

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**
PSYCHOLOGY PAC OF AMERICAN PSYCHOLOGICAL ASSOCIATION SERVICES INC.

ADDRESS (number and street) **PO Box 15441**
 Check if different than previously reported. (ACC) **Washington DC 20003-0441**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00522094 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / 2022 through / / 2022

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Phillips, Justin, , ,
Type or Print Name of Treasurer

Signature of Treasurer *Phillips, Justin, , ,* [Electronically Filed] Date / / 2022

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

PSYCHOLOGY PAC OF AMERICAN PSYCHOLOGICAL ASSOCIATION SERVICES INC.

Report Covering the Period: From: / / To: / /

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand January 1, <input type="text" value="2022"/> | | 190568.76 |
| (b) Cash on Hand at Beginning of Reporting Period..... | 190702.92 | |
| (c) Total Receipts (from Line 19) | 4687.50 | 70921.66 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | 195390.42 | 261490.42 |
| 7. Total Disbursements (from Line 31)..... | 4500.00 | 70600.00 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | 190890.42 | 190890.42 |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

PSYCHOLOGY PAC OF AMERICAN PSYCHOLOGICAL ASSOCIATION SERVICES INC.

Report Covering the Period: From: / / To: / /

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 3875.00 | 45623.34 |
| (ii) Unitemized | 812.50 | 23298.32 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶ | 4687.50 | 68921.66 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) | 4687.50 | 68921.66 |
| 12. Transfers From Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received..... | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 0.00 | 0.00 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... | 0.00 | 2000.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.)..... | 0.00 | 0.00 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3)..... | 0.00 | 0.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfers (add 18(a) and 18(b)).. | 0.00 | 0.00 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶ | 4687.50 | 70921.66 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶ | 4687.50 | 70921.66 |

DETAILED SUMMARY PAGE
of Disbursements

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures | 0.00 | 10.00 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 0.00 | 10.00 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 4500.00 | 69000.00 |
| 24. Independent Expenditures (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 1590.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... | 0.00 | 1590.00 |
| 29. Other Disbursements (Including Non-Federal Donations)..... | 0.00 | 0.00 |
| 30. Federal Election Activity (52 U.S.C. § 30101(20)) | | |
| (a) Allocated Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) "Levin" Share..... | 0.00 | 0.00 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) | 0.00 | 0.00 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) .. | 4500.00 | 70600.00 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 4500.00 | 70600.00 |

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

| III. Net Contributions/ Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|---------------------------------------|---|
| 33. Total Contributions (other than loans) (from Line 11(d), page 3) | 4687.50 | 68921.66 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 1590.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 4687.50 | 67331.66 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 0.00 | 10.00 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 0.00 | 10.00 |

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

| | | | |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 6 OF 12 |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
PSYCHOLOGY PAC OF AMERICAN PSYCHOLOGICAL ASSOCIATION SERVICES INC.

A. Lindsey, Kathryn, Tierney, Dr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22941 Green Teal Ct

| | | |
|--------------------|-------------|------------------------|
| City Brambleton | State VA | Zip Code 20148-6974 |
|--------------------|-------------|------------------------|

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

| | |
|---|--|
| Name of Employer (for Individual) Self | Occupation (for Individual) Clinical Psychologist |
|---|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09 | / | 01 | / | 2022 |

Transaction ID : AA36C067DC2C0434DAB2

Amount of Each Receipt this Period
250.00

Memo Item

B. Lott, William, C, Dr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 129 Hawthorne Vale

| | | |
|-------------------|-------------|------------------------|
| City Ridgeland | State MS | Zip Code 39157-2345 |
|-------------------|-------------|------------------------|

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

| | |
|---|---|
| Name of Employer (for Individual) Self | Occupation (for Individual) Psychologist |
|---|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09 | / | 08 | / | 2022 |

Transaction ID : A60F5AAC236C24696836

Amount of Each Receipt this Period
250.00

Memo Item

C. Arnold, Susan, C, Dr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8 Kensington Drive

| | | |
|-------------------|-------------|------------------------|
| City Asheville | State NC | Zip Code 28805-2425 |
|-------------------|-------------|------------------------|

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

| | |
|---|--|
| Name of Employer (for Individual) Self | Occupation (for Individual) Clinical Psychologist |
|---|--|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09 | / | 08 | / | 2022 |

Transaction ID : AA477478427074D9BADB

Amount of Each Receipt this Period
250.00

Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 750.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 7 OF 12 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

| | | |
|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)
PSYCHOLOGY PAC OF AMERICAN PSYCHOLOGICAL ASSOCIATION SERVICES INC.

A. Gardner, Sharon, M, Dr., PsyD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9777 Wilshire Blvd Ste 807
 City BEVERLY HILLS State CA Zip Code 90212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 08 / 2022
Transaction ID : A0FA371EA5763419BA45
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Dousette, Mary, , Dr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4418 Vineland Ave Ste 102
 City North Hollywood State CA Zip Code 91602-3457
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Vista Center for Counseling and Psycho Occupation (for Individual) Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 08 / 2022
Transaction ID : AF6AA1D2FE767482C967
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Dor, Vered, , Dr,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9230 Heckscher Dr. 9230 Heckscher Dr.
 City Jacksonville State FL Zip Code 32226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Psychologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 08 / 2022
Transaction ID : A00AFCBD066144BF4A1D
 Amount of Each Receipt this Period 250.00
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 750.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 8 OF 12 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
PSYCHOLOGY PAC OF AMERICAN PSYCHOLOGICAL ASSOCIATION SERVICES INC.

