PAGE 1 / 26

### **FEC** FORM 3Y

### **REPORT OF RECEIPTS AND DISBURSEMENTS**

I OKIWI 3X	For Other Than An Au	thorized Committe	9	Office Use	e Only
NAME OF     COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typin over the lines.	ı, type 121	FE4M5	
College of Americar	Pathologists Political	Action Committee	<b>)</b>		
<u> </u>					
ADDRESS (number and street  ▼ Check if different	Suite 425 West				
than previously reported. (ACC)	Washington		DC	20001	
2. FEC IDENTIFICATION	NUMBER ▼ CI	TY▲	STATE	<b>Ξ</b> Δ Z	ZIP CODE A
C C00274944		S THIS N	or C	AMENDED (A)	
4. TYPE OF REPORT (Choose One)	Report Due On:		n 20 (M6)	Aug 20 (M8) Sep 20 (M9)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election
(a) Quarterly Reports:	Apı	<sup>20</sup> (M4) J	I 20 (M7)	Oct 20 (M10)	Year Only)  Jan 31 (YE)
April 15 Quarterly Repo	rt (Q1) (C) 12-Day PRE-Election	Primary (12P)		General (12G)	Runoff (12R)
Quarterly Repo	Report for the:	Convention (1	2C) S	Special (12S)	
Quarterly Reportant January 31 Year-End Reportant Page 1	El- al	on on	D   D / Y   Y		in the State of
July 31 Mid-Yea Report (Non-ele Year Only) (MY	ar (d) 30-Day	General (30G		Runoff (30R)	Special (30S)
Termination Rep (TER)	port	on on	D = D / Y = Y		in the State of
5. Covering Period	08	through	M M / D	31 2020	)
I certify that I have examine	d this Report and to the best o Konnick, Eric, , Dr., MD,MS	f my knowledge and b	elief it is true, con	rrect and complete	).
Type or Print Name of Treas					
Signature of Treasurer	Konnick, Eric, , Dr., MD,MS	[Electronically	Filed] Date	M M / D 15	2020
NOTE: Submission of false, e	rroneous, or incomplete information	on may subject the pers	n signing this Re	port to the penalties	s of 52 U.S.C. § 30109
Office Use Only					FORM 3X ev. 05/2016

### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

#### College of American Pathologists Political Action Committee

Report Covering the Period: From: 08 01 2020 To: 08 31 2020

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand  January 1,  2020		395573.09
	(b) Cash on Hand at Beginning of Reporting Period	391919.04	
	(c) Total Receipts (from Line 19)	12790.00	117054.30
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	404709.04	512627.39
7.	Total Disbursements (from Line 31)	49623.72	157542.07
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	355085.32	355085.32
9.	Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed <b>BY</b> 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. 05/2016)

Write or Type Committee Name

#### College of American Pathologists Political Action Committee

08 01 2020 08 31 2020 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 9600.00 99590.00 (i) Itemized (use Schedule A)..... 3190.00 17464.30 (ii) Unitemized ..... (iii) TOTAL (add 117054.30 12790.00 Lines 11(a)(i) and (ii).....▶ 0.00 0.00 (b) Political Party Committees ..... (c) Other Political Committees 0.00 0.00 (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 117054.30 12790.00 Totals to Line 33, page 5) .....▶ 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees..... 0.00 0.00 13. All Loans Received..... 0.00 0.00 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... 0.00 0.00 17. Other Federal Receipts 0.00 (Dividends, Interest, etc.)..... 0.00 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3)..... 0.00 0.00 (b) Levin Funds (from Schedule H5) ....... (c) Total Transfers (add 18(a) and 18(b)).. 0.00 0.00 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))....... 117054.30 12790.00 20. Total Federal Receipts 12790.00 117054.30 (subtract Line 18(c) from Line 19) .......▶

