PAGE 1 / 20

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

	For Other Than An Au	ithorized Committee	Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
College of American I	Pathologists Political	Action Committee	
ADDRESS (number and street)	1001 G Street NW		
▼	Suite 425 West		
Check if different than previously reported. (ACC)	Washington		DC 20001 -
2. FEC IDENTIFICATION N	IUMBER ▼ C	ITY▲	STATE ▲ ZIP CODE ▲
C C00274944		IS THIS REPORT NEW (N) O	R AMENDED (A)
4. TYPE OF REPORT (Choose One)	(b) Monthly Fe	eb 20 (M2) May 20 (I	(Non-Election Year Only)
(a) Quarterly Reports:	Ma	ar 20 (M3) Jun 20 (N	Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
April 15		or 20 (M4) Jul 20 (M	7) X Oct 20 (M10) Jan 31 (YE)
Quarterly Report (July 15	(C) 12-Day	Primary (12P)	General (12G) Runoff (12R)
Quarterly Report (October 15	(Q2) Report for the:	Convention (12C)	Special (12S)
Quarterly Report (January 31	(Q3)	M M / D D	/ Y Y Y Y in the
Year-End Report ((YE) Elect	ion on	State of
July 31 Mid-Year Report (Non-electi Year Only) (MY)	ion (d) 30-Day POST-Election Report for the:	General (30G)	Runoff (30R) Special (30S)
Termination Report (TER)	rt .	ion on	in the State of
5. Covering Period	09 01 2022	through 09	M / D D / Y Y Y Y Y Y 30 2022
I certify that I have examined t	this Report and to the best	of my knowledge and belief it is	s true, correct and complete.
Type or Print Name of Treasur	Kozel, Jessica, A, Dr, MD er		
Signature of Treasurer Koz	tel, Jessica, A, Dr, MD	[Electronically Filed]	Date 10 / 19 / 2022
NOTE: Submission of false, erro	neous, or incomplete informati	on may subject the person signir	g this Report to the penalties of 52 U.S.C. § 30109
Office			FEC FORM 3X
Use Only			Rev. 05/2016

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 05/2016) Page 2

Wri	e or Type Committee Name		
Co	ollege of American Pathologists	Political Action Committee	
Rep	port Covering the Period: From:	09 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	09 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2022		320408.76
(b) Cash on Hand at Beginning of Reporting Period	334008.03	
(c) Total Receipts (from Line 19)	9841.67	142604.64
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	343849.70	463013.40
7. 1	Total Disbursements (from Line 31)	50735.20	169898.90
F	Cash on Hand at Close of Reporting Period subtract Line 7 from Line 6(d))	293114.50	293114.50
t	Debts and Obligations Owed TO he Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
t	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
×	This committee has qualified as a multic	candidate 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. 05/2016)

Write or Type Committee Name

College of American Pathologists Political Action Committee

	port Covering the Period: From: 09	01 2022 To	09 30 2022				
	I. Receipts	I. Receipts COLUMN A Total This Period					
1.	Contributions (other than loans) From:		Calendar Year-to-Date				
	(a) Individuals/Persons Other						
	Than Political Committees						
	(i) Itemized (use Schedule A)	8066.67	124266.74				
	(ii) Unitemized	1775.00	18337.90				
	(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	9841.67	142604.64				
	(b) Political Party Committees	0.00	0.00				
	(c) Other Political Committees (such as PACs)(d) Total Contributions (add Lines	0.00	0.00				
0	11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) Transfers From Affiliated/Other	9841.67	142604.64				
	Party Committees	0.00	0.00				
3.	All Loans Received	0.00	0.00				
5.	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00				
	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00				
	to Federal Candidates and Other Political Committees	0.00	0.00				
	Other Federal Receipts						
8.	(Dividends, Interest, etc.)	0.00	0.00				
	(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				

