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Image# 15970300689

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

	Ottion Than 7th 7th	atriorized Commit			Office Use Only
NAME OF TYPE COMMITTEE (in full)	PE OR PRINT ▼	Example: If typ over the lines.	ing, type	12FE4M5	
College of American Path	nologists Political	Action Committ	ee		
ADDRESS (number and street)	1350 I Street, NW				
Check if different	Suite 590				
than proviously	Washington			DC	20005
2. FEC IDENTIFICATION NUMBER	BER ▼ C	CITY 🛦		STATE 🛦	ZIP CODE ▲
C C00274944	3.	\sim	NEW (N) OR	AM (A)	ENDED
4. TYPE OF REPORT (Choose One)	(b) Monthly Fe	eb 20 (M2)	May 20 (M5)	Aug	20 (M8) Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	× M	ar 20 (M3)	Jun 20 (M6)	Η.	20 (M9) Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report (Q1)		or 20 (M4)	Jul 20 (M7)		20 (M10) Jan 31 (YE)
July 15 Quarterly Report (Q2)	(c) 12-Day PRE-Election Report for the:	Primary (12 Convention		General (
October 15 Quarterly Report (Q3)	rieport for the.	Convention	(120)	Орсска (120)
January 31 Year-End Report (YE)	Elec	tion on	D D /	Y Y Y Y	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election Report for the:	General (30	G)	Runoff (3	0R) Special (30S)
Termination Report (TER)		tion on	D D /	Y	in the State of
5. Covering Period 02	/ D D / Y Y Y 2015		M M 02	/ D D / 28	2015
I certify that I have examined this F	Report and to the best	of my knowledge and	belief it is tru	ue, correct and	complete.
Type or Print Name of Treasurer	John Michael Misialek Dr.				
Signature of Treasurer John Mic	hael Misialek Dr.	[Electronical	lly Filed]	Date 03	/ 17 / Y Y Y Y Y Y 2015
NOTE: Submission of false, erroneous	s, or incomplete informati	ion may subject the pe	rson signing th	nis Report to th	e 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)

Write or Type Committee Name

College of American Pathologists Political Action Committee

Report Covering the Period: From: 02 01 2015 To: 02 28 2015

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2015		405859.24
	(b) Cash on Hand at Beginning of Reporting Period	435234.34	
	(c) Total Receipts (from Line 19)	61286.00	90773.00
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	496520.34	496632.24
7.	Total Disbursements (from Line 31)	7087.40	7199.30
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	489432.94	489432.94
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)

Write or Type Committee Name

College of American Pathologists Political Action Committee

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date						
Contributions (other than loans) From:								
(a) Individuals/Persons Other								
Than Political Committees								
(i) Itemized (use Schedule A)	51925.00	78625.00						
(ii) Unitemized	, 9361.00	12148.00						
(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	, 61286.00	90773.00						
(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 Contributions (add Lines								
11(a)(iii), (b), and (c)) (Carry		20						
Totals to Line 33, page 5)▶	61286.00	90773.00						
. Transfers From Affiliated/Other								
Party Committees	0.00	0.00						
-								
All Loans Received	0.00	0.00						
Loan Repayments Received	0.00	0.00						
Offsets To Operating Expenditures	7	0.00						
(Refunds, Rebates, etc.)								
· ·	0.00	0.00						
(Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00						
to Federal Candidates and Other	0.00	0.00						
Political Committees	0.00	0.00						
Other Federal Receipts								
(Dividends, Interest, etc.)	0.00	0.00						
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						
. Total Receipts (add Lines 11(d),								
12, 13, 14, 15, 16, 17, and 18(c))▶	61286.00	90773.00						
. Total Federal Receipts								
(subtract Line 18(c) from Line 19)▶	61286.00	90773.00						

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
1.	Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		outonaur rour to buto
	(i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating		
	Expenditures	87.40	199.30
	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	87.40	199.30
	Transfers to Affiliated/Other Party		
	CommitteesContributions to	0.00	0.00
	Federal Candidates/Committees and Other Political Committees	7000.00	7000.00
	Independent Expenditures (use Schedule E)	0.00	0.00
	Coordinated Party Expenditures	7	
	(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
	Loan Repayments Made	0.00	0.00
	Loans MadeRefunds of Contributions To:	0.00	0.00
	(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) Tabel Contribution Defined		
	(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))▶	0.00	0.00
	Other Disbursements	0.00	0.00
	Federal Election Activity (2 U.S.C. §431(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
	Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	7087.40	7199.30
	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)	7007 10	7/00 00
	from Line 31)	7087.40	7199.30

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
3. Total Contributions (other than loans) (from Line 11(d), page 3)	61286.00	90773.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	61286.00	90773.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	87.40	199.30
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	87.40	199.30

FOR LINE NUMBER:					PAGE	6	OF	36
(check only one)								
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Any information copied from such Reports and Sta or for commercial purposes, other than using the i	atements may not be sold or used by any person name and address of any political committee to	
NAME OF COMMITTEE (In Full)		
College of American Pathologists	s Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Jared Abbott MD,PhD		Date of Receipt
Mailing Address 305 41st St		02 04 2015
City	State Zip Code	Transaction ID : SA11AI.52392
West Des Moines	IA 50265-3874	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	650.00
Name of Employer	Occupation	
Pathology Laboratory PC	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	650.00	
Full Name (Last, First, Middle Initial) Dr. Kenneth M Algino MD		Date of Receipt
Mailing Address 3610 Colonial Green Cir SW		02 23 2015 _
City	State Zip Code	Transaction ID : SA11AI.52524
Roanoke	VA 24018-3738	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Carilion Labs, LLC	Pathologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Imad Y. Almanaseer MD		Date of Receipt
Mailing Address Dept of Path		M = M / D = D / Y = Y = Y
1775 Dempster St		02 04 2015
City	State Zip Code IL 60068-1143	Transaction ID : SA11AI.52387
Park Ridge	IL 60068-1143	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Advocate Lutheran General Hospital	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)		1150.00
TOTAL This Period (last page this line number of	nly)	