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date			
<ul> <li>Operating Expenditures:         <ul> <li>(a) Allocated Federal/Non-Federal</li> <li>Activity (from Schedule H4)</li> </ul> </li> </ul>		Calcination four to bate			
(i) Federal Share	0.00	0.00			
(ii) Non-Federal Share	0.00	0.00			
(b) Other Federal Operating	122.72	1042.07			
Expenditures(c) Total Operating Expenditures	123.72	1042.07			
(add 21(a)(i), (a)(ii), and (b))	123.72	1042.07			
Transfers to Affiliated/Other Party Committees	0.00	0.00			
Contributions to Federal Candidates/Committees and Other Political Committees	49500.00	156500.00			
Independent Expenditures (use Schedule E)	0.00	0.00			
Coordinated Party Expenditures (52 U.S.C. § 30116(d))	0.00	0.00			
(use Schedule F)	0.00	0.00			
Loan Repayments Made	0.00	0.00			
Loans Made Refunds of Contributions To:	0.00	0.00			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00			
(b) Political Party Committees	0.00	0.00			
(c) Other Political Committees	0.00	0.00			
(such as PACs)(d) Total Contribution Refunds	0.00	0.00			
(add Lines 28(a), (b), and (c))	0.00	0.00			
Other Disbursements (Including					
Non-Federal Donations)	0.00	0.00			
Federal Election Activity (52 U.S.C. § 30101(20)  (a) Allocated Federal Election Activity (from Schedule H6)	))				
(i) Federal Share	0.00	0.00			
(ii) "Levin" Share	0.00	0.00			
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00			
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00			
Total Disbursements (add Lines 21(c), 22,					
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	49623.72	157542.07			
Total Federal Disbursements	, , , , , , , , , , , , , , , , , , , ,				
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	49623.72	157542.07			
	70020.12	15/542.07			

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

FEC FORM 3X (Rev. 05/2016)		Page 3
III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	12790.00	117054.30
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	12790.00	117054.30
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	123.72	1042.07
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	123.72	1042.07

## SCHEDULE A (FEC Form 3X)

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

Use separate schedule(s)

l	FO	R LINE	:	PAGE		6	OF		26	
(check only one)										
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		13	14	□ 1	15		16			17

ITEMIZED RECEIPTS 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 Cardona, Diana, Marcella, Dr., MD Date of Receipt Mailing Address 1144 Pebble Creek Xing 2020 City Zip Code State Transaction ID: SA11AI.58740 NC 27713-8959 Durham Amount of Each Receipt this Period FEC ID number of contributing C 125.00 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. Conway, Earl, Joseph, Dr., MD Date of Receipt Mailing Address 324 Vinings Walk NW 19 2020 City State Zip Code Transaction ID: SA11AI.58716 GA Gainesville 30501-2924 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Northeast Georgia Med Ctr Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 250.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Davey, Diane, Davis, Dr., MD Date of Receipt Mailing Address 9885 Leland Dr 28 2020 City State Zip Code Transaction ID: SA11AI.58753 FL Orlando 32827-5745 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) UCF College of Medicine Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 625.00 SUBTOTAL of Receipts This Page (optional).....

FOR LINE NUMBER: PAGE 7 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c 12

26

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 of Individual (Last, First, Middle Initial) or Full Organization Name Dean Jr, William, Hope, Dr., MD Date of Receipt Mailing Address 196 North St 19 2020 City Zip Code State Transaction ID: SA11AI.58733 NY Geneva 14456-1694 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) Geneva General Hospital 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. Edgerton, Neil, H, Dr., MD Date of Receipt Mailing Address 2675 Oak Park TRL 19 2020 City State Zip Code Transaction ID: SA11AI.58723 GA Decatur 30033-2217 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Rockdale Medical Center Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 250.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Fowkes, Mary, Elizabeth, Dr., MD, PhD Date of Receipt Mailing Address 28 Elm Rd 10 2020 City Zip Code State Transaction ID: SA11AI.58703 NY Katonah 10536-1308 Amount of Each Receipt this Period FEC ID number of contributing C 200.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Mount Sinai Medical Center Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 700.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

Use separate schedule(s)

F	OR	LINE	PAGE		8	OF		26			
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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 Frazier Jr, Robert, Anthony, Dr., MD Date of Receipt Mailing Address 733 Boush St Ste 200 13 2020 City Zip Code State Transaction ID: SA11AI.58708 Norfolk VA 23510-1501 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) **Dominion Pathology Laboratories** 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. Gardner, Laura, Jane, Dr., MD Date of Receipt Mailing Address 417 Edgar Rd 13 2020 City State Zip Code Transaction ID: SA11AI.58707 MO Saint Louis 63119-4237 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) St Anthony's Med Ctr Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 250.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Gupta, Chakshu, , Dr., MD, MBA Date of Receipt Mailing Address 3408 Stanford CT 10 2020 City Zip Code State Transaction ID: SA11AI.58700 MO Saint Joseph 64506-4580 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) MAWD Pathology Group PA Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) 2850.00 SUBTOTAL of Receipts This Page (optional).....

