Image# 12960686827 PAGE 1 / 29

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

		Authorized				Office Use Only
NAME OF TY COMMITTEE (in full)	PE OR PRINT ▼		ole: If typir he lines.	g, type	12FE4M5	5
College of American Pat	hologists Politic	al Action Co	ommitte	e		
ADDRESS (number and street)	1350 I Street, NW					
Check if different	Suite 590					
than previously reported. (ACC)	Washington				DC	20005
2. FEC IDENTIFICATION NUM	BER ▼	CITY 🛦		;	STATE 🛦	ZIP CODE ▲
C C00274944		3. IS THIS REPORT	\ <u>\</u>	EW N) OR	AI (A	MENDED)
4. TYPE OF REPORT (Choose One)	(b) Monthly Report Due On:	Feb 20 (M2)		May 20 (M5)	Aug	20 (M8) Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:		Mar 20 (M3)		un 20 (M6)	H	20 (M9) Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report (Q1)		Apr 20 (M4)		ul 20 (M7)		20 (M10) Jan 31 (YE)
July 15 Quarterly Report (Q2)	(c) 12-Day PRE-Election Report for the	1 H	rimary (12P		General Special	_
October 15 Quarterly Report (Q3)	rioport for ti		onvention ((20)	Ороски	(120)
January 31 Year-End Report (YE)	E	lection on	M M /	06	2012	in the State of IL
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election Report for the		eneral (30G)	Runoff (30R) Special (30S)
Termination Report (TER)		lection on	M	D D /	Y = Y = Y = Y	in the State of
5. Covering Period 10)12	through	10	/ D D D 17_	2012
I certify that I have examined this	Report and to the bear	st of my knowle	edge and b	elief it is tru	ie, correct ar	d complete.
Type or Print Name of Treasurer	Dr. Renee R. Ellerbroe	k				
Signature of Treasurer Dr. Rene	ee R. Ellerbroek	[E	lectronically	Filed]	Date 10	23 / 2012
NOTE: Submission of false, erroneou	s, or incomplete inforn	nation may subje	ect the pers	on signing th	nis Report to	he 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

College of American Pathologists Political Action Committee

Report Covering the Period: From: 10 01 2012 To: 10 17 2012

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2012		478752.69
	(b) Cash on Hand at Beginning of Reporting Period	476888.09	
	(c) Total Receipts (from Line 19)	21921.00	344678.00
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	498809.09	823430.69
7.	Total Disbursements (from Line 31)	66041.90	390663.50
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	432767.19	432767.19
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

Report Covering the Period: From: 10 I. Receipts	COLUMN A	COLUMN B
<u> </u>	Total This Period	Calendar Year-to-Date
. Contributions (other than loans) From: (a) Individuals/Persons Other		
Than Political Committees		
(i) Itemized (use Schedule A)	17376.00	263746.00
(ii) Unitemized	4545.00	80932.00
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)▶	21921.00	344678.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	
(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) ▶	21921.00	344678.00
2. Transfers From Affiliated/Other		
Party Committees	0.00	0.00
3. All Loans Received	0.00	0.00
Loan Repayments Received	0.00	0.00
5. Offsets To Operating Expenditures		
(Refunds, Rebates, etc.)	0.00	0.00
(Carry Totals to Line 37, page 5)	7	0.00
to Federal Candidates and Other		
Political Committees	0.00	0.00
7. Other Federal Receipts		
(Dividends, Interest, etc.)	0.00	0.00
3. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(1011 001100010 110)	, , , , ,	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(17) = 1 1 2 20 30 30 (10)	7 7	
(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))▶	21921.00	344678.00
). Total Federal Receipts (subtract Line 18(c) from Line 19)▶	21921.00	344678.00

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
Operating Expenditures: (a) Allocated Federal/Non-Federal	Total Tills I Gliou	Calcilual Teal-10-Date
Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(**) N 5 1 10	0.00	0.00
(ii) Non-Federal Share(b) Other Federal Operating	0.00	0.00
(b) Other Federal Operating Expenditures	41.90	881.50
(c) Total Operating Expenditures	7	
(add 21(a)(i), (a)(ii), and (b))▶	41.90	881.50
2. Transfers to Affiliated/Other Party		
Committees	0.00	0.00
Federal Candidates/Committees	68500.00	409500.00
and Other Political Committees	00300.00	408500.00
4. Independent Expenditures (use Schedule E)	0.00	0.00
5. Coordinated Party Expenditures	7 7	
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
6. Loan Repayments Made	0.00	0.00
/ Laura Mada	0.00	0.00
7. Loans Made	0.00	0.00
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
That I onted Gothinitios	, , , ,	
(b) Political Party Committees	-2500.00	-5000.00
(c) Other Political Committees		
(such as PACs)	0.00	0.00
(d) Total Contribution Refunds		
(add Lines 28(a), (b), and (c))▶	-2500.00	-5000.00
(200 200) (2), (2), 200 (2),		
9. Other Disbursements	0.00	-13718.00
_		
D. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity		
(from Schedule H6) (i) Federal Share	0.00	0.00
(1) 1 000101 011010		
(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	0.00	0.00
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))	66041.90	390663.50
		23500.00
. Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)	* * * * * * * * * * * * * * * * * * * *	200000
from Line 31)	66041.90	390663.50