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	Statements may not be sold or used by any persone name and address of any political committee to	
NAME OF COMMITTEE (In Full) College of American Pathologi	sts Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Victor M. Alvarez MD Mailing Address 2045 S 14th Ave Unit 17		Date of Receipt
City	State Zip Code	02 26 2015 Transaction ID : SA11AI.52588
Yuma FEC ID number of contributing federal political committee.	AZ 85364-6286	Amount of Each Receipt this Period 1000.00
Name of Employer Yuma Reg Med Ctr Receipt For: Primary General	Occupation Pathologist Aggregate Year-to-Date ▼	
Other (specify) ▼ Full Name (Last, First, Middle Initial)	1000.00	
Mailing Address Department of Pathology 801 S Washington St City	State Zip Code	Date of Receipt 02 09 2015 Transaction ID : SA11AL52425
Naperville FEC ID number of contributing federal political committee.	IL 60540-7430	Transaction ID : SA11AI.52435 Amount of Each Receipt this Period 1000.00
Name of Employer Edward Hospital	Occupation Pathologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Margaret A. Batt MD		Date of Receipt
Mailing Address 9352 Park West Blvd		02 09 2015
City Knoxville	State Zip Code TN 37923-4322	Transaction ID : SA11AI.52433 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	
Parkwest Med Ctr Receipt For: Primary General Other (specify) ▼	Pathologist Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)		3000.00
TOTAL This Period (last page this line numbe	<u> </u>	

FOR LINE NUMBER:						PAGE	8	OF	36
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	the name and address of any political committee	
	ists Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. John W Bishop MD		Date of Receipt
Mailing Address UC Davis Medical Center Dept of Medical Pathology	7.0.1	02 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.52497
Sacramento	CA 95817	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
UC Davis Med Ctr	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Dr. Eleni P. Bourtsos MD		Date of Receipt
Mailing Address 5101 Willow Springs Rd		02 09 2015
City	State Zip Code	Transaction ID : SA11AI.52418
La Grange	IL 60525-2600	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer	Occupation	-
LaGrange Memorial Hosp	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Dr. Arthur W. Bracey MD		Date of Receipt
Mailing Address Department of Pathology-P 6720 Bertner St	125E	02 26 2015
City	State Zip Code	Transaction ID : SA11AI.52555
Houston	TX 77030-2604	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
CHI St. Luke's Health BCM Medical Cent	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional).		1250.00
FOTAL This Period (last page this line number	51 UIIIy /	

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	ng the name and address of any political committee	
College of American Pathological	ogists Political Action Committee	
Full Name (Last, First, Middle Initial) L Curtis Buchholz Dr.		Date of Receipt
Mailing Address Lab 44455 Sterling Hwy City	State Zip Code	02 17 2015 Transaction ID 0444 50400
Soldotna	AK 99669	Transaction ID : SA11AI.52496
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 500.00
Name of Employer	Occupation Pathologist	
Peninsula Pathology Institute Receipt For:		_
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) 3. Dr. Jeffrey D Cao MD		Date of Receipt
Mailing Address Dept of Path AH 301		M = M / D = D / Y = Y = Y
11021 Campus St City	State Zip Code	02 09 2015
Loma Linda	CA 92350	Transaction ID : SA11AI.52426
		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Loma Linda Univ Med Ctr	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Marcella Diana Cardona Dr.	ı	Date of Receipt
Mailing Address 1144 Pebble Creek Xing	I	02 09 2015
City	State Zip Code	Transaction ID : SA11AI.52415
Durham	NC 27713-8959	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer	Occupation	_
Duke University Medical Center	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	
SUBTOTAL of Receipts This Page (option	al)	1300.00
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TOTAL This Period (last page this line nur	mber only)	