Name of Employer (for Individual)

Receipt For:

Primary

Other (specify)

General

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

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

FOR LINE NUMBER: 26 **PAGE** 9 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 12 11c Detailed Summary Page 13 14 15 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 Hansen, Andrew, Thomas, Dr., MD Date of Receipt Mailing Address 516 E 11125 S 2020 15 City State Zip Code Transaction ID: SA11AI.58709 UT 84070-5372 Sandy Amount of Each Receipt this Period FEC ID number of contributing C 125.00 federal political committee.

Occupation (for Individual)

Memo Item

	Jordan Valley Med Ctr Lab		Patholo	gist		
	Receipt For:	Aggre	egate Yea	ar-to-Date ▼		
	Primary General Other (specify) ▼			250.00		
В.	Full Name of Individual (Last, First, Middle Init Hickey, William, F., Dr., MD	ial) or F	-ull Orga	nization Name	Date of Receipt	
	Mailing Address Dept of Path/Borwell Bldg  1 Medical Center Dr			Ton a control of the	08 19 2020	
	City	Stat		Zip Code	Transaction ID : SA11AI.58734	_
	Lebanon	NH	l	03756-1000	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С			250.00	
	Name of Employer (for Individual) Dartmouth Med School		Occupa Patholo	tion (for Individual) ogist	Memo Item	
	Receipt For:  Primary General  Other (specify) ▼	Aggre	egate Yea	ar-to-Date ▼ 250.00		
<u> </u>	Full Name of Individual (Last, First, Middle Init Kasimian, Dennis, , Dr., MD	ial) or F	-ull Orga	nization Name	Date of Receipt	•
	Mailing Address 15107 Vanowen St				08	
	City	Stat		Zip Code	Transaction ID : SA11AI.58737	_
	Van Nuys	CA	١	91405-4542	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С	- : :		1000.00	
	Name of Employer (for Individual)		Occupat	tion (for Individual)	Memo Item	
	Valley Presbyterian Hospital		Patholo		_	

Aggregate Year-to-Date ▼

1000.00

1375.00

FOR LINE NUMBER: PAGE 10 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12

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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 League, Aimee, A, Dr, MD Date of Receipt Mailing Address 2904 Westcorp Blvd SW Ste 108 2020 City Zip Code State Transaction ID: SA11AI.58748 AL Huntsville 35805-6437 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Pathology Associates PC 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. McCarthy, Denis, M, Dr., MD Date of Receipt Mailing Address PO Box 72059 2020 City State Zip Code Transaction ID: SA11AI.58750 OR Eugene 97401-0285 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Pathology Consultants PC Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Mervak, Timothy, R, Dr., MD Date of Receipt Mailing Address Dept of Path 26 2020 16001 W 9 Mile Rd City State Zip Code Transaction ID: SA11AI.58752 MI Southfield 48075-4818 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) Maine Medical Center-Bramhall Campus Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 850.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

Use separate schedule(s)

FOI	K LINE	NOWREK	: PAGE	= 11 OF	- 26
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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 Moad, John, C, Dr., MD Date of Receipt Mailing Address 2534 Millville Shandon Rd 18 2020 City Zip Code State Transaction ID: SA11AI.58711 OH Hamilton 45013 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) **Dermatopathology Laboratory of Central** Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1275.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Peditto, Stephanie, , , Date of Receipt Mailing Address 325 Waukegan Road 10 2020 City State Zip Code Transaction ID: SA11AI.58764 Northfield IL 60093 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) College of American Pathologis **Employee** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Rodriguez, Michelle, E, Dr., MD Date of Receipt Mailing Address 310 Highland Springs 10 2020 City State Zip Code Transaction ID: SA11AI.58705 TX Georgetown 78633 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) **Baylor Scott & White Medical Center** Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) 600.00 SUBTOTAL of Receipts This Page (optional).....

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

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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 of Individual (Last, First, Middle Initial) or Full Organization Name Selvaggi, Suzanne, M, Dr., MD Date of Receipt Mailing Address Clinical Laboratories 600 Highland Ave 19 2020 City Zip Code State Transaction ID: SA11AI.58730 WI Madison 53792-0001 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Univ of Wisconsin Hosp & Clinics Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Simonetti, Anthony, John, Dr., MD, MBA Date of Receipt Mailing Address 960 Saint Matthews Road 80 2020 City State Zip Code Transaction ID: SA11AI.58698 PA **Chester Springs** 19425 Amount of Each Receipt this Period FEC ID number of contributing 200.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Reading Hospital Tower Heath Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1400.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Taylor, Ann, , Dr., MD Date of Receipt Mailing Address Intermountain Med Ctr Pat Dept 19 2020 5121 S Cottonwood St City State Zip Code Transaction ID: SA11AI.58715 UT Murray 84107-5701 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Intermountain Laboratory Services Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1450.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