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

TEO TOTHI SX (Nev. 02/2003)		i age 3
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)	21921.00	344678.00
4. Total Contribution Refunds (from Line 28(d))	-2500.00	-5000.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	24421.00	349678.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	41.90	881.50
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	41.90	881.50

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Any information copied from such Reports and Storm for commercial purposes, other than using the	atements may not be sold or used by any perso name and address of any political committee to	
NAME OF COMMITTEE (In Full)	a Political Action Committee	
College of American Pathologist	5 Fullical Action Committee	
Full Name (Last, First, Middle Initial) 1. Dr Robert M Bradley MD		Date of Receipt
Mailing Address 1211 Union Ave Ste 300		10 02 2012
City	State Zip Code	Transaction ID : SA11AI.47231
Memphis	TN 38104-6655	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Duckworth Pathology Group Inc	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Dr. Sidney Ethan Carpenter MD		Date of Receipt
Mailing Address Dept of Path Yosemite 1 Lab		M M / D D / Y Y Y Y
7300 N Fresno St	State Zip Code	10 12 2012
Fresno	CA 93720-2941	Transaction ID : SA11AI.47307 Amount of Each Receipt this Period
		Amount of Lacif neceipt this Fellou
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Kaiser Permanente Med Ctr Fresno	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	500.00	
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) C. Dr. Victor Casas MD		Date of Receipt
Mailing Address Dept of Path		M - M / D - D / Y - Y - Y
65 James St		10 12 2012
City	State Zip Code	Transaction ID : SA11AI.47314
Edison	NJ 08820-3947	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	601.00
Name of Employer	Occupation	
JFK Medical Center	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	601.00	
SUBTOTAL of Receipts This Page (optional)		1601.00
TOTAL This Period (last page this line number of	nly)	

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or for commercial purposes, other than using the		solicit contributions from such committee.
NAME OF COMMITTEE (In Full) College of American Pathologis	ts Political Action Committee	
Full Name (Last, First, Middle Initial) Or. Michael B Cohen MD Mailing Address 1950 Circle of Hope N3170		Date of Receipt
City	State Zip Code	10 02 2012
Salt Lake City	UT 84112	Transaction ID : SA11AI.47233 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer	Occupation	
Huntsman Cancer Hospital	Pathologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Jessica M Comstock MD		Date of Receipt
Mailing Address Dept of Path		M = M / D = D / Y = Y = Y
100 Mario Capecchi Dr City	State Zip Code	10 12 2012 Transaction ID : \$A11A1 47316
Salt Lake City	UT 84113-1103	Transaction ID : SA11AI.47316 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	1000.00
Name of Employer Primary Children's Medical Center	Occupation Pathologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Stephen G Connolly MD		Date of Receipt
Mailing Address Stockton Path 1800 N California St		10 15 2012
City Stockton	State Zip Code CA 95204-6019	Transaction ID : SA11AI.47357
FEC ID number of contributing federal political committee.	CA 95204-6019	Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	
St Joseph's Medical Center	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)		2000.00
TOTAL This Period (last page this line number of		

