

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (In full)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines

College of American Pathologists Political Action Committee

ADDRESS (number and street)

1350 I Street, NW

Suite 590

Check if different than previously reported. (ACC)

Washington

DC

20005

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C00274944

3. IS THIS REPORT

X

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 Quarterly Report (YE)

July 31 Mid-Year Report (Non-election Year Only) (MY)

Termination Report (TER)

(b) Monthly Report Due On:

X 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

2004

through

01

31

2004

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 John H. Scott

Signature of Treasurer Electronically Filed by John H. Scott

Date 02 20 2004

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. 02/2003)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

College of American Pathologists Political Action Committee

Report Covering the Period: From: ^M01 ^D01 ^Y2004 To: ^M01 ^D31 ^Y2004

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 ^Y 2004 ^Y		77643.13
(b) Cash on Hand at Beginning of Reporting Period	77643.13	
(c) Total Receipts (from Line 19)	10850.00	10850.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	88493.13	88493.13
<hr/>		
7. Total Disbursements (from Line 31)	17161.87	17161.87
<hr/>		
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	71331.26	71331.26
<hr/>		
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. 02/2003)

Page 3

Write or Type Committee Name

College of American Pathologists Political Action Committee

Report Covering the Period: From: ^M01 ⁻01 ⁻2004^Y To: ^M01 ⁻31 ⁻2004^Y

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	6200.00	
(ii) Unitemized	4650.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii))	10850.00	10850.00
(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)	10850.00	10850.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total 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))	10850.00	10850.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	10850.00	10850.00

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) Shared 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.....	161.87	161.87
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	161.87	161.87
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	17000.00	17000.00
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... ▶	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) 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 ActMty (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))..	17161.87	17161.87
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 31).....	17161.87	17161.87

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	10850.00	10850.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10850.00	10850.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	161.87	161.87
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	161.87	161.87

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

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

FOR LINE NUMBER: PAGE 6 / 14

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)
College of American Pathologists Political Action Committee

Full Name (Last, First, Middle Initial) A. Dr. Craig A. Diez		Date of Receipt M / D / Y 01 / 07 / 2004
Mailing Address Department of Pathology 100 Madison Avenue		Transaction ID: SA11A1.13844
City State Zip Code Morristown NJ 07862-1856	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Morristown Memorial Hosp	Occupation Pathologist	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Robert Farham		Date of Receipt M / D / Y 01 / 02 / 2004
Mailing Address Department of Pathology PO Box 33549		Transaction ID: SA11A1.13841
City State Zip Code Charlotte NC 28233	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Presbyterian Hosp	Occupation Pathologist	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Dr. Gary A. Gochman		Date of Receipt M / D / Y 01 / 14 / 2004
Mailing Address Dept of Pathology 9400 E. Rosecrans Avenue		Transaction ID: SA11A1.13848
City State Zip Code Bellflower CA 90708	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Kaiser Permanente	Occupation Pathologist	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

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)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 14

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

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NAME OF COMMITTEE (In Full)
 College of American Pathologists Political Action Committee

Full Name (Last, First, Middle Initial) A. Dr. Steven P. Goetz		Date of Receipt M / D / Y 01 / 07 / 2004
Mailing Address 8 Arrowwood		Transaction ID: SA11A1.13845
City Mason City	State IA	Zip Code 50401
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Mercy Med Ctr-North Iowa	Occupation Pathologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Dr. John R. Hilsenbeck		Date of Receipt M / D / Y 01 / 02 / 2004
Mailing Address Department of Pathology 1824 Alcoa Hwy		Transaction ID: SA11A1.13842
City Knoxville	State TN	Zip Code 37920
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation Pathologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) C. Dr. Steven B. Jobal		Date of Receipt M / D / Y 01 / 09 / 2004
Mailing Address 3701 S Higuera St Ste 200		Transaction ID: SA11A1.13848
City San Luis Obispo	State CA	Zip Code 93401
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer	Occupation Pathologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts TN's Page (optional)	▶	3050.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 8/14