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	d Statements may not be sold or used by any pers the name and address of any political committee to	
NAME OF COMMITTEE (In Full)		
College of American Patholog	gists Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Alan W. Cashell MD		Date of Receipt
Mailing Address 104 Westridge Dr		02 09 2015
City	State Zip Code	Transaction ID : SA11AI.52413
Elkins	WV 26241-9501	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	1
Davis Memorial Hospital	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) 3. Dr. William J Colburn MD		Date of Receipt
Mailing Address 21114 Vanowen St		02 23 2015
City	State Zip Code	Transaction ID : SA11AI.52541
Canoga Park	CA 91303-2821	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Interscope Pathology Med Grp	Occupation Pathologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Timothy J Collins MD		Date of Receipt
Mailing Address 115 N Peachtree Ave		02 23 _ 2015 _
City	State Zip Code	Transaction ID : SA11AI.52540
Cookeville	TN 38501-2546	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer	Occupation	-
Cookeville Pathology Laboratory	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	300.00	
SUBTOTAL of Receipts This Page (optional)	>	800.00
TOTAL This Period (last page this line numb	per only)	
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	Statements may not be sold or used by any person e name and address of any political committee to	
NAME OF COMMITTEE (In Full)		
College of American Pathologis	ts Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Earle S Collum MD		Date of Passint
		Date of Receipt
Mailing Address PMB 664 10645 W Tatum Blvd Ste C20	0	02 23 _ 2015 _
City 10645 W Tatum Blvd Ste C20	State Zip Code	02 23 2015 Transaction ID : SA11Al.52518
Phoenix	AZ 85028	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	
Pathology Associates LTD	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00 0	
Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Dr James P Craig MD		Date of Receipt
Mailing Address Lab Path		M = M / D = D / Y = Y = Y
900 E Oak Hill Ave	State 7in Code	02 25 2015
City	State Zip Code TN 37917-4505	Transaction ID : SA11AI.52548
Knoxville	TN 37917-4505	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Innovative Pathology Services	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00 0	
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Dr. Thomas S Denapoli MD		Date of Receipt
Mailing Address Department of Pathology		M M / D D / Y Y Y Y
333 N Santa Rosa St		02 09 2015
City	State Zip Code	Transaction ID : SA11AI.52439
San Antonio	TX 78207-3108	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Children's Hospital of San Antonio	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)		1750.00
TOTAL This Devied (last many " " "	only)	
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FOR LINE NUMBER: PAGE 12 OF 36

for each category of the Detailed Summary Page	00
13 14 15 16	17

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NAME OF COMMITTEE (In Full) College of American Pathologist	ts Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Patricia A Devine MD Mailing Address 200 F Main St # 393		Date of Receipt
City	State Zin Code	02 27 2015
City Stoneham	State Zip Code MA 02180	Transaction ID : SA11AI.52612 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer Lowell General Hospital	Occupation Pathologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) 3. Dr Paul S Dickman MD		Date of Receipt
Mailing Address Dept of Path /Lab 1919 E Thomas Rd	Stato 7: C-1-	02 17 2015
City Phoenix	State Zip Code AZ 85016-7710	Transaction ID : SA11AI.52499 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer Phoenix Children's Hosp	Occupation Pathologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Virginia Marilyn Donovan MD		Date of Receipt
Mailing Address 26 Pine Dr N		02 17 2015
City Roslyn	State Zip Code NY 11576-2037	Transaction ID : SA11AI.52503 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer	Occupation	
Winthrop Univ Hosp	Pathologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		1250.00
TOTAL This Period (last page this line number of		

	FOF	R LINE	NU	IMBER	:	PAGE	•	13 OF	=	36
Use separate schedule(s)	(che	ck only	or	ne)						
for each category of the Detailed Summary Page	X	11a		11b		11c		12		
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Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any person name and address 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 Pathologis	ts Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Janet R Durham MD Mailing Address Great Lakes Pathologists SC		Date of Receipt
8901 W Lincoln Ave		02 13 2015
City	State Zip Code	Transaction ID : SA11AI.52488
West Allis	WI 53227-2409	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	
Aurora Health ACL Labs	Pathologist	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) 3. Dr. Paul F Edmonson MD,PhD		Date of Receipt
Mailing Address Pathology A-220 1550 N 115th St		02 04 2015
City	State Zip Code	Transaction ID : SA11AI.52402
Seattle	WA 98133-9018	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	
Northwest Hosp	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Dr. Joseph Michael Foley MD		Date of Receipt
Mailing Address 2252 E Minton St		02 04 2015
City Mesa	State Zip Code AZ 85213-1400	Transaction ID : SA11AI.52396 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Banner Baywood Medical Center	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)		2250.00
TOTAL This Period (last page this line number		

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14 OF 36 Use separate schedule(s) for each category of the 12 Detailed Summary Page 13 14 15 16 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) Dr. Kathryn Foucar MD Date of Receipt Mailing Address Hematopathology 1001 Woodward PI NE 2015 27 City Zip Code State Transaction ID: SA11AI.52602 NM Albuquerque 87102-2705 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Occupation Tricore Reference Laboratories Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Robert M. Futoran MD Date of Receipt Mailing Address PO Box 2130 02 23 2015 City State Zip Code Transaction ID: SA11AI.52537 CA Clovis 93613-2130 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Pathology Associates Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Michael A Gistrak MD Date of Receipt Mailing Address Dept of Path 02 27 2015 865 Stone St City Zip Code State Transaction ID: SA11AI.52609 NJ Rahway 07065-2742 Amount of Each Receipt this Period FEC ID number of contributing 1500.00 С federal political committee. Name of Employer Occupation R Wood Johnson Univ Hosp Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1500.00 Other (specify)