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	Statements may not be sold or used by any pers ne 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. Thomas J Cooper Jr MD Mailing Address 5620 E El Parque St		Date of Receipt 10 15 2012
City Long Beach	State Zip Code CA 90815-4129	Transaction ID : SA11AI.47340 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer unaffiliated Receipt For:	Occupation Pathologist Aggregate Vegr-to-Date	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) Dr. Jeffrey Gaston Detweiler MD Mailing Address 6100 Harris Pkwy		Date of Receipt
City	State Zip Code	10 15 2012 Transaction ID : SA11AI.47341
Fort Worth	TX 76132-4101	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Texas Health Southwest	Occupation Pathologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Dr. Rosemary E. Detweiler MD		Date of Receipt
Mailing Address Department of Pathology 6100 Harris Pkwy	Stoto 7:- O-1-	10 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Fort Worth	State Zip Code TX 76132-4101	Transaction ID : SA11AI.47342 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	
Texas Health Southwest Receipt For:	Pathologist	
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	300.00	
SUBTOTAL of Receipts This Page (optional)	<u> </u>	300.00
TOTAL This Period (last page this line numbe	r 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)		
$\Big angle$ College of American Pathologis	ts Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Edward Ewing DO		Date of Receipt
Mailing Address Lab		M = M / D = D / Y = Y = Y
405 W Grand Ave	State Zip Code	10 12 2012
Dayton	OH 45405-4720	Transaction ID : SA11AI.47320
		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1500.00
Name of Employer	Occupation	
Grandview Hospital and Med Ctr	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	4500.00	
Other (specify) ▼	1500.00	
Full Name (Last, First, Middle Initial) Dr. Thomas S. Haas DO		Date of Receipt
Mailing Address Department of Pathology		M = M / D = D / Y = Y = Y
1000 Mineral Point Ave	State 7in Code	10 15 2012
City Janesville	State Zip Code WI 53548-2940	Transaction ID : SA11AI.47328
	VVI 33340-234U	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	
Mercy Hospital	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	400.00	
Other (specify) ▼	400.00	
Full Name (Last, First, Middle Initial) Dr. Michael Andrew Huening MD,	PhD	Date of Receipt
Mailing Address WakeMed Health AND Hospit		M = M / D = D / Y = Y = Y
3000 New Bern Ave		10 12 2012
City	State Zip Code	Transaction ID : SA11AI.47322
Raleigh	NC 27610-1231	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2000.00
Name of Employer	Occupation	
WakeMed Cary Hospital	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify)	2000.00	
SUBTOTAL of Receipts This Page (optional)		3550.00
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FOR LINE NUMBER: PAGE 10 OF 29 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. Walter Martin Klein MD Date of Receipt Mailing Address Dept of Path 130 S Bryn Mawr Ave 2012 10 09 City Zip Code State Transaction ID: SA11AI.47237 PΑ Bryn Mawr 19010-3121 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Occupation Bryn Mawr Hospital Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Lynn L Kleopfer MD Date of Receipt Mailing Address 200 Portland St 10 12 2012 City State Zip Code Transaction ID: SA11AI.47295 MO Columbia 65201-6525 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Boyce & Bynum Pathology Labs PC Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Stewart M Knoepp MD,PhD Date of Receipt Mailing Address 139 Laurin Dr 10 12 2012 City State Zip Code Transaction ID: SA11AI.47297 MI Ann Arbor 48105-3057 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation unaffiliated Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 750.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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29 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. Roger C Mathewson MD Date of Receipt Mailing Address Laboratory Medical Director 401 N Ewing St 2012 10 City Zip Code State Transaction ID: SA11AI.47361 OH Lancaster 43130-3372 Amount of Each Receipt this Period FEC ID number of contributing C 750.00 federal political committee. Name of Employer Occupation Fairfield Medical Center Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Julia E. Mooney MD Date of Receipt Mailing Address 2036 Railroad Ave 10 10 2012 City State Zip Code Transaction ID: SA11AI.47254 CA Redding 96001-1801 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Shasta Pathology Associates Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Robert Joseph Murphy MD Date of Receipt Mailing Address Dept of Path 10 12 2012 1726 Shawano Ave City Zip Code State Transaction ID: SA11AI.47303 WI Green Bay 54303-3216 Amount of Each Receipt this Period FEC ID number of contributing 300.00 С federal political committee. Name of Employer Occupation St Mary's Hospital Medical Center Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 1300.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number 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 Bahram R Oliai MD Date of Receipt Mailing Address IHC Laboratory 1355 River Bend Dr 2012 10 City Zip Code State Transaction ID: SA11AI.47355 Dallas TX 75247-4915 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Propath Lab Inc Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Yao Cheng Ong MD Date of Receipt Mailing Address 5542 High St 10 12 2012 City State Zip Code Transaction ID: SA11AI.47299 FL **New Port Richey** 34652-4026 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation unaffiliated Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Charles F Romberger MD Date of Receipt Mailing Address Dept of Lab 10 10 2012 555 N Duke St City State Zip Code Transaction ID: SA11AI.47260 PΑ Lancaster 17602-2250 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation Lancaster General Hospital Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number 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. Rachel L Rucker-Schmidt MD Date of Receipt Mailing Address 3413 Southwestern Blvd 2012 10 City Zip Code State Transaction ID: SA11AI.47308 Dallas TX 75225-7656 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation MD Pathology Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Katherine M Scott MD Date of Receipt Mailing Address Dept of Path 5301 E Grant Rd 10 12 2012 City State Zip Code Transaction ID: SA11AI.47310 ΑZ Tucson 85712-2805 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Intersociety Council For Pathology Inf Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Mary Ann Sens MD, PhD Date of Receipt Mailing Address School of Medicine Hlth Sci Dept of Path Rm 3133 Stop 9037, 50 10 12 2012 City Zip Code State Transaction ID: SA11AI.47318 ND **Grand Forks** 58203-2817 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation Univ of North Dakota School of Medicin Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 2000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number 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. Marcia Catherine Shattuck MD Date of Receipt Mailing Address 416 Connable Ave 2012 10 City Zip Code State Transaction ID: SA11AI.47258 Petoskey MI 49770-2212 Amount of Each Receipt this Period FEC ID number of contributing C 400.00 federal political committee. Name of Employer Occupation McLaren Northern Michigan Hospital Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) B. DR GREGORY J Skarulis MD Date of Receipt Mailing Address Dept of Path 206 2nd St E 10 12 2012 City State Zip Code Transaction ID: SA11AI.47311 FL Bradenton 34208-1042 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Manatee Mem Hosp Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Matthew James Snyder MD Date of Receipt Mailing Address Pathology Dept 10 15 2012 3000 New Bern Ave City Zip Code State Transaction ID: SA11AI.47351 NC Raleigh 27610-1231 Amount of Each Receipt this Period FEC ID number of contributing 175.00 С federal political committee. Name of Employer Occupation Raleigh Pathology Lab Assoc PA Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1400.00 Other (specify) 1075.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: PAGE 15 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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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. Susan L. Speaks MD,PhD Date of Receipt Mailing Address 1133 College Ave Bldg B-131 2012 10 City Zip Code State Transaction ID: SA11AI.47301 KS Manhattan 66502-2770 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Peterson Laboratory Services Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Robert C Stern MD Date of Receipt Mailing Address Laboratory St Davids Georgetown Hospital 10 10 2012 City Zip Code State Transaction ID: SA11AI.47261 TX Georgetown 78626-7726 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation St. Davids Georgetown Hospital Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Ann Taylor MD Date of Receipt Mailing Address Dept of Path 10 12 2012 8th Ave & C St City Zip Code State Transaction ID: SA11AI.47305 UT Salt Lake City 84143-0001 Amount of Each Receipt this Period FEC ID number of contributing 300.00 С federal political committee. Name of Employer Occupation LDS Hospital Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 1550.00 SUBTOTAL of Receipts This Page (optional).....