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

	II. Disbursements	II. Disbursements COLUMN A Total This Period			
	Operating Expenditures:	iotai iiiis Fellou	Calendar Year-to-Date		
	(a) Allocated Federal/Non-Federal Activity (from Schedule H4)				
	(i) Federal Share	0.00	0.00		
			0.00		
	(ii) Non-Federal Share	0.00	0.00		
	(b) Other Federal Operating	235.20	2398.90		
	Expenditures(c) Total Operating Expenditures	233.20	2330.30		
	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	235.20	2398.90		
, .	Transfers to Affiliated/Other Party	7 7 7			
	Committees	0.00	0.00		
	Contributions to Federal Candidates/Committees	4 4	4 4		
	and Other Political Committees	50500.00	167500.00		
	Independent Expenditures				
	(use Schedule E)	0.00	0.00		
	(52 U.S.C. § 30116(d))	0.00			
	(use Schedule F)	0.00	0.00		
	Loan Repayments Made	0.00	0.00		
•	соан пераушень маче	0.00	0.00		
	Loans Made	0.00	0.00		
	Refunds of Contributions To:	0.00	4 4		
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00		
			4 4		
	(b) Political Party Committees	0.00	0.00		
	(c) Other Political Committees	4 4			
	(such as PACs)	0.00	0.00		
	(d) Total Contribution Refunds				
	(add Lines 28(a), (b), and (c))	0.00	0.00		
	Other Disbursements (Including				
	Non-Federal Donations)	0.00	0.00		
	,	4	4 4		
	Federal Election Activity (52 U.S.C. § 30101(20	0))			
	(a) Allocated Federal Election Activity				
	(from Schedule H6)				
	(i) Federal Share	0.00	0.00		
	(ii) "Levin" Share	0.00	2.22		
	(b) Federal Election Activity Paid	0.00	0.00		
	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		
		7 7	0.00		
	Total Disbursements (add Lines 21(c), 22,				
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	50735.20	169898.90		
		00733.20	100000.00		
	Total Federal Disbursements				
	(subtract Line 21(a)(ii) and Line 30(a)(ii)				
	from Line 31)	50735.20	169898.90		

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 05/2016)

of Disbursements

Page 5 **COLUMN A** COLUMN B III. Net Contributions/ **Total This Period** Calendar Year-to-Date **Operating Expenditures** 33. Total Contributions (other than loans) 9841.67 142604.64 (from Line 11(d), page 3) 34. Total Contribution Refunds 0.00 0.00 (from Line 28(d))..... 35. Net Contributions (other than loans) 142604.64 9841.67 (subtract Line 34 from Line 33) 36. Total Federal Operating Expenditures 235.20 2398.90 (add Line 21(a)(i) and Line 21(b))▶ 37. Offsets to Operating Expenditures 0.00 0.00 (from Line 15, page 3)..... 38. Net Operating Expenditures 235.20 2398.90 (subtract Line 37 from Line 36)

Receipt For:

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)

FOH	LINE	NU	MBER	:	PAGE	6	OF	20	
(che	ck only	or	ne)						
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) College of American Pathologists Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Caldwell, John, Aikman, Dr., MD Date of Receipt Mailing Address Dept of Path 2022 101 E Wood St City State Zip Code Transaction ID: SA11AI.61201 SC 29303-3040 Spartanburg Amount of Each Receipt this Period FEC ID number of contributing C 750.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Pathologist Carolinas Pathology Group Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Clarke, Martha, R, Dr., MD Date of Receipt Mailing Address 1000 Bower Hill Rd 09 2022 City State Zip Code Transaction ID: SA11AI.61224 Pittsburgh PΑ 15243-1873 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) St Clair Memorial Hospital Pathologist

	Primary General Other (specify) ▼	Aggregate	ear-to-Date ▼	
C.	Mailing Address 2900 12th Ave N Ste 295W	,		Date of Receipt M M M O O O O O O O O O O O O O O O O
	City Billings FEC ID number of contributing federal political committee.	State MT	Zip Code 59101-7504	Transaction ID : SA11AI.61226 Amount of Each Receipt this Period 416.67
	Name of Employer (for Individual) Yellowstone Pathology Institute Inc Bi Receipt For: Primary General Other (specify)	Patho	oation (for Individual) ologist ✓ear-to-Date ▼ 2500.02	Memo Item

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

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

2166.67

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 7 (check only one) **X** 11a 11b 11c

20 OF 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 of Individual (Last, First, Middle Initial) or Full Organization Name Emory, Theresa, S, Dr., MD Date of Receipt Mailing Address 1918 W State St 2022 City Zip Code State Transaction ID: SA11AI.61193 TN **Bristol** 37620-1940 Amount of Each Receipt this Period FEC ID number of contributing C 2500.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) Highlands Pathology Consultants, PC Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 2500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Evans, Juanita, J, Dr., MD Date of Receipt Mailing Address 4009 Kent Rd 09 2022 City State Zip Code Transaction ID: SA11AI.61216 Royal Oak MI 48073 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Providence - Providence Park Hosp Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1000.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Ferrer, Karen, Therese, Dr., MD Date of Receipt Mailing Address 1521 West Harrison 29 2022 City State Zip Code Transaction ID: SA11AI.61225 IL Chicago 60607 Amount of Each Receipt this Period FEC ID number of contributing C 300.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Univ of Illinois-Chicago Med Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 3800.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

Use separate schedule(s)

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for each category of the Detailed Summary Page 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 of Individual (Last, First, Middle Initial) or Full Organization Name Lagoo, Anand, Shreeram, Dr., MD, PhD Date of Receipt Mailing Address 5001 Mill Hill LN 2022 City Zip Code State Transaction ID: SA11AI.61208 NC Chapel Hill 27517-7443 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **Duke University Medical Center** Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Le, Mary, D, Dr., MD Date of Receipt Mailing Address 2923 W Academy Ave 09 2022 City State Zip Code Transaction ID: SA11AI.61205 CA Anaheim 92804-2038 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) LA County/Harbor UCLA Med Ctr Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 750.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Tinsley, John, P., Dr., MD Date of Receipt Mailing Address Dept of Path 26 2022 206 East Brown Street City State Zip Code Transaction ID: SA11AI.61215 PΑ East Stroudsburg 18301-3006 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Health Network Laboratories Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1000.00 SUBTOTAL of Receipts This Page (optional).....