26 FOR LINE NUMBER: PAGE 13 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 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 Valdes, Caroline, Leilani, Dr., MD Date of Receipt Mailing Address 608 W Commercial St 2020 City Zip Code State Transaction ID: SA11AI.58739 TX Victoria 77901-6302 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) Regional Medical Laboratory Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Vanhoose, John, S, Dr., MD Date of Receipt Mailing Address 830 W Bayou Pines Dr 2020 City State Zip Code Transaction ID: SA11AI.58742 Lake Charles LA 70601-7077 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Pathology Laboratory Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Veve, Robert, , Dr., MD Date of Receipt Mailing Address Dept of Path 24 2020 25470 Medical Center Dr Ste 105 City Zip Code State Transaction ID: SA11AI.58746 CA Murrieta 92562-4901 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Medical Lab Services Medical Group Inc Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 600.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

### SCHEDULE A (FEC Form 3X) IT

FOR LINE NUMBER: PAGE 14 OF

EMIZED RECEIPTS	for each category of the Detailed Summary Page	(	ck only 11a 13	y one) 11b 14		11c 15		12 16	17
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	ormation copied from such Reports and State ommercial purposes, other than using the na													
NAM	IE OF COMMITTEE (In Full) Ilege of American Pathologists				<u>.                                      </u>									
	Name of Individual (Last, First, Middle Initial) chtel, Mitchell, Steven, Dr., MD	or Full	Orga	nization Nar	me			Date of	Rec	eipt				
	ng Address Path Dept School of Med 3601 4th Street			T				M M M	′	24	/ Y	y y 2020	* Y	
City Lubb	oock	State TX		Zip Code 79430-00	<b>1</b> 01		<u> </u>			on ID : S				
				1 9430-00	001		-	Amount	of E	Each Re	ceipt this	s Perio	od	
	ID number of contributing ral political committee.	С									45	500	0.00	
Name	e of Employer (for Individual)	Ос	cupa	tion (for Ind	lividual)			Me	∍mo	Item				
	s Tech Univ HSC	Pa	atholo	gist			]							
Rece		Aggregate	e Yea	ar-to-Date ▼										
	Primary General Other (specify) ▼				500.0	0								
	Спот (вреспу) ▼		7		300.0									
Full N	Name of Individual (Last, First, Middle Initial)	or Full	Orga	nization Nar	me		+		_					
3. <u>Wri</u>	ight, Pamela, K, Ms., N/A						_  [	Date of	Rec	eipt				
	ng Address 1001 G Street NW Ste 425 West							M M M	1	10	/ Y	2020	Y	
City		State		Zip Code			L.			on ID : S				
Wasl	hington	DC		20001-45	560		_	Amount	of E	Each Re	ceipt this	s Perio	od	
	ID number of contributing ral political committee.	С	_						_		-	50	0.00	
	e of Employer (for Individual) ge of American Pathologists		ccupa mploy	ation (for Ind	lividual)			Me	∍mo	Item				
Rece	eipt For:			ar-to-Date ▼	7		$\dashv$							
	Primary General	55 - gat	. 50	. 3.13										
	Other (specify) ▼				300.0	00								
Full N	Name of Individual (Last, First, Middle Initial)	) or Full	Orga	nization Nar	me		<u> </u>	Jata	Da -	voint				
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City		State		Zip Code			ጚ"		4					4
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	ID number of contributing	С						-	_				_	
feder	ral political committee.	U .	_				1							
Name	e of Employer (for Individual)	Ос	cupa	tion (for Ind	lividual)			Мє	emo	Item				
Rece	eipt For:	Aggregate	e Yes	ar-to-Date ▼	r		$\dashv$							
	Primary General	Jg. 39at		2200		-								
	Other (specify)	<u> </u>		1 1 1										
SUBTO	DTAL of Receipts This Page (optional)					····· <b>&gt;</b>						550	0.00	
ΤΩΤΔΙ	This Period (last page this line number only	v)				<b>b</b>	ĺ					9600	0.00	
	I OHOG HADE PAGO HIND HIND HUHIDEI UIII	, ,							0.00	W 1 1 1	4 400 1	T	ATTENDED	