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NAME OF COMMITTEE (In Full) College of American Pathologis	ets Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Steven P Goetz MD Mailing Address Poet of Bath		Date of Receipt
Mailing Address Dept of Path 1000 4th St SW		02 04 2015
City	State Zip Code	Transaction ID : SA11AI.52405
Mason City	IA 50401-2800	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Mercy Med Ctr-North Iowa	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) 3. Phillip Haberman MD		Date of Receipt
Mailing Address 7002 North Millliron Road		02 23 2015
City	State Zip Code	Transaction ID : SA11AI.52534
Cheyenne	WY 82009	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer	Occupation	
Anapath Diagnostics	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Dr. Troy A. Hampton MD		Date of Receipt
Mailing Address 2001 SW 117th St		02 03 2015
City Gainesville	State Zip Code FL 32607-1230	Transaction ID : SA11AI.52378
	32007-1230	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer	Occupation	
North Florida Reg Med Ctr	Pathologist	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	
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NAME OF COMMITTEE (In Full)		
College of American Patholo	ogists Political Action Committee	
Full Name (Last, First, Middle Initial) 1. Dr. Thomas E. Higgins MD		Date of Receipt
Mailing Address Department of Pathology		M = M / D = D / Y = Y = Y
400 E Main St City	State Zip Code	02 11 2015
Mount Kisco	NY 10549-3417	Transaction ID : SA11AI.52485 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 250.00
Name of Employer	Occupation	1
Northern Westchester Hosp	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00 0	
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Dr. Bruce Wayne Hughes MD		Date of Receipt
Mailing Address 2913 S 800 W		M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
City	State Zip Code	02 23 2015 Transaction ID : SA11Al.52513
Russiaville	IN 46979-9719	Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.	C	500.00
Name of Employer	Occupation	1
Mid America Clinical Laboratories	Pathologist]
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00 0	
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) C. Dr. Ming Jiang MD,PhD		Date of Receipt
Mailing Address 25 Melville Ln		02 25 2015
City	State Zip Code	Transaction ID : SA11AI.52552
Great Neck	NY 11023-1819	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	1
Brookdale University Hospital & Med Ct	Pathologist	_
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NAME OF COMMITTEE (In Full) College of American Pathologists Political Action Committee Full Name (Last, First, Middle Initial) Dr. Randal Carl Juengel MD Mailing Address Dept of Pathology 440 IS Western Ave City Okahoma City Okado Tastosation FEC ID number of contributing federal political committee. Full Name (Last, First, Middle Initial) Dr. Craig M Jurasinski MD Mailing Address II Stone Harbor Blvd City State Zip Code NJ 08210-2138 Feu Name (Last, First, Middle Initial) Dr. Craig M Jurasinski MD Mailing Address II Stone Harbor Blvd City State Zip Code NJ 08210-2138 FEC ID number of contributing federal political committee. Cape May Court House City State Zip Code NJ 08210-2138 Transaction ID: \$A11A152417 Amount of Each Receipt Initial State Agregate Year-to-Date ▼ Date of Receipt Transaction ID: \$A11A152417 Amount of Each Receipt Initial State Agregate Year-to-Date ▼ Date of Receipt Date of Receipt Date of Receipt Date of Receipt Transaction ID: \$A11A152417 Amount of Each Receipt Initial State Agregate Year-to-Date ▼ Date of Receipt Transaction ID: \$A11A152417 Amount of Each Receipt Initial State Agregate Year-to-Date ▼ Date of Receipt Date of Receipt Date of Receipt Transaction ID: \$A11A152417 Amount of Each Receipt Initial State Agregate Year-to-Date ▼ Date of Receipt Date of Receipt Transaction ID: \$A11A152417 Amount of Each Receipt Initial State Agregate Year-to-Date ▼ Date of Receipt Date of Receipt Date of Receipt Aggregate Year-to-Date ▼ Date of Receipt Amount of Each Receipt Initial State Agregate Year-to-Date ▼ Date of Receipt Date of Receipt Amount of Each Receipt Initial State Agregate Year-to-Date ▼ Date of Receipt Aggregate Year-to-Date ▼ Date of Receipt Amount of Each Receipt Initial State Agregate Year-to-Date ▼ Date of Receipt Amount of Each Receipt Initial State Agregate Year-to-Date ▼ Date of Receipt Initial State Agregate Year-to-Date ▼ Date of Receipt Initial State Agregate Year-to-Date ▼ Date of Receipt Initial Year-Ini		Statements may not be sold or used by any person e name and address of any political committee to					
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Receipt For: Primary General City State Zip Code NJ 08210-2138	Name of Employer	Occupation					
Primary General Other (specify) ▼ 250.00 Full Name (Last, First, Middle Initial) Dr. Craig M Jurasinski MD Mailing Address II Stone Harbor Blvd City State Zip Code O2 23 2015 Transaction ID: SA11Al.S2517 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer Cape Regional Medical Center Pathologist Receipt For: Primary General Other (specify) ▼ 250.00 Full Name (Last, First, Middle Initial) Dr. Oliver S Kim MD Mailing Address Department of Pathology 450 West Hwy 22 City Barrington IL 60010 FEC ID number of contributing federal political committee. C State Zip Code IL 60010 FEC ID number of contributing federal political committee. C State Zip Code IL 60010 FEC ID number of contributing federal political committee. C State Zip Code IL 60010 FEC ID number of contributing federal political committee. C State Zip Code IL 60010 FEC ID number of contributing federal political committee. Aggregate Year-to-Date ▼ 1000.00 SUBTOTAL of Receipts This Page (optional)		Pathologist					
Full Name (Last, First, Middle Initial) Date of Receipt City Cape May Court House NJ 08210-2138 FEC ID number of contributing federal political committee. Cape Regional Medical Center Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Date of Receipt Transaction ID: SA11Al.52517 Amount of Each Receipt this Period Cape Regional Medical Center Pathologist Feepl For: Primary General Other (specify) ▼ State Zip Code Pathologist Feel ID: Name (Last, First, Middle Initial) Date of Receipt Transaction ID: SA11Al.52401 Aggregate Year-to-Date ▼ Transaction ID: SA11Al.52401 Amount of Each Receipt this Period City Barrington FEC ID number of contributing federal political committee. C Transaction ID: SA11Al.52401 Amount of Each Receipt this Period C Transaction ID: SA11Al.52401 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. C 1000.00 SUBTOTAL of Receipts This Page (optional)		Aggregate Year-to-Date ▼					
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NAME OF COMMITTEE (In Full)		
College of American Pathologis	ts Political Action Committee	
Full Name (Last, First, Middle Initial) A. Dr. Glenn H Littell MD		Date of Receipt
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2975 Sycamore Dr	State 7:- C-4-	02 04 2015
City Simi Valley	State Zip Code CA 93065-1201	Transaction ID : SA11AI.52385
		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Simi Valley Hospital & Health Care Ser	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
	230.00	
Full Name (Last, First, Middle Initial) 3. Dr. Fangluo Liu MD		Date of Receipt
Mailing Address 420 34th St		M M / D D / Y Y Y Y Y
City	State Zip Code	02 27 2015
Bakersfield	CA 93301-2237	Transaction ID : SA11AI.52594 Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.	C	400.00
Name of Employer	Occupation	
Bakersfield Memorial Hosp Lab	Pathologist	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	400.00	
Full Name (Last, First, Middle Initial) Dr. Lesley C Lomo MD		Date of Receipt
Mailing Address UNM Health Sciences Center		M = M / D = D / Y = Y = Y
Dept of Path Msc08 4640		02 23 2015
City	State Zip Code	Transaction ID : SA11AI.52527
Albuquerque	NM 87131-0001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
TriCore Reference Laboratories	Pathologist	
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Primary General Other (specify) ▼	250.00	
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Full Name (Last, First, Middle Initial) Dr. Lincoln Luk Jr MD Mailing Address 1086 Snyder Ln		Date of Receipt
Mailing Address 1000 Stryder Ltt		02 25 2015
City Monterey Park	State Zip Code CA 91754-4760	Transaction ID : SA11AI.52550
FEC ID number of contributing federal political committee.	C 91734-4700	Amount of Each Receipt this Period 300.00
Name of Employer Centinela Hosp Med Health Center	Occupation Pathologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Dr. Alvin W. Martin MD	•	Date of Receipt
Mailing Address Cpa Laboratory 2307 Greene Way		02 09 _ 2015 _
City Louisville	State Zip Code KY 40220-4009	02 09 2015 Transaction ID : SA11AI.52414 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Norton Healthcare	Occupation Pathologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address 1501 San Pedro SE		02 23 2015
City Albuquerque	State Zip Code NM 87108	Transaction ID : SA11AI.52525 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
New Mexico VA Health Care Sys	Pathologist	_
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
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NAME OF COMMITTEE (In Full) College of American Patholog	ists Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Marwan Aziz Nasir MD		Date of Receipt
Mailing Address 9800 Pagewood Ln Apt 270		02 23 2015
City Houston	State Zip Code TX 77042-5531	Transaction ID : SA11AI.52529 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	1000.00
Name of Employer Tejas Pathology Associates Receipt For: □ Primary □ General □ Other (specify) ▼	Occupation Pathologist Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) 3. Dr. John G Newby MD Mailing Address Dept of Path	Date of Receipt	
11110 Medical Campus Rd	Ste 230 State Zip Code	02 09 2015 Transaction ID : SA11AI.52428
Hagerstown	MD 21742-6727	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Meritus Health	Occupation Pathologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Anthony D Nicastri MD		Date of Receipt
Mailing Address Dept of Path 450 Clarkson Ave # 37		02 17 2015
City Brooklyn	State Zip Code NY 11203-2056	Transaction ID : SA11AI.52495 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer	Occupation	-
SUNY HSC-Univ Hosp of Brooklyn Receipt For:	Pathologist	-
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional).		2500.00
TOTAL This Period (last page this line number	er only)	