Receipt For:

Primary

General

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the

	R LINE			:	PAGE	=	9	OF	20
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Detailed Summary Page 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 of Individual (Last, First, Middle Initial) or Full Organization Name Valdes, C. Leilani, , Dr., MD, MBA Date of Receipt Mailing Address 608 W Commercial St 2022 City State Zip Code Transaction ID: SA11AI.61219 TX Victoria 77901-6302 Amount of Each Receipt this Period FEC ID number of contributing C 600.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Citizens Medical Center Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 700.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Zhai, Qihui, Jim, Dr., MD Date of Receipt Mailing Address Dept of Path Mayo Bldg 3rd Fl 09 15 2022 4500 San Pablo Rd City State Zip Code Transaction ID: SA11AI.61204 FL Jacksonville 32224 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Mayo Clinic Jacksonville Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1000.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual)

Other (specify)	7 7 7		
SUBTOTAL of Receipts This Page (optional)	>	,	1100.00
TOTAL This Period (last page this line number	only)	7	8066.67

Aggregate Year-to-Date ▼

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SCHEDULE B (FEC Form 3X)	Han an	parata achadula(a)		FOR LINE NUMBER: PAGE 10 OF 20					
ITEMIZED DISBURSEMENTS	for eac	parate schedule(s) h category of the	(Orlock)	only one) 1b 22	23	<u> </u>	27		
	Detaile	d Summary Page		8a 28b		29	30b		
Any information copied from such Reports and Sta									
or for commercial purposes, other than using the r	ame and ad	Idress of any politi	cal committe	e to solicit c	ontribution	s from such	n committee.		
NAME OF COMMITTEE (In Full) College of American Pathologists	Politica	I Action Com	mittee						
College of Afficilitati Fathologists			tee						
Full Name (Last, First, Middle Initial)				Data	of Disburse	omont			
A. Truist Bank				Date	M / D		YYY		
Mailing Address 214 N. Tryon St.				09		06	2022		
City	State	Zip Code		FEC I	dentificatio	n Number			
Charlotte Purpose of Disbursement	NC	28202							
Truist Bank American Express Fee									
Candidate Name			Category/			ID: SB21I	B.61154 ent this Period		
			Type	Alliou	in oi Lacii	DispuiseIII			
	sement For:			□ L.			46.46		
Senate	Primary Other (on	General							
State: President	Other (sp	DECITY) ▼		M	lemo Item				
Full Name (Last, First, Middle Initial)									
B. Truist Bank				Date	of Disburse	ement			
W 11 A 11					09 30 2022				
Mailing Address 214 N. Tryon St.				09		30	2022		
City Charlotte	State NC	Zip Code 28202		FEC I	dentificatio	n Number			
Purpose of Disbursement	110	20202							
Truist Bank Chase Paymentech Fees					ransaction	ID : SB21E	3.61155		
Candidate Name			Category/	_		_	ent this Period		
Office Sought: House Disburs	sement For:		Туре				188.74		
Senate	Primary	General			7	7	100.7		
President	Other (sp				lemo Item				
State: District:				IV.	lemo item				
Full Name (Last, First, Middle Initial) C.				Data	of Disburse	amont			
C.				M			YYY		
Mailing Address					, ,				
City	State	Zip Code		FEC I	dentificatio	n Number			
Purpose of Disbursement									
·									
Candidate Name			Category/ Type	Amou	nt of Each	Disbursem	ent this Period		
Office Sought: House Disburs	sement For:		- 7,60	- -					
Senate	Primary	General			7-1	- 7			
President	Other (sp	pecify) ▼		M	lemo Item				
State: District:									
SUBTOTAL of Disbursements This Page (optiona)			. [235.20		
				- #	7		007.00		
TOTAL This Period (last page this line number or	ılv)						235.20		