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SCHEDULE B (FEC Form 3X)			FOR LIN	IE NUMBER	:	PAGE	15 OF 26		
ITEMIZED DISBURSEMENTS		parate schedule(s) category of the	(check o				7.07		
		Summary Page	<b>X</b> 21		23 28c	26	27 30b		
Any information copied from such Reports and State	ments may	not be sold or use							
or for commercial purposes, other than using the na									
NAME OF COMMITTEE (In Full)									
College of American Pathologists	Political	Action Comr	mittee						
Full Name (Last, First, Middle Initial)				Deta	f Dialayuraa				
A. Sun Trust Bank				Date of Disbursement					
Mailing Address P.O. Box 85024					08 04 2020				
City	State	Zip Code		FEC Id	entification	Number			
Richmond Purpose of Disbursement	VA	23285					-		
RAZ Mobile Deposit Fee			· · ·						
Candidate Name			Category/			ID: SB21B.	58696 It this Period		
			Type	Amoun	t of Lacif	Disbursemen	it tills i ellou		
	ment For:					1 95 1	43.72		
Senate	Primary	General			,	,			
State: District:	Other (sp	ecity) 🔻		Me	emo Item				
Full Name (Last, First, Middle Initial)									
B. Sun Trust Bank				Date o	f Disburse	ment			
				M = M	/ D	D / Y	YYY		
Mailing Address P.O. Box 85024				08	2	0 2	2020		
City Richmond	State VA	Zip Code 23285		FEC Id	entification	Number			
Purpose of Disbursement		23265		C			-		
Suntrust Account Analysis Fee			Transaction ID : SB21B.58697 Amount of Each Disbursement this Per						
Candidate Name									
Office Courses		Category/ Type			80.00				
Office Sought: House Disburse Senate	ment For: Primary	General				7	00.00		
President	Other (sp			Пп					
State: District:	, ,			Me	emo Item				
Full Name (Last, First, Middle Initial)									
C.				Date o	f Disburse	ment			
Mailing Address				M = M	/ D	D / Y	Y		
Maining Addition					-				
City	State	Zip Code		FEC Id	entification	Number			
Purpose of Disbursement				C			-		
·							-		
Candidate Name			Category/	Amoun	t of Each	Disbursemer	nt this Period		
Office Sought: House Disburse	ement For:		Type						
Senate	Primary	General				7	46		
President	Other (sp			I Ma	emo Item				
State: District:				IVIE	ano item				
							123.72		
SUBTOTAL of Disbursements This Page (optional).			·····•		-	7	123.72		
TOTAL This Period (last page this line number only	<i>(</i> )						123.72		

SCHEDULE B (FEC Form 3X)	11	FOR LINE N	
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)	<u>_</u>		
College of American Pathologists F	Political Action Comm	ittee	
Full Name (Last, First, Middle Initial)  A. AMERICAN WORKING FAMILIES			Date of Disbursement
Mailing Address 107 SOUTH WEST STREET SUITE 527			08 19 2020
,	State Zip Code VA 22314		FEC Identification Number
ALEXANDRIA Purpose of Disbursement	VA 22314		C 000514045
. 4.,5000 0. 2.024.00			C C00511915  Transaction ID : SB23.58765
Candidate Name	-	Category/ Type	Amount of Each Disbursement this Period
	nent For: 2020 Primary General	.,,,,	10000.00
President State: District:	Other (specify) ▼ OTHER		Memo Item
Full Name (Last, First, Middle Initial)			
B. BEATTY FOR CONGRESS			Date of Disbursement
Mailing Address 499 SOUTH CAPITOL STREET SW, SUITE 422			08 26 2020
City WASHINGTON	State Zip Code DC 20003		FEC Identification Number
Purpose of Disbursement	20003		C C00507368
		: : II	Transaction ID : SB23.58767
Candidate Name		Category/ Type	Amount of Each Disbursement this Period
	nent For: 2020		1000.00
	Primary General Other (specify)		Memo Item
State: OH District: 03			Welle Kell
Full Name (Last, First, Middle Initial)  C. BILL CASSIDY FOR US SENATE			Date of Disbursement
Mailing Address 1006 PENDLETON STREET			08 26 2020
City	State Zip Code		FEC Identification Number
ALEXANDRIA	VA 22314		
Purpose of Disbursement	Category Type		C C00543983
Candidate Name			Transaction ID: SB23.58770  Amount of Each Disbursement this Period
Office Sought: House Disbursen	nent For: 2020	.,,~~	1000.00
	Primary General		
State: LA District: 00	Other (specify) ▼		Memo Item
SUBTOTAL of Disbursements This Page (optional)			12000.00
CODICIAL 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	•
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 28a	22 <b>X</b> 23 26 27 28c 29 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam	nents may not be sold or use the and address of any politic	ed by any perso	on for the purpose of soliciting contributions solicit contributions from such committee
NAME OF COMMITTEE (In Full)  College of American Pathologists P			
Full Name (Last, First, Middle Initial) - BLUMENAUER FOR CONGRESS			Date of Disbursement
Mailing Address 901 SE OAK STREET SUITE 105			08 26 2020
Portland	State Zip Code OR 97214		FEC Identification Number
Purpose of Disbursement  Candidate Name		Category/	C C00307314  Transaction ID : SB23.58771  Amount of Each Disbursement this Period
Senate	nent For: 2020  Primary	Type	1000.00 Memo Item
Full Name (Last, First, Middle Initial)  BUDDY CARTER FOR CONGRES  Mailing Address 824 S MILLEDGE AVE	SS		Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUITE 101	State Zip Code		FEC Identification Number
ATHENS Purpose of Disbursement	GA 30605		C C00543967
Candidate Name		Category/ Type	Transaction ID: SB23.58772  Amount of Each Disbursement this Period
Senate	nent For: 2020 Primary		2500.00
State: GA District: 01	(		Memo Item
Full Name (Last, First, Middle Initial) - BUDDY PAC			Date of Disbursement
Mailing Address P.O. BOX 10570		08 26 2020	
,	State Zip Code GA 31412		FEC Identification Number  C C00597062
Candidate Name	Category/ Type	Transaction ID: SB23.58773  Amount of Each Disbursement this Period	
Senate	nent For: 2020 Primary General Other (specify)  OTHER		2500.00 Memo Item
			6000.00
TOTAL This Period (last page this line number only)			7 7 7