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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. Elmer Noel Thompson III MD		Date of Receipt
Mailing Address Lab		M = M / D = D / Y = Y = Y
12500 Willowbrook Rd	State Zin Code	10 10 2012
City Cumberland	State Zip Code MD 21502-6393	Transaction ID : SA11AI.47256
	21002 0000	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
unaffiliated	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	070.00	
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Dr. Elizabeth A Wagar MD		Date of Receipt
Mailing Address Dept of Lab Med Unit 24		M = M / D = D / Y = Y = Y
1515 Holcombe Blvd City	State Zip Code	10 12 2012
City Houston	State Zip Code TX 77030-4009	Transaction ID : SA11AI.47312
		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
UTMD Anderson Cancer Ctr	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	55 0	
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Dr. Ronald L. Weiss MD,MBA		Date of Receipt
Mailing Address Dept of Path		M = M / D = D / Y = Y = Y
500 Chipeta Way		10 15 2012
City	State Zip Code	Transaction ID : SA11AI.47359
Salt Lake City	UT 84108-1221	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
ARUP Laboratories Inc	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)		1250.00
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for each category of the Detailed Summary Page 14 13 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. Nancy A Young MD Date of Receipt Mailing Address Path and Lab Med 5501 Old York Rd 2012 10 02 City Zip Code State Transaction ID: SA11AI.47234 PΑ Philadelphia 19141-3018 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Occupation Albert Einstein Med Ctr Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 650.00 Other (specify) Full Name (Last, First, Middle Initial) B Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 500.00 SUBTOTAL of Receipts This Page (optional)..... 17376.00 TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3X)		T EOD LINE	NUMBER: PAGE 18 OF 29					
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	(check onl	NONDELL.	r 29				
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NAME OF COMMITTEE (In Full)	5 11/1 1 5 5 5							
College of American Pathologists	Political Action Comr	nittee						
Full Name (Last, First, Middle Initial)			T					
A. Sun Trust Bank			Date of Disbursement					
			M = M / D = D / Y = Y = Y					
Mailing Address P.O. Box 85024			10 03 2012					
City	State Zip Code							
Richmond	VA 23285		Transaction ID : SB21B.47413					
Purpose of Disbursement			1					
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SCHEDULE B (FEC Form 3X)		FOR LINE I	PAGE 19 OF 29	
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only one)		
	Detailed Summary Page	21b	22 🗙 23	24 25 26
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NAME OF COMMITTEE (In Full)				
College of American Pathologists I	Political Action Comr	mittee		
Full Name (Last, First, Middle Initial)				
A. BASS VICTORY COMMITTEE			Date of Disburseme	ent
Mailing Address PO Box 3451			10 10	2012
PO Box 3451	State Zip Code			
City Concord	State Zip Code NH 03302		Transaction ID: S	SB23.47392
Purpose of Disbursement	00002			
			Amount of Each Dis	sbursement this Period
Candidate Name		Category/ Type		3000.00
Office Sought: House Disburse	ment For: 2012			
Senate	Primary Seneral			
President	Other (specify) ▼			
State: NH District: 02				
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B. BEN CARDIN FOR SENATE			Date of Disburseme	
Mailing Address PO BOX 21093			10 08	2012
City CATONSVILLE	State Zip Code MD 21228		Transaction ID : S	SB23.47373
Purpose of Disbursement	VID 21220			
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Candidate Name		Category/		
		Type		3500.00
	ment For: 2012			
Senate	Primary General			
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C. BENISHEK FOR CONGRESS, INC	C.		Date of Disburseme	ent
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Mailing Address PO BOX 108			10 10	2012
City	State Zip Code		: IS 4	2000
GLADSTONE	MI 49837		Transaction ID:	5B23.4/393
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SCHEDULE B (FEC Form 3X)		FOR LINE I	NUMBER: PAGE 20 OF 29
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NAME OF COMMITTEE (In Full)	A C C C C C C C C C C C C C C C C C C C		
College of American Pathologists P	olitical Action Com	mittee	
Full Name (Last, First, Middle Initial)			D . (D)
A. BOOZMAN FOR ARKANSAS			Date of Disbursement
Mailing Address PO BOX 671			10 08 2012
,	tate Zip Code		Transaction ID : SB23.47374
	AR 72757		Transaction 15 : 0520.47074
Purpose of Disbursement			Amount of Each Disbursement this Period
Candidate Name		Category/	2500.00
Office Sought: House Disbursem	nent For: 2012	Туре	2300.00
Senate F	Primary Seneral		
State: AR District:	Other (specify) ▼		
Full Name (Last, First, Middle Initial)			
3. COTTON FOR CONGRESS			Date of Disbursement
Mailing Address PO BOX 379			10 08 2012
•	tate Zip Code		Transaction ID : SB23.47375
DARDANELLE Purpose of Disbursement	AR 72834		
			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	5000.00
Senate F	ent For: 2012 Primary		
State: AR District: 04			
Full Name (Last, First, Middle Initial) CRAMER FOR CONGRESS			Date of Disbursement
Mailing Address PO BOX 396			10 10 2012
City S	tate Zip Code		Transaction ID : SP22 47205
	ND 58502		Transaction ID : SB23.47395
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Candidate Name		Category/	Amount of Each Disbursement this Period 2500.00
Office Sought:	nent For: 2012	Туре	2500.00
	Primary Seneral		
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College of American Path	nologists F	Political	Action Com	mitte	e									
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Full Name (Last, First, Middle Initial)														
A. DENNY HECK FOR CON	IGRESS						Date o	f Disl	burse	ment				
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Mailing Address PO BOX 235							10		30	3	2	012		
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B. DENNY HECK FOR CON	NGRESS						Date o	f Disl	burse	ment				
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Full Name (Last, First, Middle Initial)														
C. FRIENDS FOR CHRIS S	TEWART	, INC.					Date o	f Disl	burse	ment				
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Mailing Address 542 E LAKEVIEW W	/AY						10	_	10)	_ 2	012		
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FARMINGTON Purpose of Disbursement		UI	84025											
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Office Sought: House	Disburser	ment For:	2012		. 1				7					-
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State: UT District: 02														
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SCHEDULE B (FEC Form 3X)		, FOR LINE	PAGE 22 OF 29	
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or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full)				
College of American Pathologists F	Political Action Co	mmittee		
Full Name (Lock Single Middle Jeilie)				
Full Name (Last, First, Middle Initial) A. FRIENDS OF MARIA			Date of Disburseme	ent
" FRIENDS OF WARIA			M M / D D	/
Mailing Address PO BOX 12740			10 08	2012
City SEATTLE	State Zip Code WA 98111		Transaction ID : \$	SB23.47379
Purpose of Disbursement	WA 98111			
. 4.5000 0. 2.004.00			Amount of Each Di	sbursement this Period
Candidate Name		Category/		
		Type		2500.00
	nent For: 2012			
Senate	Primary General			
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Full Name (Last, First, Middle Initial)				
B. FRIENDS OF SHERROD BROWN	Ī		Date of Disburseme	ent
TRIENDO OF CHERROD BROWN			M M / D D	/ Y Y Y Y Y