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
13	14	15	16	

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NAME OF COMMITTEE (In Full)
College of American Pathologists Political Action Committee

Full Name (Last, First, Middle Initial) A. Dr. Randy L. Judd		Date of Receipt M / D / Y 01 / 02 / 2004
Mailing Address Dept of Pathology 8100 Chancellor Dr Ste 130		Transaction ID: SA11A1.13843
City Orlando	State FL	Zip Code 32809
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Receipt For: Primary General Other (specify) ▼	Occupation Pathologist Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Dr. James Joseph Nevin		Date of Receipt M / D / Y 01 / 09 / 2004
Mailing Address 5287 Poala Street		Transaction ID: SA11A1.13847
City Honolulu	State HI	Zip Code 96821
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Cytopath Inc Receipt For: Primary General Other (specify) ▼	Occupation Pathologist Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Dr. James Joseph Nevin		Date of Receipt M / D / Y 01 / 23 / 2004
Mailing Address 5287 Poala Street		Transaction ID: SA11A1.13851
City Honolulu	State HI	Zip Code 96821
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Cytopath Inc Receipt For: Primary General Other (specify) ▼	Occupation Pathologist Aggregate Year-to-Date ▼ 750.00	

SUBTOTAL of Receipts This Page (optional)	1000.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 9 / 14

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
College of American Pathologists Political Action Committee

Full Name (Last, First, Middle Initial) A. Dr. James Joseph Navin		Date of Receipt M / D / Y 01 / 30 / 2004
Mailing Address 5287 Poala Street		Transaction ID: SA11A1.13853
City Honolulu	State HI	Zip Code 96821
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Cytopath Inc	Occupation Pathologist	Aggregate Year-to-Date ▼ 1250.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Dr. Luke A. Perkocha		Date of Receipt M / D / Y 01 / 22 / 2004
Mailing Address 50 Fanning Way		Transaction ID: SA11A1.13849
City San Francisco	State CA	Zip Code 94116
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Unaffiliated	Occupation Pathologist	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Dr. William L. Selby		Date of Receipt M / D / Y 01 / 23 / 2004
Mailing Address Laboratory Department 6B Hospital Rd		Transaction ID: SA11A1.13852
City Sylva	State NC	Zip Code 28779
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Mountain Pathology Services	Occupation Pathologist	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 10 / 14
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
College of American Pathologists Political Action Committee

Full Name (Last, First, Middle Initial) A. Dr. William C. Silberman		Date of Receipt M / D / Y Y / M / D D 01 / 22 / 2004	
Mailing Address 4200 Pleasant Valley Rd		Transaction ID: SA11A1.13850	
City Chantilly	State VA	Zip Code 20151	Amount of Each Receipt this Period 400.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Pathologist	Aggregate Year-to-Date ▼ 400.00	
Receipt For: Primary General Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	▶	400.00
TOTAL This Period (last page this line number only)	▶	6200.00

**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)

PAGE 11 / 14

<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)
College of American Pathologists Political Action Committee

Full Name (Last, First, Middle Initial)
A. Alice Forgy Kerr for Congress

Mailing Address P.O. Box 910988

City Lexington State KS Zip Code 40501

Purpose of Disbursement

Candidate Name

Office Sought: House
Senate
President
State: KY District: 6

Disbursement For: 2004
Primary General
Other (specify) ▼

Category/
Type

Transaction ID: SB23.1366D
Date of Disbursement

01 / 26 / 2004

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)
B. Alice Forgy Kerr for Congress

Mailing Address P.O. Box 910988

City Lexington State KY Zip Code 40501

Purpose of Disbursement

Candidate Name

Office Sought: House
Senate
President
State: KY District: 6

Disbursement For: 2004
Primary General
Other (specify) ▼

Category/
Type

Transaction ID: SB23.1366B
Date of Disbursement

01 / 26 / 2004

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)
C. BACHUS FOR CONGRESS COMMITTEE