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for each category of the Detailed Summary Page 13 14 15 16 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) Dr. Felix Ademola Olobatuyi MD Date of Receipt Mailing Address Department Of Pathology 2401 S 31st St MS-01-266 04 2015 City Zip Code State Transaction ID: SA11AI.52384 Temple TX 76508-0001 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Scott and White Memorial Hosp Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Nestor A. Pamatmat MD Date of Receipt Mailing Address 3333 N Seminary St 02 27 2015 City State Zip Code Transaction ID: SA11AI.52610 IL Galesburg 61401-1251 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation OSF St. Mary Med Ctr Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Fred Leon Picklesimer Jr MD Date of Receipt Mailing Address Dept of Path 02 23 2015 290 Big Run Rd City Zip Code State Transaction ID: SA11AI.52520 KY Lexington 40503-2903 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation P & C Labs, LLC Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

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NAME OF COMMITTEE (In Full) College of American Pathologis	sts Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Marguerite M Pinto MD Mailing Address 4 Bayberry Common City Westport FEC ID number of contributing federal political committee.	State Zip Code CT 06880	Date of Receipt 02 27 2015 Transaction ID : SA11AI.52605 Amount of Each Receipt this Period 500.00
Name of Employer Bridgeport Hospital Receipt For: Primary General Other (specify) ▼	Occupation Pathologist Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Julie A Plumbley MD Mailing Address Dept of Path 70 Med Ctr Cir Ste 309 City Fishersville FEC ID number of contributing federal political committee. Name of Employer Blue Ridge Pathologists PC Receipt For: Primary General Other (specify)	State Zip Code VA 22939-2273 C Occupation Pathologist Aggregate Year-to-Date ▼ 500.00	Date of Receipt Mark
Full Name (Last, First, Middle Initial) Dr. Blair C Presti MD Mailing Address Dept of Path 1008 Minnequa Ave City Pueblo FEC ID number of contributing federal political committee. Name of Employer St Mary-Corwin Hospital Receipt For: Primary General Other (specify)	State Zip Code CO 81004-3733 C Occupation Pathologist Aggregate Year-to-Date ▼ 250.00	Date of Receipt 02 27 2015 Transaction ID: SA11AI.52590 Amount of Each Receipt this Period 250.00
SUBTOTAL of Receipts This Page (optional)	>	1250.00
TOTAL This Period (last page this line number	only)	