Mailing Address P.O. BOX 76187			10 08	2012
,	State Zip Code		Transaction ID : S	SB23.47381
Washingotn Purpose of Disbursement	DC 20013			
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Candidate Name		Category/		
		Type		3000.00
Office Sought: House Disburser	nent For: 2012	'		
	Primary General	I		
	Other (specify) ▼			
State: OH District: Full Name (Last, First, Middle Initial)				
C. GEORGE HOLDING FOR CONGR	PESS		Date of Disburseme	ent
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Mailing Address PO BOX 97187			10 08	2012
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,	State Zip Code NC 27624		Transaction ID:	SB23.47382
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Candidate Name		Category/		2000.00
		Туре		2000.00
	nent For: 2012			
Senate President	Primary	1		
State: NC District: 13	Other (specify)			
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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 23 OF	29
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NAME OF COMMITTEE (In Full)				
College of American Pathologists	Political Action Com	mittee		
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Full Name (Last, First, Middle Initial)			Data of Dishurasment	
A. JOHNSON FOR CONGRESS			Date of Disbursement	
Mailing Address P.O. BOX 14496			10 10 2012	
City	State Zip Code		Transaction ID : SB23.47401	
POLAND Purpose of Disbursement	OH 44514			
rulpose of disbursement			Amount of Each Disbursement this Peri	iod
Candidate Name		Category/		
		Type	1000.00)
Office Sought: House Disburs	sement For: 2012			
Senate	Primary General			
President State: OH District: 06	Other (specify)			
Full Name (Last, First, Middle Initial)				
B. JON RUNYAN FOR CONGRESS	SINC		Date of Disbursement	
- JOH KONTANTOK GONGKEG	J, 1140		M = M / D = D / Y = Y = Y	1
Mailing Address PO BOX 225			10 10 2012	
City COLONIA	State Zip Code NJ 07067		Transaction ID : SB23.47402	
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			Amount of Each Disbursement this Peri	iod
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		Туре	1000.00	,
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President	Primary			
State: NJ District: 03	Carlot (opcomy)			
Full Name (Last, First, Middle Initial)				
C. LATTA FOR CONGRESS			Date of Disbursement	
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Mailing Address 900 19TH STREET			10 01 2012	
NW 8TH FLR City	State Zip Code			
WASHINGTON	DC 20006		Transaction ID : SB23.47364	
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or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)			
College of American Pathologists F	Political Action Comm	nittee	
Conlege of American Familia giote F			
Full Name (Last, First, Middle Initial)			
A. LEE TERRY FOR CONGRESS			Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address P.O. Box 540098			10 08 2012
City	State Zin Code		
Omaha	State Zip Code NE 68154		Transaction ID: SB23.47384
Purpose of Disbursement	142 00154		
. 4.,500 0. 2.004.00			Amount of Each Disbursement this Period
Candidate Name		Category/	
		Type	2500.00
Office Sought:	nent For: 2012		· · ·
Senate	Primary X General		
President	Other (specify) ▼		
State: NE District: 02			
Full Name (Last, First, Middle Initial)			
B. LONE STAR LEADERSHIP PAC			Date of Disbursement
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Mailing Address PO BOX 30844			10 10 2012
City	State Zip Code		
BETHESDA	MD 20824		Transaction ID : SB23.47412
Purpose of Disbursement			
			Amount of Each Disbursement this Period
Candidate Name		Category/	5000.00
		Type	5000.00
Office Sought: House Disbursen	nent For: 2012		
Senate	Primary General		
	Other (specify) ▼		
State: District:	Other		
Full Name (Last, First, Middle Initial)	IODEOO INIO		Date of Disbursement
C. MARSHA BLACKBURN FOR CON	IGRESS INC.		
Mailing Address PO Box 3750			10 10 2012
Mailing Address FO Box 3750			10 10 2012
City	State Zip Code		Transaction ID - CD22 47402
BRENTWOOD	TN 37024		Transaction ID: SB23.47403
Purpose of Disbursement			
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Candidate Name		Category/	3000.00
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Senate President	Primary General		
State: TN District: 07	Other (specify) ▼		
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	GE 25 OF 29	
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Any information copied from such Reports and State or for commercial purposes, other than using the na				
NAME OF COMMITTEE (In Full) College of American Pathologists	Political Action Comn	nittee		
Full Name (Last, First, Middle Initial)				
A. MARTIN HEINRICH FOR SENAT	E			7 7 7 7 7
Mailing Address P.O. BOX 25763	7.0.1		10 08	2012
City Albuquerque	State Zip Code NM 87125		Transaction ID : SB23.4	7385
Purpose of Disbursement			Amount of Each Disburse	ment this Period
Candidate Name		Category/ Type		2500.00
Senate President	ement For: 2012 Primary General Other (specify)			
State: NM District: Full Name (Last, First, Middle Initial)				
B. MCNERNEY FOR CONGRESS			Date of Disbursement	
Mailing Address PO BOX 690371			10 10	2012
City STOCKTON	State Zip Code CA 95269		Transaction ID : SB23.4	7405
Purpose of Disbursement			Amount of Each Disburse	ment this Period
Candidate Name		Category/ Type		1000.00
Office Sought: House Disburs	ement For: 2012 Primary			
Full Name (Last, First, Middle Initial) C. MENENDEZ FOR SENATE			Date of Disbursement	
Mailing Address PO BOX 32248			10 08	2012
City NEWARK	State Zip Code NJ 07102		Transaction ID : SB23.4	7386
Purpose of Disbursement				
Candidate Name		Category/ Type	Amount of Each Disburse	ment this Period 2500.00
Office Sought: House Senate President State: NJ District:	ement For: 2012 Primary General Other (specify)			
SUBTOTAL of Disbursements This Page (optional)		>		6000.00
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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 26 OF
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only	
Any information copied from such Reports and State or for commercial purposes, other than using the nai		ed by any perso	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)	no and address of any points		
College of American Pathologists	Political Action Com	mittee	
Full Name (Last, First, Middle Initial)			
MIKE MCINTYRE FOR CONGRE	SS		Date of Disbursement
Mailing Address P.O. Box 1			10 10 2012
City	State Zip Code		Transaction ID : SB23.47406
Lumberton	NC 28359		Transaction 15 : 0520.47 400
Purpose of Disbursement			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	1000.00
Office Sought: House Senate President Disburse	ment For: 2012 Primary		
State: NC District: 07			
Full Name (Last, First, Middle Initial)			
MIKE THOMPSON FOR CONGRI	ESS		Date of Disbursement
Mailing Address 5429 Madison Avenue			10 08 2012
City Sacramento	State Zip Code CA 95841		Transaction ID : SB23.47391
Purpose of Disbursement	93641		
		1 !!	Amount of Each Disbursement this Period
Candidate Name		Category/ Type	3500.00
Office Sought: House Disburse	ment For: 2012 Primary		
Full Name (Last, First, Middle Initial)			Date of Disbursement
ROB WITTMAN FOR CONGRESS	•		M M / D D / Y Y Y Y Y
Mailing Address PO BOX 999 PO BOX 999			10 01 2012
City MONTROSS	State Zip Code VA 22520		Transaction ID : SB23.47368
Purpose of Disbursement			
Candidate Name		Category/	Amount of Each Disbursement this Period
Office County Ad Harry	and Francisco	Type	1000.00
Office Sought: House Senate President Disburse	ment For: 2012 Primary		
State: VA District: 01			
SUBTOTAL of Disbursements This Page (optional).		·····	5500.00
<u> </u>			
TOTAL This Period (last page this line number only)	·····	