Mailing Address 439 NEW JERSEY AVE, SE City WASHINGTON Purpose of Disbursement Candidate Name Category/ Type Office Sought: ✓ House President President President State: ND District: 00 Full Name (Last, First, Middle Initial) B. BELIEVE IN AMERICA PAC Mailing Address PO BOX 390 Fig. Category/ Type Transaction ID Memo Item Date of Disbursement Category/ Type Memo Item Date of Disbursement FEC Identification N Category/ Type Memo Item Date of Disbursement FEC Identification N Memo Item FEC Identification N Fec Identification N Date of Disbursement Category/ Type Fec Identification N Fec Identification N Category/ Type Fec Identification N Fec Identification N Category/ Type	
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from NAME OF COMMITTEE (In Full) College of American Pathologists Political Action Committee Full Name (Last, First, Middle Initial) A. ARMSTRONG FOR CONGRESS Mailing Address 439 NEW JERSEY AVE, SE City WASHINGTON Purpose of Disbursement Candidate Name Office Sought: I house President State: ND District: 00 Full Name (Last, First, Middle Initial) B. BELIEVE IN AMERICA PAC Mailing Address PO BOX 390 City ALEXANDRIA Purpose of Disbursement Candidate Name Category/ ALEXANDRIA Purpose of Disbursement Candidate Name Category/ ALEXANDRIA Purpose of Disbursement Category/ Type FEC Identification Name FEC Identification Name Category/ Type FEC Identification Name Category/ Type FEC Identification Name Category/ Type Amount of Each Disbursement Category/ Type FEC Identification Name Category/ Transaction ID Amount of Each Disbursement Category/ Type	26 27 29 30b
College of American Pathologists Political Action Committee Full Name (Last, First, Middle Initial) A. ARMSTRONG FOR CONGRESS Mailing Address 439 NEW JERSEY AVE, SE City WASHINGTON Purpose of Disbursement Candidate Name Office Sought: I House Senate President State: ND District: Other (specify) State: ND District: Other (specify) Full Name (Last, First, Middle Initial) B. BELIEVE IN AMERICA PAC Mailing Address PO BOX 390 City ALEXANDRIA Purpose of Disbursement Candidate Name Category/ Type Date of Disbursement Category/ Type Date of Disbursement Category/ Type FEC Identification N Category/ Type Date of Disbursement Category/ Type FEC Identification N C Co0670547 Transaction ID Amount of Each Di Transaction ID Amount of Each Di Transaction ID Amount of Each Di	
Full Name (Last, First, Middle Initial) A. ARMSTRONG FOR CONGRESS Mailing Address 439 NEW JERSEY AVE, SE City WASHINGTON Purpose of Disbursement Candidate Name Disbursement For: 2022 Senate Primary Other (specify) State: ND District: 00 Full Name (Last, First, Middle Initial) B. BELIEVE IN AMERICA PAC Mailing Address PO BOX 390 City ALEXANDRIA Purpose of Disbursement Candidate Name Category/ Type Disbursement For: 2022 Senate Primary General Other (specify) Date of Disbursement Date of Disbursement Date of Disbursement FEC Identification N Memo Item FEC Identification N FEC Identification N FEC Identification N FEC Identification N Category/ Type	
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WASHINGTON Purpose of Disbursement Candidate Name Category/ Type Office Sought:	2022
Purpose of Disbursement Candidate Name Category/ Type Office Sought:	Number
Candidate Name Category/ Type Office Sought:	
Candidate Name Category/ Type Office Sought:	· SB23 61167
Office Sought: X	sbursement this Period
Senate President State: ND District: 00 Full Name (Last, First, Middle Initial) B. BELIEVE IN AMERICA PAC Mailing Address PO BOX 390 City ALEXANDRIA Purpose of Disbursement Candidate Name Primary Other (specify) ▼ Memo Item Memo Item Date of Disbursement FEC Identification N Category/ Type Transaction ID Amount of Each Disbursement	1000.00
State: ND District: 00 Full Name (Last, First, Middle Initial) B. BELIEVE IN AMERICA PAC Mailing Address PO BOX 390 City ALEXANDRIA Purpose of Disbursement Candidate Name State VA Zip Code VA 22313 FEC Identification N Category/ Type Category/ Type	4 4
Full Name (Last, First, Middle Initial) B. BELIEVE IN AMERICA PAC Mailing Address PO BOX 390 City ALEXANDRIA Purpose of Disbursement Candidate Name Category/ Type Date of Disbursement EC Identification N Category/ Type Category/ Type	
B. BELIEVE IN AMERICA PAC Mailing Address PO BOX 390 City ALEXANDRIA Purpose of Disbursement Candidate Name Date of Disbursement Zip Code VA 22313 FEC Identification N Category/ Type Transaction ID Amount of Each Dispursement	
Mailing Address PO BOX 390 City ALEXANDRIA Purpose of Disbursement Candidate Name State VA Zip Code VA 22313 FEC Identification N Condeptible Category/ Type Category/ Type	ent
ALEXANDRIA Purpose of Disbursement Candidate Name VA 22313 Category/ Type Category/ Type	2022
Purpose of Disbursement Candidate Name Category/ Type Category/ Type Category/ Type	Number
Candidate Name Category/ Type Transaction ID Amount of Each Diagram	
Type Amount of Each Dis	: SB23.61169
	sbursement this Period
2022	1000.00
Senate Primary General	,
State: Other (specify) OTHER OTHER	
Full Name (Last, First, Middle Initial) C. BUDDY CARTER FOR CONGRESS Date of Disbursements	ent
BUDDI CARTER FOR CONGRESS	/ Y Y Y Y Y
Mailing Address 824 S MILLEDGE AVE SUITE 101 09 14	2022
City State Zip Code FEC Identification N	Number
ATHENS GA 30605 Purpose of Disbursement C C00543967	
Condidate Name Transaction ID	
Type	2500.00
Office Sought: Water House Disbursement For: 2022	2500.00
President Other (specify) ▼ Memo Item	
State: GA District: 01	
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only)	4500.00