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE I	one)			
	Detailed Summary Page	21b 28a	22 <b>x</b> 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 F	•					
Full Name (Last, First, Middle Initial)  A. CHUY GARCIA FOR CONGRESS			Date of Disbursement			
Mailing Address 137 N. 14TH AVENUE	Mailing Address 137 N. 14TH AVENUE					
MELROSE PARK	State Zip Code IL 60160		FEC Identification Number			
Purpose of Disbursement  Candidate Name		Category/	C C00661777  Transaction ID : SB23.58775  Amount of Each Disbursement this Period			
	nent For: 2020 Primary 🗶 General	Type	1000.00			
President State: IL District: 04	Other (specify) ▼		Memo Item			
Full Name (Last, First, Middle Initial)  B. CINDY AXNE FOR CONGRESS	•					
Mailing Address PO BOX 65551	Mailing Address PO BOX 65551					
City SWEST DES MOINES Purpose of Disbursement	State Zip Code IA 50265		FEC Identification Number  C C00646844			
Candidate Name	Category/ Type	Transaction ID : SB23.58777 Amount of Each Disbursement this Period				
Senate President	nent For: 2020 Primary		1000.00 Memo Item			
State: IA District: 03  Full Name (Last, First, Middle Initial)  C. COLLINS MAINE 2020			Date of Disbursement			
Mailing Address 1020 NORTH FAIRFAX STREET SUITE 201		08				
City ALEXANDRIA	State Zip Code VA 22314		FEC Identification Number			
Purpose of Disbursement  Candidate Name	Catego					
Senate	nent For: 2020 Primary General	Туре	1000.00			
State: President  District:	Other (specify) ▼ OTHER		Memo Item			
SUBTOTAL of Disbursements This Page (optional)  TOTAL This Period (last page this line number only)			3000.00			

