

2010 SEP 14 AM 10:22

**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

American Association of Bioanalysts Political Action Committee  
(AAB + PAC)

ADDRESS (number and street)

906 OLIVE STREET, Suite 1200

Check if different  
than previously  
reported. (ACC)

Saint Louis

MO

63101-1448

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00249581

3. IS THIS  
REPORT

NEW  
(N)

OR

X

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)

X

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

01/01/2009

through

06/30/2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Mark S. Birenbaum

Signature of Treasurer

Mark S. Birenbaum

Date

09/13/2010

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only

**FEC FORM 3X**  
Rev. 12/2004

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

American Association of Bioanalysts Political Action Committee (AAB\*PAC)

Report Covering the Period:

From:

01 01 2009

To:

06 30 2009

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2009		29,487.45
(b) Cash on Hand at Beginning of Reporting Period.....	29,487.45	
(c) Total Receipts (from Line 19) .....	6,890.19	6,890.19
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	36,377.64	36,377.64
7. Total Disbursements (from Line 31) .....	2518.00	2518.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	33,859.64	33,859.64
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

American Association of Bioanalysts Political Action Committee (AAB\*PAC)

Report Covering the Period: From:

01 01 2009

To:

06 30 2009

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).....	6,750.00	6,750.00
(ii) Unitemized .....	125.00	125.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	6,875.00	6,875.00
(b) Political Party Committees .....		
(c) Other Political Committees (such as PACs).....		
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	6,875.00	6,875.00
12. Transfers From Affiliated/Other Party Committees.....		
13. All Loans Received .....		
14. Loan Repayments Received.....		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....		
17. Other Federal Receipts (Dividends, Interest, etc.).....	15.19	15.19
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....		
(b) Levin Funds (from Schedule H5) .....		
(c) Total Transfers (add 18(a) and 18(b))..		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	6,890.19	6,890.19
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	6,890.19	6,890.19

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# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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 .....		
(ii) Non-Federal Share .....		
(b) Other Federal Operating Expenditures .....		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....		
22. Transfers to Affiliated/Other Party Committees .....		
23. Contributions to Federal Candidates/Committees and Other Political Committees .....	2,500.00	2,500.00
24. Independent Expenditures (use Schedule E) .....		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F) .....		
26. Loan Repayments Made .....		
27. Loans Made .....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....		
(b) Political Party Committees .....		
(c) Other Political Committees (such as PACs) .....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....		
29. Other Disbursements .....	18.00	18.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....		
(ii) "Levin" Share .....		
(b) Federal Election Activity Paid Entirely With Federal Funds .....		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	2,518.00	2,518.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) .....	2,518.00	2,518.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Ex- penditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	6,875.00	6,875.00
34. Total Contribution Refunds (from Line 28(d)) .....	6,875.00	6,875.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	6,875.00	6,875.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....		
37. Offsets to Operating Expenditures (from Line 15, page 3) .....		
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....		

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**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 1 OF 2	
<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)

*AMERICAN Association of Bioanalysts Political Action Committee (AAB \* PAC)*

Full Name (Last, First, Middle Initial)

A. *Zocco, Kristen*

Mailing Address

*609 Amberson Avenue*

City

*Pittsburgh*

State

*PA*

Zip Code

*15232*

FEC ID number of contributing  
federal political committee.

*C*

Name of Employer

*Biomedical Laboratory*

Occupation

*Medical Laboratory Supervisor*

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

*250.00*

Date of Receipt

*01 26 2009*

Amount of Each Receipt this Period

*, 250.00*

Full Name (Last, First, Middle Initial)

B. *LANZA, PATRICIA*

Mailing Address

*2 China Lane*

City

*Poughkeepsie*

State

*NY*

Zip Code

*11733*

FEC ID number of contributing  
federal political committee.

*C*

Name of Employer

*Sunrise Medical Laboratories*

Occupation

*Executive Officer*

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

*1,000.00*

Date of Receipt

*02 24 2009*

Amount of Each Receipt this Period

*, 1,000.00*

Full Name (Last, First, Middle Initial)

C. *IACONO, ANNETTE*

Mailing Address

*400 Edgemont Ave*

City

*Brookhaven*

State

*PA*

Zip Code

*19015*

FEC ID number of contributing  
federal political committee.

*C*

Name of Employer

*Brookside Clinical Laboratory*

Occupation

*Medical Laboratory Manager*

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

*, 500.00*

Date of Receipt

*03 08 2009*

Amount of Each Receipt this Period

*, 500.00*

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

*1,750.00*

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

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**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 2 OF 2

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

*American Association of Bioanalysts Political Action Committee (AAB\*PAC)*

Full Name (Last, First, Middle Initial)

A. *Seraty Jr. Nicholas T.*

Mailing Address

*205 N. Levee St.*

City

*Brownsville*

State

*TX*

Zip Code

*78520*

FEC ID number of contributing  
federal political committee.

*C*

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

*06 08 2009*

Amount of Each Receipt this Period

*5,000.00*

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

*C*

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

0 0 0 0 0 0 0 0

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

*C*

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

0 0 0 0 0 0 0 0

Amount of Each Receipt this Period

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

*5,000.00*

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

*6,750.00*

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**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)

PAGE / OF /

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

*American Association of Bioanalysts Political Action Committee (AAB + PAC)*

Full Name (Last, First, Middle Initial)

A. *Pallone For Congress*

Date of Disbursement

*06 25 2009*

Mailing Address

*P.O. Box 3176*

City

*Long Branch*

State

*NJ*

Zip Code

*07740*

Purpose of Disbursement

*Congressional Candidate*

Candidate Name

*Frank Pallone Jr.*

Category/  
Type

Amount of Each Disbursement this Period

*1,000.00*

Office Sought:

☒ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

State: *NJ*

District: *06*

Full Name (Last, First, Middle Initial)

B. *Friends of Lois Capps*

Date of Disbursement

*06 29 2009*

Mailing Address

*P.O. Box 23940*

City

*Santa Barbara*

State

*CA*

Zip Code

*93121*

Purpose of Disbursement

*Congressional Candidate*

Candidate Name

*Lois G. Capps*

Category/  
Type

Amount of Each Disbursement this Period

*1,500.00*

Office Sought:

☒ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

State: *CA*

District: *23*

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

.....

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

State:

District:

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

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

*2,500.00*

10030422668



Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
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--	------------

<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
--	------------------

<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	

<input type="checkbox"/> USPS Express Mail	Postmarked
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☐ Postmark Illegible

☐ No Postmark


<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>Fed Ex</i>	Shipping Date <i>9/13/10</i>
Next Business Day Delivery <input checked="" type="checkbox"/>	

<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
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<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
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<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
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<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
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 PREPARER	<i>9/14/10</i> DATE PREPARED
---	---------------------------------