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only	•
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 28a	22 x 23 26 27 28b 28c 29 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full) College of American Pathologists P			
Full Name (Last, First, Middle Initial) A. CITIZENS FOR BOYLE			Date of Disbursement
Mailing Address 1701 16TH STREET, NW #121			09 14 2022
WASHINGTON	State Zip Code 20009		FEC Identification Number
Purpose of Disbursement Candidate Name		Category/	C C00543363 Transaction ID : SB23.61172 Amount of Each Disbursement this Period
Senate	nent For: 2022 Primary X General Other (specify) ▼	Туре	1000.00 Memo Item
Full Name (Last, First, Middle Initial) B. DR JOHN JOYCE FOR CONGRES Mailing Address 5827 COLFAX C/O 814 CONSULTING	SS		Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
ALEXANDRIA	State Zip Code VA 22311		FEC Identification Number
Purpose of Disbursement Candidate Name		Category/ Type	C C00674259 Transaction ID : SB23.61156 Amount of Each Disbursement this Period
Senate	nent For: 2022 Primary		1000.00 Memo Item
Full Name (Last, First, Middle Initial) DR RAUL RUIZ FOR CONGRESS			Date of Disbursement
Mailing Address P.O. BOX 15096			09 14 2022
,	State Zip Code DC 20003	· · ·	FEC Identification Number C C00502575 Transaction ID : SB23.61173
Candidate Name		Category/ Type	Amount of Each Disbursement this Period
Senate	nent For: 2022 Primary General Other (specify) ▼		1000.00 Memo Item
SUBTOTAL of Disbursements This Page (optional)			3000.00
TOTAL This Period (last page this line number only).			

Total Control of the Detailed Summary Page	SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	
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. FRIENDS OF JIM CLYBURN Mailing Address 499 South Capital Street, SW Suite 420 City Washington DC 20003 Purpose of Disbursement Candidate Name Other (specify) Type Office Sought: X House President Candidate Name City WASHINGTON Category MASHINGTON Date of Disbursement For: 2022 Fill Name (Last, First, Middle Initial) B. FRIENDS OF RAJA FOR CONGRESS Mailing Address C/O AMY STRATHDEE PO BOX 15096 City WASHINGTON Candidate Name Candidate N	ITEMIZED DISBURSEMENTS	for each category of the	21b	22 🗶 23 🔲 26 🔲 27
NAME OF COMMITTEE (In Full) College of American Pathologists Political Action Committee Full Name (Last, First, Middle Initial) FRIENDS OF JIM CLYBURN Mailing Address 499 South Capital Street, SW Suite 420 City Washington Purpose of Disbursement Candidate Name Office Sought:				
A. FRIENDS OF JIM CLYBURN Mailing Address 499 South Capital Street, SW Suite 420 City Washington Purpose of Disbursement Candidate Name Office Sought:	NAME OF COMMITTEE (In Full)			construction from oddin committee.
Mailing Address	_			
Washington Purpose of Disbursement Candidate Name Office Sought:	-			
Candidate Name Category/ Type Office Sought:	Washington	I .		
Office Sought:	·			
Mailing Address C/O AMY STRATHDEE PO BOX 15096 City WASHINGTON Purpose of Disbursement Candidate Name Office Sought:	Senate President	Primary General	Туре	
City WASHINGTON Purpose of Disbursement Candidate Name Candidate Name Office Sought:	FRIENDS OF RAJA FOR CONGRE	ESS		M = M / D = D / Y = Y = Y
Purpose of Disbursement Candidate Name Category/ Type Office Sought:	City	1 '		FEC Identification Number
Office Sought:	Purpose of Disbursement	2 2000		
Date of Disbursement Mailing Address 1020 NORTH FAIRFAX STREET SUITE 201 City State Zip Code VA 22314 Purpose of Disbursement Candidate Name Category/ Type Transaction ID : SB23.61175 Amount of Each Disbursement this Period State Primary General Other (specify) Memo Item Memo Item Memo Item Date of Disbursement	Senate President	Primary x General	Nr.	
Mailing Address 1020 NORTH FAIRFAX STREET SUITE 201 City ALEXANDRIA Purpose of Disbursement Candidate Name Candidate Name Category/ Type Office Sought: House President President President State: IA District: 00 State Zip Code VA 22314 FEC Identification Number Category/ Type FEC Identification Number Category/ Type FEC Identification Number Category/ Type Memo Item				
ALEXANDRIA Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) State: IA District: 00 House Other (specify) State: IA District: 00	SUITE 201			
Office Sought: House Senate President State: IA District: 00 Disbursement For: 2022 Primary General Other (specify) Memo Item	ALEXANDRIA Purpose of Disbursement	'		C C00230482
State: IA District: 00 Primary ✓ General Other (specify) ▼ Memo Item				Amount of Each Disbursement this Period
SUBTOTAL of Disbursements This Page (optional)	Senate President	Primary General		
	SUBTOTAL of Disbursements This Page (optional)		·····	7500.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s)	FOR LINE N	
	for each category of the Detailed Summary Page	21b 28a	22 X 23 26 27 28b 28c 29 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full) College of American Pathologists P	, , , , , , , , , , , , , , , , , , ,		
Full Name (Last, First, Middle Initial) A. HOOPS PAC			Date of Disbursement
Mailing Address 4 I STREET SE, #715			09 21 2022
	State Zip Code DC 20003		FEC Identification Number
Candidate Name	[Category/	C C00392738 Transaction ID : SB23.61185 Amount of Each Disbursement this Period
Senate	nent For: 2022 Primary General Other (specify) OTHER	Туре	1500.00 Memo Item
Full Name (Last, First, Middle Initial) B. KEVIN MCCARTHY FOR CONGRI Mailing Address 439 NEW JERSEY AVENUE, SE	<u> </u>		Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
,	State Zip Code DC 20003		FEC Identification Number
Candidate Name		Category/ Type	C C00420935 Transaction ID : SB23.61160 Amount of Each Disbursement this Period
Senate	nent For: 2022 Primary x General Other (specify)		2500.00 Memo Item
Full Name (Last, First, Middle Initial) KUSTER FOR CONGRESS, INC			Date of Disbursement
Mailing Address 412 FIRST STREET, SE SUITE 100			09 08 2022
WASHINGTON Purpose of Disbursement	State Zip Code 20003		FEC Identification Number C C00462861 Transaction ID : SB23.61161
Candidate Name		Category/ Type	Amount of Each Disbursement this Period
Senate	nent For: 2022 Primary		1000.00 Memo Item
SUBTOTAL of Disbursements This Page (optional)			5000.00
TOTAL This Period (last page this line number only).			