WASHINGTON Purpose of Disbursement  Candidate Name  Office Sought:    X   House   Disbursement   President   President   Candidate   Candi	e and address of any po	r used by any persolitical committee  Category/ Type	22 <b>X</b> 23 26 27 28b 28c 29 30b con for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)  College of American Pathologists Post Full Name (Last, First, Middle Initial)  A. DARREN SOTO FOR CONGRESS  Mailing Address 600 PENNSYLVANIA AVE SE #15845  City WASHINGTON Strong Stro	e and address of any political Action Co	category/ Type	Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NAME OF COMMITTEE (In Full)  College of American Pathologists Policy  Full Name (Last, First, Middle Initial)  A. DARREN SOTO FOR CONGRESS  Mailing Address 600 PENNSYLVANIA AVE SE #15845  City WASHINGTON Purpose of Disbursement  Candidate Name  Office Sought:  House Senate President  P	olitical Action Co	Category/ Type	Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 600 PENNSYLVANIA AVE SE #15845  City WASHINGTON Purpose of Disbursement  Candidate Name  Office Sought: # House Senate President President	zate Zip Code 20003  ent For: 2020  Primary X Genera	Type	FEC Identification Number  C C00581074  Transaction ID: SB23.58782  Amount of Each Disbursement this Period
#15845  City	ent For: 2020 Primary  Genera	Type	FEC Identification Number  C C00581074  Transaction ID : SB23.58782  Amount of Each Disbursement this Period
WASHINGTON Purpose of Disbursement  Candidate Name  Office Sought:    X   House   Disbursement   President   President   Candidate   President   Candidate   President   Candidate   Candi	ent For: 2020 Primary  Genera	Type	C C00581074  Transaction ID : SB23.58782  Amount of Each Disbursement this Period
Candidate Name  Office Sought:    X   House   Disbursement   President   President   Compare   C	Primary <b>x</b> Genera	Type	Transaction ID : SB23.58782 Amount of Each Disbursement this Period
Senate President C	Primary <b>x</b> Genera		
State: FL District: 09			I .
Full Name (Last, First, Middle Initial)  B. DOUG JONES FOR SENATE COM  Mailing Address PO BOX 131025	ot, First, Middle Initial)  NES FOR SENATE COMMITTEE		Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
BIRMINGHAM	zate Zip Code AL 35213		FEC Identification Number
Purpose of Disbursement  Candidate Name	Category/ Type	C C00640623  Transaction ID : SB23.58783  Amount of Each Disbursement this Period	
x Senate P	ent For: 2020 Primary   Other (specify)  General		1000.00 Memo Item
Full Name (Last, First, Middle Initial)  DR KIM SCHRIER FOR CONGRES	SS		Date of Disbursement
Mailing Address PO BOX 2728			08 26 2020
,	tate Zip Code WA 98027		FEC Identification Number  C C00652628  Transaction ID : SB23.58784
Candidate Name	Candidate Name  Category/ Type		
Senate	ent For: 2020 Primary <b>x</b> Genera Other (specify) ▼	āl	1000.00  Memo Item
SUBTOTAL of Disbursements This Page (optional)		<u>-</u>	3000.00

SCHEDULE B (FEC Form 3X)	Use sepa	rate schedule(s)	FOR LINE N		
TEMIZED DISBURSEMENTS	for each of	category of the Summary Page	(check only 21b 28a	one) 22 <b>X</b> 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 <i>I</i>	Action Comm	nittee		
Full Name (Last, First, Middle Initial)	Full Name (Last, First, Middle Initial) FRIENDS OF RAJA FOR CONGRESS				
- INILINDS OF INAUATION CONGR		M M / D D / Y Y Y Y			
Mailing Address C/O AMY STRATHDEE PO BOX 15096		I		08 26 2020	
City WASHINGTON	State DC	Zip Code 20003		FEC Identification Number	
Purpose of Disbursement		20000		C C00575092	
				Transaction ID : SB23.58785	
Candidate Name		,	Category/	Amount of Each Disbursement this Period	
Office Sought:     House   Disburse	ement For: 2	020	Туре	1000.00	
Senate	Primary	<b>✗</b> General		7 7 7	
President State: IL District: 08	Other (spec	eify) ▼		Memo Item	
Full Name (Last, First, Middle Initial)					
FRIENDS OF SCHUMER	•			Date of Disbursement	
Mailing Address P.O. BOX 15854				08 26 2020	
City WASHINGTON	State DC	Zip Code 20003		FEC Identification Number	
Purpose of Disbursement		20000		C C00346312	
				Transaction ID : SB23.58786	
Candidate Name	Category/ Type	Amount of Each Disbursement this Period			
Office Sought: House Disburse	ment For: 2022		.,,,,	1000.00	
x Senate		General			
State: NY District: 00	Other (spec	city)		Memo Item	
Full Name (Last, First, Middle Initial) - GREAT LAKES PAC				Date of Disbursement	
JREAT LAKES PAC				M M / D D / Y Y Y Y	
Mailing Address Seldon Group, 328 Massachusetts Av NE				08 26 2020	
City	State DC	Zip Code		FEC Identification Number	
WASHINGTON DC 20002 Purpose of Disbursement				C C00375584	
Candidate Name			Category/ Type	Transaction ID : SB23.58787 Amount of Each Disbursement this Period	
Office Sought: House Disburse	ement For: 2	.020	Туре	1500.00	
	1	General		7 7 4	
Senate	Primary	Goriorai			
Senate President  State: District:	Other (spec			Memo Item	

