTS	for each category of the	X 11a 11b 11c 12
		Detailed Summary Page	
		d Statements may not be sold or used by any person the name and address of any political committee to s	for the purpose of soliciting contributions
Ν	NAME OF COMMITTEE (In Full)		
	College of American Pathologists P	olitical Action Committee	
A.	Full Name (Last, First, Middle Initial) J. Michael Wilson		Date of Receipt
	Mailing Address Dept of Path 5900 Byron Center	Ave SW	M M / D D / Y
	City	State Zip Code	Transaction ID: SA11AI.39083
	Wyoming	MI 49519	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer Metro Health Hospital	Occupation Pathologist	
	Receipt For:	Aggregate Year-to-Date V	1
	Primary General		
	Other (specify) v	1000.00	
в.	Full Name (Last, First, Middle Initial) W Reginald Wilson, Dr.		Date of Receipt
	Mailing Address PO Box 1527		09 / D D / Y Y Y Y 09 14 2010
	City	State Zip Code	Transaction ID: SA11AI.39084
	Milledgeville	GA 31059-1527	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	300.00
	Name of Employer Oconee Regional Med Ctr	Occupation Pathologist	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	300.00	
— C.	Full Name (Last, First, Middle Initial) R Keith Workman, Dr.		Date of Receipt
0.	Mailing Address Department of Path 1001 Sam Perry Blv	blogy d	0 9 27 2 0 1 0
	City	State Zip Code	Transaction ID: SA11AI.39087
	Fredericksburg	VA 22401-4453	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Mary Washington Hosp	Occupation Pathologist	
		Aggregate Year-to-Date ▼	
	Receipt For:		
	Receipt For: Primary General Other (specify) v	250.00	
Γ	Primary General		1550.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 53 / 67 (check only one) 11a X 11a 13 14 15 16 17
A .	Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) College of American Pathologists Politi Full Name (Last, First, Middle Initial) R Moises Zepeda, Dr. Mailing Address Dept of Path 5240 E Beverly Blvd City	name and add	dress of any political committee to	Date of Receipt M M / P P Y Y Y Y Transaction ID: SA11AI.39091
	Los Angeles FEC ID number of contributing federal political committee. Name of Employer East Side Path Assoc Med Grp Inc Receipt For: Primary General General Other (specify) ▼	CA C Occupation Patholog Aggregate		Amount of Each Receipt this Period 500.00
В.	Full Name (Last, First, Middle Initial) J Louis Zinterhofer, Dr. Mailing Address Dept of Path 300 Second Ave City Long Branch FEC ID number of contributing federal political committee. Name of Employer Monmouth Med Ctr Receipt For: Primary General Other (specify)	State NJ C Occupation Patholog Aggregate		Date of Receipt 0 9 / 2 4 / 2 0 1 0 Transaction ID: SA11AI.39092 Amount of Each Receipt this Period 3000.00

SUBTOTAL of Receipts This Page (optional)	►	3500.00
TOTAL This Period (last page this line number only)	►	95943.00