SILVER SPRING	Detailed S ments may no ne and addre	ess of any politica	al committee to	22 X 23 26 27 28b 28c 29 30b on for the purpose of soliciting contributions
or for commercial purposes, other than using the nare NAME OF COMMITTEE (In Full) College of American Pathologists Full Name (Last, First, Middle Initial) MAGGIE FOR NH Mailing Address 114 LEXINGTON DRIVE City SILVER SPRING	Political A	ess of any politica	al committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) College of American Pathologists F Full Name (Last, First, Middle Initial) MAGGIE FOR NH Mailing Address 114 LEXINGTON DRIVE City SILVER SPRING	Political A			
MAGGIE FOR NH Mailing Address 114 LEXINGTON DRIVE City SILVER SPRING	State			Date of Disbursement
City SILVER SPRING	State		1	M M / D D / Y Y Y Y
SILVER SPRING	State			09 14 2022
CITIES AND A SECOND OF THE SEC	MD	Zip Code 20901		FEC Identification Number
Purpose of Disbursement Candidate Name			Category/	C C00588772 Transaction ID : SB23.61176 Amount of Each Disbursement this Period
Office Sought: House Senate President State: NH District: 00	ment For: 20 Primary Other (speci	✗ General	Type	1000.00 Memo Item
Full Name (Last, First, Middle Initial) MICHAEL BURGESS FOR CONG Mailing Address P.O. BOX 40323	RESS			Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
WASHINGTON	State DC	Zip Code 20016		FEC Identification Number
Purpose of Disbursement Candidate Name			Category/ Type	C C00372532 Transaction ID: SB23.61177 Amount of Each Disbursement this Period
Office Sought: X House Disburser	ment For: 20 Primary Other (speci	General		1500.00 Memo Item
Full Name (Last, First, Middle Initial) - MORGAN MCGARVEY FOR CON	IGRESS			Date of Disbursement
Mailing Address PO BOX 5324				09 21 2022
City LOUISVILLE Purpose of Disbursement	State KY	Zip Code 40255		FEC Identification Number C C00791392
Candidate Name			Category/ Type	Transaction ID: SB23.61187 Amount of Each Disbursement this Period
Office Sought:	ment For: 20 Primary Other (speci	✗ General		2500.00 Memo Item
SUBTOTAL of Disbursements This Page (optional)			>	5000.00