Mailing Address P.O. Box 58444

City Birmingham State AL Zip Code 35259

Purpose of Disbursement

Candidate Name

Office Sought: House
Senate
President
State: AL District: 06

Disbursement For: 2004
 Primary General
Other (specify) ▼

Category/
Type

Transaction ID: SB23.13655
Date of Disbursement

01 / 22 / 2004

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 12 / 14

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
College of American Pathologists Political Action Committee

Full Name (Last, First, Middle Initial)
A. CHRIS BELL FOR CONGRESS COMMITTEE

Mailing Address 6524 SAN FELIPE PMB 441

City HOUSTON State TX Zip Code 77057

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: TX District: 25

Disbursement For: 2004
 Primary General
Other (specify) ▼

Category/ Type

Transaction ID: SB23.13666
Date of Disbursement
01 / 29 / 2004

Amount of Each Disbursement this Period
2000.00

Full Name (Last, First, Middle Initial)
B. Congressman Joe Barton Committee

Mailing Address P. O. Box 1444

City Ennis State TX Zip Code 75120

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: TX District: 8

Disbursement For: 2004
 Primary General
Other (specify) ▼

Category/ Type

Transaction ID: SB23.13664
Date of Disbursement
01 / 26 / 2004

Amount of Each Disbursement this Period
2000.00

Full Name (Last, First, Middle Initial)
C. FRIENDS OF DAVE WELDON

Mailing Address P.O. Box 968

City Melbourne State FL Zip Code 32902

Purpose of Disbursement

Candidate Name
Dave Weldon

Office Sought: House Senate President
State: FL District: 15

Disbursement For: 2004
 Primary General
Other (specify) ▼

Category/ Type

Transaction ID: SB23.13653
Date of Disbursement
01 / 22 / 2004

Amount of Each Disbursement this Period
1000.00

SUBTOTAL of Disbursements This Page (optional) ► **5000.00**

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 13 / 14

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
College of American Pathologists Political Action Committee

Full Name (Last, First, Middle Initial)
A. FRIENDS OF JOHN PETERSON

Mailing Address PO BOX 295

City PLEASANTVILLE State PA Zip Code 16341

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: PA District: D5
Disbursement For: 2004
 Primary General
Other (specify) ▼

Category/
Type

Transaction ID: SB23.13659

Date of Disbursement

01 / 26 / 2004

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. LINC PAC

Mailing Address 818 Connecticut Ave, NW
Suite 1100

City Washington State DC Zip Code 20006

Purpose of Disbursement
PAC Contribution

Candidate Name

Office Sought: House Senate President
State: District
Disbursement For: 2004
 Other (specify) ▼
Other

Category/
Type

Transaction ID: SB23.13658

Date of Disbursement

01 / 22 / 2004

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. ROGERS FOR CONGRESS

Mailing Address Post Office Box 581

City Brighton State MI Zip Code 48116

Purpose of Disbursement

Candidate Name
Mike Rogers

Office Sought: House Senate President
State: MI District: D8
Disbursement For: 2004
 Primary General
Other (specify) ▼

Category/
Type

Transaction ID: SB23.13657

Date of Disbursement

01 / 22 / 2004

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 14 / 14

<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)
College of American Pathologists Political Action Committee

Full Name (Last, First, Middle Initial)

A. The Pryce Project

Mailing Address 2042 Peach Orchard Drive
Suite 316

City Falls Church State VA Zip Code 22043

Purpose of Disbursement
PAC Contribution

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary General
X Other (specify) ▼

State: District Other

Category/
Type

Transaction ID: SB23.1365D

Date of Disbursement

01 / 05 / 2004

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. WHITFIELD FOR CONGRESS COMMITTEE

Mailing Address P.O. BOX 391

City HOPKINSVILLE State KY Zip Code 42241

Purpose of Disbursement

Candidate Name
Ed Whitfield for Congress

Office Sought: X House Senate President
Disbursement For: 2004 Primary General
Other (specify) ▼

State: KY District D1

Category/
Type

Transaction ID: SB23.13651

Date of Disbursement

01 / 22 / 2004

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

6000.00

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

17000.00