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	he name and address of any political committee to	
NAME OF COMMITTEE (In Full)		
College of American Patholog	ists Political Action Committee	
Full Name (Last, First, Middle Initial) A. Dr. Shrin Rajagopalan MD,PhD		Date of Receipt
Mailing Address Dept of Pathology 3000 New Bern Ave		02 17 2015
City	State Zip Code	Transaction ID : SA11AI.52502
Raleigh	NC 27610-1231	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	1000.00
Name of Employer	Occupation	1
Wakemed Health And Hospitals	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	00 0	
Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Dr. Arundhati Rao MD,PhD		Date of Receipt
Mailing Address Department of Pathology M	S01-266	M = M / D = D / Y = Y = Y
2401 S 31st St	Choko 7th On I	02 23 2015
City	State Zip Code	Transaction ID : SA11AI.52511
Temple	TX 76508-0002	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	1
Scott & White Healthcare	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00 0	
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) C. Dr. Karen Y. Reeves MD		Date of Receipt
Mailing Address 4206 Golf Point Ct		02 26 2015
City	State Zip Code	Transaction ID : SA11AI.52573
Татра	FL 33618-8622	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer	Occupation	-
Tampa Gen Hosp	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	00 0	
Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional).		1500.00
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TOTAL This Period (last page this line number	er only)	

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NAME OF COMMITTEE (In Full)	rainta Political Action Committee	
/ College of American Patholo	gists Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. James Edward Richard DO		Date of Receipt
Mailing Address 2508 S Cedar St		02 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.52412
Lansing	MI 48910	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	750.00
Name of Employer	Occupation	
CAP Lab-PLC	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	00 0	
Other (specify) ▼	750.00	
Full Name (Last, First, Middle Initial) 3. Dr. Mazhar Rishi MD		Date of Receipt
Mailing Address 701 N Clayton St		02 27 _2015 _
City	State Zip Code	Transaction ID : SA11AI.52607
Wilmington	DE 19805-3165	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer	Occupation	1
St Francis Hospital	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial) Dr. Ahren C Rittershaus MD	1	Date of Receipt
Mailing Address 3000 New Bern Ave		02 23 _ 2015 _
City	State Zip Code	Transaction ID : SA11AI.52507
Raleigh	NC 27610-1231	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	-
unafilliated	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	1000.00	
SUBTOTAL of Receipts This Page (optional	I)	2050.00
TOTAL TIL D. 1.14. 1		
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	he name and address of any political committee to	
NAME OF COMMITTEE (In Full)		
College of American Pathologi	ists Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Charles F Romberger MD		Date of Receipt
Mailing Address Dept of Lab 555 N Duke St		02 25 2015
City	State Zip Code	Transaction ID : SA11AI.52545
Lancaster	PA 17602-2250	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	
Lancaster General Hospital	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	0.0	
Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) 3. Dr. Frank R Rudy MD		Date of Receipt
Mailing Address 141 Fineview Rd		02 09 2015
City	State Zip Code	Transaction ID : SA11AI.52419
Camp Hill	PA 17011-8447	Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.	C	500.00
Name of Employer	Occupation	
Pinnacle Health Hospitals	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	500.00	
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Dr. Susan W Rusch MD		Date of Receipt
Mailing Address WFHC		M M / D D / Y Y Y Y
5000 W Chambers St		02 09 2015
City	State Zip Code	Transaction ID : SA11AI.52438
Milwaukee	WI 53210-1650	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	+
St Josephs Hosp	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)		1750.00
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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

Full Name (Last, First, Middle Initial) Dr. Assad J Saad MD Mailing Address Dept of Path 1411 N Beckley Ave Ste 174 City	1 State Zip Code	Date of Receipt 02 11 2015 Transaction ID SA11AL 52450
Dallas	TX 75203	Transaction ID : SA11AI.52459
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	
Prism Pathology	Pathologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	
Full Name (Last, First, Middle Initial) Dr. George D Schaefer MD	•	Date of Receipt
Mailing Address Path		M = M / D = D / Y = Y = Y
300 Pinellas St City	State Zip Code	02 26 2015 Transaction ID : SA11AI.52561
Clearwater	FL 33756-3804	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	1500.00
Name of Employer Morton Plant Hospital / Morton Plant M	Occupation Pathologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	
Full Name (Last, First, Middle Initial)	•	
Dr. Jared N Schwartz MD,PhD		Date of Receipt
Mailing Address 3429 Wynington Dr City	State Zip Code	02 27 2015
Charlotte	NC 28226-1110	Transaction ID : SA11AI.52600 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2500.00
Name of Employer	Occupation	
Novant Health Presbyterian Medical Cen	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	2500.00	