Ş	SCHEDULE B (FEC Form 3	SX)		FOR LINE	NUMBER:	PAGE 54 / 67
	TEMIZED DISBURSEMENT	for each cate	gory of the	(check only		
		Detailed Sum	imary Page	X 21b 27	22 23 23 28a 28b	24 25 26 28c 29 30b
	Any Information copied from such Reports a or for commercial purposes, other than usin					
	NAME OF COMMITTEE (In Full) College of American Pathologists	Political Action Comm	ittee			
A.	Full Name (Last, First, Middle Initial)				Transaction ID: S	
- .	Sun Trust Bank				Date of Disbursemer	-
	Mailing Address P.O. Box 85024				09 ^M /03 ^D /03	Ý ŽOľO
	City Richmond		o Code 3285		Amount of Each Dist	oursement this Period
	Purpose of Disbursement Suntrust Moneris ACH Fee					15.00
	Candidate Name			ategory/ Type		
	Office Sought: House Senate President	Disbursement For: Primary Other (specify)	General			
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В.	Full Name (Last, First, Middle Initial) Sun Trust Bank				Transaction ID: S Date of Disbursemen	nt
	Mailing Address P.O. Box 85024				0 9 2 1	Ý ŽOľO
	City Richmond		o Code 3285		Amount of Each Dist	oursement this Period
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	Candidate Name			ategory/ Type		
	Office Sought: House Senate President	Disbursement For: Primary Other (specify)	General			
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FE6AN026	FEC Schedule B (Form 3X) (Revised 02/2
TOTAL This Period (last page this line number only)	65.50
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SCHEDULE B (FEC Form 3X)		FOR LINE	IE NUMBER: PAGE 55 / 67							
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27	one) 22 X 23 28a 28b	24 25 2 28c 29						
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College of American Pathologists Political	Action Committee									
Full Name (Last, First, Middle Initial) 21ST CENTURY MAJORITY FUND			Transaction ID: S Date of Disbursemer							
Mailing Address 6065 Roswell Road BOX 2274			M 9 M / D 2 9	Ý ŽOľO						
	State Zip Code GA 30328		Amount of Each Disl	oursement this Period						
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Full Name (Last, First, Middle Initial) JOHN ADLER FOR CONGRESS		Transaction ID: S Date of Disbursemen								
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MIKE ARCURI FOR CONGRESS			Transaction ID: S Date of Disbursemer	nt						
Mailing Address P.O. Box 75214			09 ^M /29	Ý ŽOľO						
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	Full Name (Last, First, Middle Initial) CAMPAC - CONTINUING A MAJORITY	Y PARTY ACTION COMMI	TTE	E		Trans Date					3.39	108	
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\rangle	NAME OF COMMITTEE (In Full) College of American Pathologists			
	Full Name (Last, First, Middle Initial) CANTOR FOR CONGRESS			Transaction ID: SB23.39109 Date of Disbursement
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	Purpose of Disbursement			2000.00
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	Office Sought: X House Senate President	Disbursement For: 2010 Primary X General Other (specify) ▼		
	State: VA District: 07 Full Name (Last, First, Middle Initial) CITIZENS FOR ALTMIRE			Transaction ID: SB23.39107 Date of Disbursement
	Mailing Address 499 South Capit Suite 404	tol Street, SW		$\begin{bmatrix} M & M \\ 0 & 9 \end{bmatrix} \begin{pmatrix} D & D \\ 2 & 9 \end{pmatrix} \begin{pmatrix} Y & Y & Y \\ 2 & 0 & 1 & 0 \end{pmatrix}$
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SCHEDULE B (FEC Form 3X)		FOR LINE	NE NUMBER: PAGE 59 / 67							
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NAME OF COMMITTEE (In Full)										
College of American Pathologists Political	Action Committee									
Full Name (Last, First, Middle Initial) FRIENDS OF JIM CLYBURN										
Mailing Address 499 South Capitol Stree Suite 412	et, SW		09 ^M /29 ^E							
City Washington	State Zip Code DC 20003		Amount of Each D	isbursement this Period						
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Candidate Name		Category/ Type								
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Full Name (Last, First, Middle Initial) FRIENDS OF JOHN BARROW			Transaction ID: Date of Disbursem							
Mailing Address PO Box 8166			09 ^M / ^D 29 ^L							
City Savannah	State Zip Code GA 31412		Amount of Each D	isbursement this Period						
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Candidate Name		Category/ Type								
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Full Name (Last, First, Middle Initial) FRIENDS OF LOIS CAPPS			Transaction ID: Date of Disbursem							
Mailing Address PO Box 23940			09 ^M / ^D 29 ^E							
City Santa Barbara	State Zip Code CA 93121		Amount of Each D	isbursement this Period						
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Full Name (Last, First, Middle Initial) FRIENDS OF MAX BAUCUS			Transaction ID: SB23.39118 Date of Disbursement							
Mailing Address PO BOX 586			09 ¹ /2	^D / ^Y ^Y ^Y ^Y ^Y ^Y ^Y						
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Full Name (Last, First, Middle Initial) GEOFF DAVIS FOR CONGRESS		Transaction ID: Date of Disburse	ment							
Mailing Address 700 12TH STREET NV SUITE 700	I		09 ^M /2	^D / ^Y ^Y ^Y ^Y ^Y ^Y ^Y						
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Full Name (Last, First, Middle Initial) GEORGIANS FOR ISAKSON			Transaction ID: Date of Disburse	ment						
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City ATLANTA	StateZip CodeGA30325		Amount of Each	Disbursement this Period						
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College of American Pathologists Politica	I Action Committee											
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	schedule(s) FOR LI (check					R:		PAGE 63/67					
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 NAME OF COMMITTEE (In Full) College of American Pathologists Political 	Action Committee													
Full Name (Last, First, Middle Initial) MARSHA BLACKBURN FOR CONGRESS	S INC.					Tran s Date	of D		urse	men	-		-	X
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	SCHEDULE B (FEC Form 3X)				Use sepa		FOR LINE NUMBER: PAGE 66 / check only one)								7		
	IT	EMIZED DISBU	RSEMEN	TS		category of the Summary Page	ļ	<u>`</u>	1b	22 28a	Х	23 28b	\square	24 28c	\square	25 29	26 30b
		y Information copied from or commercial purposes,															
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SUBTOTAL of Disbursements This Page (optional)	►	2500.00
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FE6AN026		FEC Schedule B (Form 3X) (Revised 02/2003)

	SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENT	S for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one) PAGE 67 / 67 21b 22 23 24 25 26 27 28a 28b 28c X 29 30b
			any person for the purpose of soliciting contributions mittee to solicit contributions from such committee
	College of American Pathologists F	olitical Action Committee	
Α.	Full Name (Last, First, Middle Initial) CATERING W. MILLAR AND COM Mailing Address 1335 14TH STRE		Transaction ID: SB29.39096 Date of Disbursement
	City WASHINGTON	State Zip Code DC 20005	Amount of Each Disbursement this Period 410.10
	Purpose of Disbursement IN KIND - FRIENDS OF LOIS CAPPS		
	Candidate Name		ategory/ Type
	Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	
	State: District:		

	SUBTOTAL of Disbursements This Page (optional)	Þ	410.10
	TOTAL This Period (last page this line number only)	►	410.10
Ì	FE6AN026		FEC Schedule B (Form 3X) (Revised 02/2003)