A. Didier, Jeremy, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11700 W 143rd St
 City Overland Park State KS Zip Code 66221-9571
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Jordan Psychological Center Occupation (for Individual) Clinician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 08 / 2022
Transaction ID : A4AE69EC077634B99883
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Wimberly, Adona, , Dr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6700 Alexander Bell Dr Ste 200
 City Columbia State MD Zip Code 21046-2105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Patuxent Counseling & Consulting, LLC Occupation (for Individual) Clinical Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 09 / 2022
Transaction ID : A0A2A2240ADCF4BE1A4E
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Juska, Maryann, Diviney, Dr,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 E 56TH ST RM 710
 City NEW YORK State NY Zip Code 10022-3662
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Clinical Psychologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 09 / 2022
Transaction ID : A49F9CEAC4A874EAD895
 Amount of Each Receipt this Period 250.00
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 750.00 |
| TOTAL This Period (last page this line number only)..... | |

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

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

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NAME OF COMMITTEE (In Full)
PSYCHOLOGY PAC OF AMERICAN PSYCHOLOGICAL ASSOCIATION SERVICES INC.

A. Schad, Lester, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 459 Raymond St
 City Rockville Centre State NY Zip Code 11570-2738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 09 / 2022
Transaction ID : A627D37AD671841DF9B6
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Baxter, Sarah, M, Dr., PhD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 556
 City Hamilton State MT Zip Code 59840-0556
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Private practice Occupation (for Individual) Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 09 / 2022
Transaction ID : A283E0B8F273E423E892
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Howard, Bruce, A, Dr., PhD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1460 7th St Ste 300
 City Santa Monica State CA Zip Code 90401-2632
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Psychologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 12 / 2022
Transaction ID : A3DA5C91955564D98B33
 Amount of Each Receipt this Period 50.00
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 550.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 10 OF 12 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
PSYCHOLOGY PAC OF AMERICAN PSYCHOLOGICAL ASSOCIATION SERVICES INC.

A. Treadaway, Sallyann, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1665 Watova Rd
 City Toledo State OH Zip Code 43614-4022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Clinical Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 14 / 2022
Transaction ID : A9D955CD652B7475B88B
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Pistorello, Jacqueline, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4190 Longknife Rd
 City Reno State NV Zip Code 89519-2975
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) U of NV Reno Occupation (for Individual) Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 14 / 2022
Transaction ID : AFEF5EE179E75483CAC3
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Healey, Bede, John, Dr,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1371 LALOMA AVE
 City BERKELEY State CA Zip Code 94708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Psychologist,Monk,Priest
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 16 / 2022
Transaction ID : AD814C8D9A8B748018F8
 Amount of Each Receipt this Period 250.00
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 750.00 |
| TOTAL This Period (last page this line number only)..... | |

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

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

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NAME OF COMMITTEE (In Full)
PSYCHOLOGY PAC OF AMERICAN PSYCHOLOGICAL ASSOCIATION SERVICES INC.

A. Siegel, Alex, M, Dr, PhD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 915 Montgomery Ave Ste 210
 City Penn Valley State PA Zip Code 19072-1550
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Psychologist/Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 17 / 2022
Transaction ID : A06A41415D4F849C4A88
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Cooke, Michelle, Pearl, , PsyD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1211 Dingle Rd
 City Mount Pleasant State SC Zip Code 29466-9386
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Select Health of South Carolina Occupation (for Individual) Behavioral Health Medical Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 21 / 2022
Transaction ID : A663184C4D1064313ABD
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Spears, Gayle, , Dr., PhD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 160 Red Bluff Dr
 City Athens State GA Zip Code 30607-6562
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GA Psychological Asso Occupation (for Individual) Executive Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 25 / 2022
Transaction ID : A0CFC372B4D114323845
 Amount of Each Receipt this Period 50.00
 Memo Item

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 325.00 |
| TOTAL This Period (last page this line number only)..... | 3875.00 |

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

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|------------------------------|------------------------------|--|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
PSYCHOLOGY PAC OF AMERICAN PSYCHOLOGICAL ASSOCIATION SERVICES INC.

A. BRITTANY PETERSEN FOR COLORADO

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 150887

City LAKEWOOD State CO Zip Code 80215

Purpose of Disbursement Contribution to Committee

Candidate Name
Petersen, Brittany, Louise, ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼

State: CO District: 07

Date of Disbursement: 09 / 02 / 2022

FEC Identification Number: C00637215
Transaction ID : B2E6D6B572
Amount of Each Disbursement this Period: 1000.00

Memo Item

B. TIM RYAN VICTORY FUND 2022

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 189

City Niles State OH Zip Code 44446-0189

Purpose of Disbursement Contribution to Committee

Candidate Name
TIM RYAN VICTORY FUND 2022

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) Other

State: District:

Date of Disbursement: 09 / 09 / 2022

FEC Identification Number: C00782011
Transaction ID : B23CB1EF32I
Amount of Each Disbursement this Period: 2000.00

Memo Item

C. MRVAN FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 55

City CROWN POINT State IN Zip Code 46308

Purpose of Disbursement Contribution to Committee

Candidate Name
Mrvan, Frank, , Rep.,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼

State: IN District: 01

Date of Disbursement: 09 / 14 / 2022

FEC Identification Number: C00727529
Transaction ID : B0A0345CAE
Amount of Each Disbursement this Period: 1500.00

Memo Item

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 4500.00 |
| TOTAL This Period (last page this line number only).....▶ | 4500.00 |