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE I	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 28a	one) 22 X 23 26 27 28b 28c 29 30b
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)			Date of Disbursement
A. PALLONE FOR CONGRESS			M M / D D / Y Y Y Y
Mailing Address 495 BROADWAY			09 08 2022
City LONG BRANCH	State Zip Code NJ 07740		FEC Identification Number
Purpose of Disbursement	07740		C 000336039
. 4.,5000 0. 2.004.00			C C00226928
Candidate Name		Category/	Transaction ID: SB23.61162 Amount of Each Disbursement this Period
Office Sought: House Disburse	ement For: 2022	Type	4000.00
Office Sought: X House Dispurse Senate	Primary General		7 7 7
President	Other (specify) ▼		Memo Item
State: NJ District: 06			
B. PEOPLE FOR PATTY MURRAY			Date of Disbursement
Mailing Address 1520 BELL VIEW BLVD, #510			09 08 2022
City ALEXANDRIA	State Zip Code VA 22307		FEC Identification Number
Purpose of Disbursement			C C00257642
Candidate Name			Transaction ID : SB23.61163
		Category/ Type	Amount of Each Disbursement this Period
	ement For: 2022		1000.00
Senate Primary X General President Other (specify)			п.,
State: WA District: 00			Memo Item
Full Name (Last, First, Middle Initial)			Date of Disbursement
c. ROBIN KELLY FOR CONGRESS			M M / D D / Y Y Y Y
Mailing Address 413 NEW JERSEY AVE, SE			09 08 2022
City	State Zip Code		FEC Identification Number
WASHINGTON Purpose of Disbursement	DC 20003		C C00520066
r diposo of Biobalconicin		· · ·	C C00539866 Transaction ID : SB23.61164
Candidate Name		Category/ Type	Amount of Each Disbursement this Period
	ement For: 2022		2000.00
Senate President	Primary		
State: IL District: 02	Other (specify)		Memo Item
SUBTOTAL of Disbursements This Page (optional).			7000.00
CODITION OF DISDUISEMENTS THIS Fage (Optional).		·····	7 7 7
TOTAL This Period (last page this line number only	/)		

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 28a	7 one) 22 x 23 26 27 30b
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 Com	mittee	
Full Name (Last, First, Middle Initial)			Date of Disbursement
2. 20ALISE LEADEKSHIP FUND	A. SCALISE LEADERSHIP FUND		
Mailing Address 317 15TH ST NE			09 14 2022
City	State Zip Code		FEC Identification Number
WASHINGTON Purpose of Disbursement	DC 20002		C 000568463
			C C00568162
Candidate Name		Category/	Transaction ID: SB23.61178 Amount of Each Disbursement this Period
Office Country		Type	
Office Sought: House Disburs Senate	ement For: 2022 Primary General		1000.00
President			Mama Harr
State: District:	OTHER		Memo Item
Full Name (Last, First, Middle Initial)			
B. SCHAKOWSKY FOR CONGRESS			Date of Disbursement
Mailing Address P.O. BOX 5130			09 14 2022
City EVANSTON	State Zip Code IL 60204		FEC Identification Number
Purpose of Disbursement	00204		C C00327023
			Transaction ID : SB23.61179
Candidate Name		Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disburs	ement For: 2022	туре	1000.00
Senate	Primary x General		7 7 7
President State: IL District: 09	Other (specify)		Memo Item
Full Name (Last, First, Middle Initial)			<u> </u>
C. SCHNEIDER FOR CONGRESS			Date of Disbursement
Mailing Address 315 INSPIRATION LANE			09 14 7 2022
City	State Zip Code		FEC Identification Number
GAITHERSBURG	MD 20878		
Purpose of Disbursement			C C00495952
Candidate Name		Category/ Type	Transaction ID: SB23.61180 Amount of Each Disbursement this Period
Office Sought: House Disburs	ement For: 2022	71	3500.00
Senate	Primary General		
President Pictriot: 40	Other (specify) ▼		Memo Item
State: IL District: 10			
SUBTOTAL of Disbursements This Page (optional)		·····•	5500.00
TOTAL This Davied (lock name this line number and the			
TOTAL This Period (last page this line number onl	у)		