SCHEDULE B (FEC Form 3X)	Harris I I I I I	FOR LINE NUMBER: PAGE 27 OF			
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	(oricon oriny	•		
	Detailed Summary Page	21b	22 🗙 23	24 25 26	
		27	28a 28b	28c 29 30	
Any information copied from such Reports and Staten					
or for commercial purposes, other than using the name	ne and address of any polit	icai committee to	solicit contributions fro	m such committee.	
NAME OF COMMITTEE (In Full)	5 11 <i>1</i> 1	***			
College of American Pathologists F	Political Action Con	nmittee			
Full Name (Last, First, Middle Initial)		Т			
SHORE PAC			Date of Disbursemer	nt	
SHORE I AC			M M / D D	/ Y Y Y Y	
Mailing Address PO. Box 3157			10 01	2012	
	State Zip Code		Transaction ID : SI	B23 47369	
Long Branch	NJ 07740		i i alibaction ib . Gi		
Purpose of Disbursement			Amount of Foot Divi	humaamant this Desire	
Candidate Name			Amount of Each Disi	bursement this Period	
Candidate Indiffe		Category/		5000.00	
Office Sought: House Disburser	nent For: 2012	Туре		7	
Senate	Primary General				
President	Other (specify)				
State: District:	OTHER				
Full Name (Last, First, Middle Initial)					
B. TOM REED FOR CONGRESS			Date of Disbursemer	nt	
TOWN INCLUDITION CONGINESS			M M / D D		
Mailing Address PO BOX 450			10 10	2012	
5					
,	State Zip Code		Transaction ID : S	B23.47409	
VICTOR	NY 14564				
Purpose of Disbursement			Amount of Each Dial	hurcoment this Derical	
Candidate Name			AMOUNT OF EACH DIS	bursement this Period	
Candidate Name		Category/		2500.00	
Office Sought: Y House Disburser	nent For: 2012	Туре			
	Primary				
State: NY District: 29					
Full Name (Last, First, Middle Initial)					
C. WHITEHOUSE FOR SENATE			Date of Disbursemer	nt	
WITTERSOOF FOR OFFICE			M M / D D	/ Y Y Y Y Y	
Mailing Address PO BOX 40280			10 08	2012	
,	State Zip Code		Transaction ID : SI	B23 47389	
PROVIDENCE	RI 02940		i i ali sactioni ib . Si	D20.71 000	
Purpose of Disbursement]			
Condidata Nama			Amount of Each Disl	bursement this Period	
Candidate Name		Category/		1000.00	
Office Cought: House	nent Ferr core	Туре		.555.55	
	nent For: 2012				
Senate President	Primary General				
	Other (specify) ▼				
State: RI District: 00					
OUDTOTAL (D)				8500.00	
SUBTOTAL of Disbursements This Page (optional)		·····		3300.00	
TOTAL TIC Build (last a last in last i					
TOTAL This Period (last page this line number only)				(D) 1 (D) 1	

SCHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 28 OF 29					F 29
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the		(check only one)			 24		
	Detailed Sun	nmary Page	27	28a	28b	28c	29	30
Any information copied from such Reports and Statem								
or for commercial purposes, other than using the name	ne and address	of any politica	al committee to	solicit cor	ntributions	from such	committe	ee.
NAME OF COMMITTEE (In Full)	0 - 1141 1 - A -	·:	-:44					
College of American Pathologists F	Political Ac	tion Comr	nittee					
Full Name (Last, First, Middle Initial)				Data at	Distance			
WICKER FOR SENATE	· WICKER FOR SENATE			Date of Disbursement				
Mailing Address PO BOX 64				10	08		2012	
,		p Code		Trans	action ID	SB23.4739	20	
JACKSON	MS 39	9205		mans	dollon ib .	0020.470	,,	
Purpose of Disbursement			· · · ·	Amount	of Each I	Disburseme	nt this P	eriod
Candidate Name			Category/				1000.	00
Office Sought: House Disbursen	nent For: 2012		Туре		7	-	1000.	00
		General						
	Other (specify)	▼						
State: MS District: 00								
Full Name (Last, First, Middle Initial) B. WOMACK FOR CONGRESS COM	MITTEE			Date of	Disburser	ment		
				M M	/ D	D / Y	Y Y	Υ
Mailing Address PO BOX 508				10	10		2012	
•		p Code		Trans	action ID	: SB23.474	10	
ROGERS Purpose of Disbursement	AR 7	2757						
				Amount	of Each I	Disburseme	nt this P	eriod
Candidate Name			Category/ Type				2000	.00
	nent For: 2012		7.					
		K General						
State: AR District: 03	Other (specify)	•						
Full Name (Last, First, Middle Initial)								
C.					Disburser			
Mailing Address				M = M	/ D	D / Y	Y	Y
City	State Zi	p Code						
Purpose of Disbursement								
				Amount	of Each I	Disburseme	nt this P	eriod
Candidate Name			Category/ Type					-
Office Sought: House Disbursen	nent For:		туре			-		_
Senate	Primary	General						
	Other (specify)	▼						
State: District:								
SUBTOTAL of Disbursements This Page (optional)							3000.	00
COLUMN TITLE OF DISDUISORIION TITLE T AGO (OPHONAI)				-		-		
TOTAL This Period (last page this line number only)			·····•			-	68500.	00