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Any information copied from such Reports and or for commercial purposes, other than using	nd Statements may not be sold or used by any per g the name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) College of American Patholo	gists Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Mary R Schwartz MD		Date of Receipt
Mailing Address Dept of Path		M = M / D = D / Y = Y = Y = Y
MS 205	State Zip Code	02 04 2015 Transaction ID : SA11AI.52398
Houston	TX 77030-2703	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	+
The Methodist Hospital	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Dr. Jagmohan S Sidhu MD	·	Date of Receipt
Mailing Address 290 Foster Rd		02 26 2015
City	State Zip Code	Transaction ID : SA11AI.52565
Vestal	NY 13850-5414	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer	Occupation	1
Unaffiliated	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Dr. John W Skinner MD	-	Date of Receipt
Mailing Address 124 Woodlands Dr		02 17 2015
City Falmouth	State Zip Code ME 04105-1191	Transaction ID : SA11AI.52498
	ME 04105-1191	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	1
Unaffiliated	Pathologist	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optiona	ı) >	1750.00
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FOR LINE NUMBER: PAGE 30 OF 36 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 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) Dr. V. O. Speights Jr DO Date of Receipt Mailing Address Dept of Path MS-01-266 2401 S 31st St 2015 City State Zip Code Transaction ID: SA11AI.52486 TX Temple 76508-0001 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Scott and White Memorial Hospital Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Shantha Sreekanth MD Date of Receipt Mailing Address 17800 Kedzie Ave 02 27 2015 City State Zip Code Transaction ID: SA11AI.52616 Hazel Crest IL 60429-2029 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Advocate South Suburban Hospital Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. John Lamar Stavinoha Jr MD Date of Receipt Mailing Address 7600 Beechnut St 2nd Fl Lab 26 02 2015 City State Zip Code Transaction ID: SA11AI.52567 TX Houston 77074-4302 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Memorial Hermann Southwest Hospital Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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NAME OF COMMITTEE (In Full)	uioto Political Action Committee	
/ College of American Patholog	gists Political Action Committee	
Full Name (Last, First, Middle Initial) A. Dr. Paul Edward Steele MD		Date of Receipt
Mailing Address Path & Lab Med MLC 1010)	02 10 2015
City	State Zip Code	Transaction ID : SA11AI.52451
Cincinnati	OH 45229-3026	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer	Occupation	1
Cincinnati Childrens Hosp Med Ctr	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	00 0	
Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial) Dr. Robert C Stern MD		Date of Receipt
Mailing Address Laboratory		M = M / D = D / Y = Y = Y
St Davids Georgetown Hos		02 11 2015
City	State Zip Code TX 78626-7726	Transaction ID : SA11AI.52483
Georgetown	TX 78626-7726	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	1
St. Davids Georgetown Hospital	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Dr Brian K Stewart MD		Date of Receipt
Mailing Address 1348 NE Cushing Dr Ste 2	00	02 27 2015
City	State Zip Code	Transaction ID : SA11AI.52591
Bend	OR 97701-3876	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	1
Central Oregon Path Cnslt PC	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	500.00	
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NAME OF COMMITTEE (In Full)		
College of American Pathologis	sts Political Action Committee	
Full Name (Last, First, Middle Initial) Or Norman H Thompson MD		Date of Receipt
Mailing Address Dept of Path		M = M / D = D / Y = Y = Y
3260 Hospital Dr	Ctata 71. C. I	02 25 2015
City	State Zip Code AK 99801-7808	Transaction ID : SA11AI.52553
Juneau	9900 1-7 000	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	l.
Bartlett Reg Hosp	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00 0	
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Dr. Steven L Tracy MD		Date of Receipt
Mailing Address Lab		M = M / D = D / Y = Y = Y
2525 Court Dr	Stata 7in Code	02 11 2015
City Gastonia	State Zip Code NC 28054-2140	Transaction ID : SA11AI.52484
	20004-2140	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Gaston Mem Hosp	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
United (Specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Dr. Devendra V Trivedi MD		Date of Receipt
Mailing Address Peoria-Tazewell Path Group 221 NE Glen Oak Ave		02 26 2015
City	State Zip Code	Transaction ID : SA11AI.52559
Peoria	IL 61636-0001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Methodist Medical Center of Illinois	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	250.00	
Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)		1000.00
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for each category of the Detailed Summary Page 13 14 15 16 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) Dr. Melvin J. Van Boven DO Date of Receipt Mailing Address 802 S Jackson Ave Ste 305 04 2015 City Zip Code State Transaction ID: SA11AI.52399 OK Tulsa 74127-9057 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation **OSU Medical Center** Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Emily Ellen Volk MD,MBA Date of Receipt Mailing Address 219 Lamont Ave 02 07 2015 City State Zip Code Transaction ID: SA11AI.52411 TX San Antonio 78209-3753 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation **Baptist Medical Center** Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Thomas M Wheeler MD Date of Receipt Mailing Address Dept of Path & Immunology 1 Baylor Plz Rm T-203 02 10 2015 City Zip Code State Transaction ID: SA11AI.52455 TX Houston 77030-3411 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation Baylor College of Medicine Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 2500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

