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)
[X] 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

A. Full Name (Last, First, Middle Initial)
M. Joseph Pyle Dr.

Mailing Address 834 Clinton Pl

City: River Forest
State: IL
Zip Code: 60305-1502

FEC ID number of contributing federal political committee.: C

Name of Employer: Advocate Christ Medical Center
Occupation: Pathologist

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 04 / 06 / 2012
Transaction ID : SA11AI.46463

Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
Dr. Robert Laurence Randell Jr., MD

Mailing Address 491 Sylvan Dr

City: Winter Park
State: FL
Zip Code: 32789-3974

FEC ID number of contributing federal political committee.: C

Name of Employer: Florida Hospital
Occupation: Pathologist

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 04 / 25 / 2012
Transaction ID : SA11AI.46465

Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
Dr. Richard A Ray MD

Mailing Address Dept of Path
975 Sereno Dr

City: Vallejo
State: CA
Zip Code: 94589-2441

FEC ID number of contributing federal political committee.: C

Name of Employer: Kaiser Permanente Med Ctr
Occupation: Pathologist

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 04 / 04 / 2012
Transaction ID : SA11AI.46467

Amount of Each Receipt this Period: 600.00

SUBTOTAL of Receipts This Page (optional) ▶ 2600.00

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