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 18 OF 20
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only one) 21b 22 X 23 26 27 28a 28b 28c 29 30b
		by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		
College of American Pathologists F	Political Action Comm	ittee
Full Name (Last, First, Middle Initial) A. SCOTT PETERS FOR CONGRES	S	Date of Disbursement
Mailing Address 412 1ST STREET, SE	09 14 2022	
City	State Zip Code	EEC Identification Number
WASHINGTON	DC 20003	FEC Identification Number
Purpose of Disbursement	Г	C C00503110 Transaction ID : SB23,61181
Candidate Name	-	Category/ Type Amount of Each Disbursement this Period
Office Sought: House Disburser Senate	nent For: 2022 Primary	1000.00
President	Other (specify) ▼	Memo Item
Full Name (Last, First, Middle Initial) B. SHORE PAC		Date of Disbursement
Mailing Address 495 BROADWAY		09 / 08 / 2022
City Long Branch	State Zip Code NJ 07740	FEC Identification Number
Purpose of Disbursement	İ	C C00410308
Candidate Name		Category/ Type Transaction ID: SB23.61165 Amount of Each Disbursement this Period
	nent For: 2022 Primary General	1000.00
	Primary General Other (specify) OTHER	Memo Item
Full Name (Last, First, Middle Initial)	JIILK	B + (B)
C. STEVE DAINES FOR MONTANA		Date of Disbursement
Mailing Address 410 First Street, SE Floor 2		09 14 2022
City Swashington	State Zip Code DC 20003	FEC Identification Number
Purpose of Disbursement	20000	C C00491357
Candidate Name		Transaction ID : SB23.61182 Category/ Type Amount of Each Disbursement this Period
Canata	nent For: 2026	1500.00
President	Primary ☐ General Other (specify) ▼	Memo Item
State: District:		ш
SUBTOTAL of Disbursements This Page (optional)		3500.00
TOTAL This Period (last page this line number only)		

SCHEDULE B (FEC Form 3X)		FOR LINE I	
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 28a	
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 Comm	ittee	
Full Name (Last, First, Middle Initial) A. STEVE DAINES FOR MONTANA			Date of Disbursement
STEVE DAINES FOR WONTANA			M M / D D / Y Y Y Y
Mailing Address 410 First Street, SE Floor 2			09 21 2022
City Washington	State Zip Code DC 20003		FEC Identification Number
Purpose of Disbursement	20003		C 000404057
·			C C00491357 Transaction ID: SB23.61189
Candidate Name		Category/ Type	Amount of Each Disbursement this Period
	nent For: 2022		1500.00
	Primary x General Other (specify) ▼		Memo Item
State: District:			
Full Name (Last, First, Middle Initial) 3. TERRI SEWELL FOR CONGRESS	5		Date of Disbursement
Mailing Address 499 South Capitol Street, SW Suite 422			09 14 2022
City	State Zip Code		FEC Identification Number
Washington Purpose of Disbursement	DC 20003		C C00459076
			C C00458976
Candidate Name		Category/ Type	Transaction ID: SB23.61183 Amount of Each Disbursement this Period
	nent For: 2022	.,,,,,	2500.00
	Primary General Other (specify)		
State: AL District: 07	Cirici (opcony)		Memo Item
Full Name (Last, First, Middle Initial) TONY CARDENAS FOR CONGRE	:00		Date of Disbursement
	.00		M M / D D / Y Y Y Y
Mailing Address P.O. BOX 15096			09 08 2022
,	State Zip Code		FEC Identification Number
WASHINGTON Purpose of Disbursement	DC 20003		
i dipose oi Dispuisement	Г		C C00498873
Candidate Name		Category/ Type	Transaction ID: SB23.61166 Amount of Each Disbursement this Period
Office Sought: House Disbursen	nent For: 2022	1,400	2500.00
	Primary General		7 7 7
President State: CA District: 29	Other (specify) ▼		Memo Item
otato. GA Bistriot. 29			
SUBTOTAL of Disbursements This Page (optional)		·····•	6500.00
TOTAL This Desired (factor and the factor)			
TOTAL This Period (last page this line number only).			

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE (check only	v one)
	Detailed Summary Page	21b 28a	22 X 23 26 27 28b 28c 29 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full) College of American Pathologists P			
Full Name (Last, First, Middle Initial) A. VERN BUCHANAN FOR CONGRE	ESS		Date of Disbursement
Mailing Address P.O. BOX 15239			09 21 2022
WASHINGTON	State Zip Code 20003		FEC Identification Number
Purpose of Disbursement Candidate Name		Category/	C C00412759 Transaction ID : SB23.61190 Amount of Each Disbursement this Period
Senate	nent For: 2022 Primary	Туре	1000.00 Memo Item
Full Name (Last, First, Middle Initial) B. WENSTRUP FOR CONGRESS			Date of Disbursement
Mailing Address 2308 MOUNT VERNON AVE SUITE 707	Ptoto 77 C ·		09 21 2022
,	State Zip Code VA 22301		FEC Identification Number C C00497818 Transaction ID : SR23 61101
Candidate Name		Category/ Type	Transaction ID : SB23.61191 Amount of Each Disbursement this Period
Senate	nent For: 2022 Primary x General Other (specify)		1000.00 Memo Item
Full Name (Last, First, Middle Initial) C. WYDEN FOR SENATE			Date of Disbursement
Mailing Address 4 I STREET, SE #715 C/O G. HELWIG			09 21 2022
,	State Zip Code 20003		FEC Identification Number
Candidate Name		Category/ Type	C C00308676 Transaction ID : SB23.61192 Amount of Each Disbursement this Period
Senate President	nent For: 2002 Primary		1000.00 Memo Item
State: OR District: 00			
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only).			3000.00 50500.00