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or for commercial purposes, other than using the	name and address of any political committee to				
NAME OF COMMITTEE (In Full) College of American Pathologist	's Political Action Committee				
/					
Full Name (Last, First, Middle Initial) Dr. Sherry L Woodhouse MD					
Mailing Address PO Box 821440	-				
City	State Zip Code	02 18 2015 Transaction ID : SA11Al.52504			
Pembroke Pines	FL 33082-1440	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	1000.00			
Name of Employer	Occupation				
Pathology Consultants of S Broward	Pathologist				
Receipt For:	Aggregate Year-to-Date ▼				
Primary General					
Other (specify) ▼	1000.00				
Full Name (Last, First, Middle Initial) 3. Dr. John Andrew Wright MD		Date of Receipt			
Mailing Address 1001 S George St		M = M / D = D / Y = Y = Y			
City	State Zip Code	02 11 2015			
York	PA 17403-3676	Transaction ID : SA11AI.52468 Amount of Each Receipt this Period			
		Amount of Lacti necelpt this Period			
FEC ID number of contributing federal political committee.	C	300.00			
Name of Employer	Occupation				
York Hospital	Pathologist				
Receipt For:	Aggregate Year-to-Date ▼				
Primary General Other (specify) ▼	300.00				
Full Name (Last, First, Middle Initial)		Date of Possint			
Dr. Louis D Wright Jr MD Mailing Address PO Roy 998		Date of Receipt			
Mailing Address PO Box 998		02 11 2015			
City	State Zip Code	Transaction ID : SA11AI.52471			
Charleston	SC 29402-0998	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	1000.00			
Name of Employer	Occupation				
Path Svcs Assoc LLC	Pathologist				
Receipt For:	Aggregate Year-to-Date ▼				
Primary General					
Other (specify) ▼	1000.00				
SUBTOTAL of Receipts This Dags (antique)		2300.00			
SUBTOTAL of Receipts This Page (optional)	>				
TOTAL This Period (last page this line number of	only)	51925.00			

SCHEDULE B (FEC Form 3X)		EOD LINE	NUMBER: PAGE 35 OF 36		
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	(check only one)			
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or for commercial purposes, other than using the na					
NAME OF COMMITTEE (In Full)					
College of American Pathologists	Political Action Com	mittee			
		-			
Full Name (Last, First, Middle Initial)			Data of Dichurament		
A. BILIRAKIS FOR CONGRESS			Date of Disbursement		
Mailing Address P.O. BOX 606			02 19 2015		
3 3 3 3 3 1 1 3 1 1 3 1 1 3 3					
City	State Zip Code		Transaction ID : SB23.52619		
TARPON SPRINGS	FL 24688		Transaction id . 3623.32019		
Purpose of Disbursement			Assessed of Early Disharman and this Davied		
Candidate Name			Amount of Each Disbursement this Period		
Candidate maine		Category/ Type	500.00		
Office Sought: House Disburse	ment For: 2016	туре			
Senate Season	Primary General				
President	Other (specify) ▼				
State: FL District: 12	·				
Full Name (Last, First, Middle Initial)					
B. BOEHNER FOR SPEAKER			Date of Disbursement		
A4 19			M M / D D / Y Y Y Y		
Mailing Address 320 FIRST STREET, SE			02 19 2015		
City	State Zip Code				
WASHINGTON	DC 20003		Transaction ID : SB23.52620		
Purpose of Disbursement					
			Amount of Each Disbursement this Period		
Candidate Name		Category/	2500.00		
Office Country Marie		Туре	2500.00		
Office Sought: House Disburse Senate	ment For: 2016 Primary General				
President	Primary General Other (specify) ▼				
State: OH District: 08	Caron (opoonly)				
Full Name (Last, First, Middle Initial)					
C. MIKE KELLY FOR CONGRESS			Date of Disbursement		
			M M / D D / Y Y Y Y		
Mailing Address PO BOX 476			02 19 2015		
0.1.	01-1-				
City LYNDORA	State Zip Code PA 16045		Transaction ID : SB23.52621		
Purpose of Disbursement	10043				
•			Amount of Each Disbursement this Period		
Candidate Name		Category/			
		Type	1000.00		
	ment For: 2016				
Senate	Primary General				
State: DA Dietrict: 02	Other (specify) ▼				
State: PA District: 03					
SURTOTAL of Dishureaments This Dage (actional)			4000.00		
SUBTOTAL of Disbursements This Page (optional).		·····•			
TOTAL This Period (last page this line number only)				

Use separate schedule(s) College	SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 36 OF 3
Detailed Summary Page 27 228 28 28 28 28 20 20 30 Any information copied from such Reports and Statements may not be sold or used by any person for the purposes 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. PALLONE FOR CONGRESS Mailing Address POBOX 3176 City State Zip Code NJ 07740 Transaction ID : SB23.52623 Amount of Each Disbursement this Period Category/ Type Office Sought: House Senate President Other (specify) ▼ Date of Disbursement Carddate Name Category/ Type Date of Disbursement Category/ Type Office Sought: House Senate Primary General Carddate Name Category/ Type Date of Disbursement Category/ Type Transaction ID : SB23.52624 Amount of Each Disbursement this Period Category/ Type Transaction ID : SB23.52624 Amount of Each Disbursement this Period Category/ Type Transaction ID : SB23.52624 Amount of Each Disbursement this Period Category/ Type Transaction ID : SB23.52624 Amount of Each Disbursement this Period Category/ Type Transaction ID : SB23.52624 Amount of Each Disbursement this Period Category/ Type Transaction ID : SB23.52624 Amount of Each Disbursement this Period Category/ Type Transaction ID : SB23.52624 Amount of Each Disbursement this Period Category/ Type Date of Disbursement this Period Category/ Type Transaction ID : SB23.52625 Amount of Each Disbursement this Period Category/ Type Category/ Type Transaction ID : SB23.52625 Amount of Each Disbursement this Period Category/ Type City State Zip Code Springly Queries Category/ Type	ITEMIZED DISBURSEMENTS		(s) (check only	v one)
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