SCHEDULE B (FEC Form 3X)							
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only					
	Dotailed Guillinary Lage	27	28a 🗙 28b 28c	29 30			
Any information copied from such Reports and Statem or for commercial purposes, other than using the name							
NAME OF COMMITTEE (In Full)							
College of American Pathologists F	Political Action Comn	nittee					
Full Name (Last, First, Middle Initial)			Date of Disbursement				
A. Hoyer for Congress			M M / D D / Y Y Y Y				
Mailing Address 700 13TH STREET, NW SUITE 600			10 15	2012			
,	State Zip Code DC 20005		Transaction ID : SB28B.4	7414			
Purpose of Disbursement Refund of Excesss Contribution - Ch 2508			Amount of Each Dishuraam	ant this Pariod			
Candidata Nama			Amount of Each Disbursement this Period				
Office Country Ad Hause		Category/ Type	7 7	-2500.00			
	Primary General Other (specify) ▼						
State: MD District: 05							
Full Name (Last, First, Middle Initial) B.			Date of Disbursement				
				YYY			
Mailing Address							
City	State Zip Code						
Purpose of Disbursement			Amount of Each Disbursem	ent this Period			
Candidate Name		Category/ Type					
President	nent For: Primary General Other (specify)						
State: District: Full Name (Last, First, Middle Initial)							
C.			Date of Disbursement	YYY			
Mailing Address							
City	State Zip Code						
Purpose of Disbursement							
Candidate Name		Category/ Type	Amount of Each Disbursem	ent this Period			
President	nent For: Primary General Other (specify)	.,,,,,					
State: District:							
SUBTOTAL of Disbursements This Page (optional)		·····•		-2500.00			
TOTAL This Period (last page this line number only).				-2500.00			