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 21 C	OF 26			
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only one)       21b     22     X     23     26     27       28a     28b     28c     29     30b				
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	nittee				
Full Name (Last, First, Middle Initial)  A. HALEY STEVENS FOR CONGRES	 SS	Date of Disbursement				
TALL I STEVENS FOR CONGRE						
Mailing Address C/O STRATHDEE GROUP PO BOX 15096		08 26 2020				
City S WASHINGTON	State Zip Code 20003	FEC Identification Number				
Purpose of Disbursement	20000	C C00638650				
		Transaction ID : SB23,58788				
Candidate Name	-	Category/ Amount of Each Disbursement this P	eriod			
Office Sought: 🗶 House Disbursen	nent For: 2020	Type 1000.00	0			
Senate	Primary General	75 75 75				
President State: MI District: 11	Other (specify) ▼	Memo Item				
Full Name (Last, First, Middle Initial)						
B. HEARTLAND VALUES PAC	Date of Disbursement	V				
Mailing Address P.O. BOX 505	08 26 2020					
,	State Zip Code SD 57101	FEC Identification Number				
Purpose of Disbursement	3.131	C C00409003				
Candidate Name		Transaction ID : SB23.58790				
Candidate Name		Category/ Amount of Each Disbursement this F	<sup>3</sup> eriod			
Office Sought: House Disbursen	nent For: 2020	1500.00	0			
	Primary General					
State: District:	Other (specify) OTHER	Memo Item				
Full Name (Last, First, Middle Initial)		Date of Disbursement				
5. JOHN CARTER FOR CONGRESS	JOHN CARTER FOR CONGRESS					
Mailing Address 317 15TH STREET, NE	Mailing Address 317 15TH STREET, NE					
· · · · · · · · · · · · · · · · · · ·	State Zip Code DC 20002	FEC Identification Number				
WASHINGTON Purpose of Disbursement	DC 20002	C C00371203				
Candidate Name	Candidate Name  Cate Ty					
Office Sought:						
	Primary General	1000.0				
	Other (specify) ▼	Memo Item				
State: TX District: 31						
SUBTOTAL of Disbursements This Page (optional)		3500.0	00			
TOTAL This Period (last page this line number only)						

SCHEDULE B (FEC Form 3X)	Llag congrete schodule(s)	FOR LINE NU		
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only of 21b 28a	ne) 22 <b>X</b> 23 26 27 28b 28c 29 30b	
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 P	Political Action Comm	ittee		
Full Name (Last, First, Middle Initial)  A. LARSON FOR CONGRESS			Date of Disbursement	
Mailing Address 413 NEW JERSEY AVE - BASEME	NT LEVE		08 26 2020	
,	WASHINGTON DC 20003			
Candidate Name		Category/ Type	Transaction ID: SB23.58792 Amount of Each Disbursement this Period	
Senate	nent For: 2020 Primary		1000.00 Memo Item	
Full Name (Last, First, Middle Initial)  B. LOU CORREA FOR CONGRESS  Mailing Address HM CONSULTING	Middle Initial) FOR CONGRESS		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 MD 20901		FEC Identification Number	
Purpose of Disbursement  Candidate Name		Category/ Type	C00578302  Transaction ID : SB23.58793  Amount of Each Disbursement this Period	
Senate	nent For: 2020 Primary	71	1000.00 Memo Item	
Full Name (Last, First, Middle Initial)  C. MATSUI FOR CONGRESS			Date of Disbursement	
Mailing Address P.O. BOX 83142		08 26 2020		
,	AITHERSBURG MD 20883		FEC Identification Number  C C00409219  Transaction ID : SB23.58794	
Candidate Name		Category/ Type	Amount of Each Disbursement this Period	
Senate	nent For: 2020  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).				

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 28a	22 <b>X</b> 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	· ·		The second secon
Full Name (Last, First, Middle Initial)  A. MCCONNELL FOR SENATE COM	IMITTEE		Date of Disbursement
Mailing Address C/O L. LISKER, 228 S WASHINGTO	ON ST		08 26 2020
*	State Zip Code VA 22314		FEC Identification Number
Candidate Name		Category/	C C00193342  Transaction ID : SB23.58795  Amount of Each Disbursement this Period
x Senate	nent For: 2020  Primary	Туре	2500.00 Memo Item
Full Name (Last, First, Middle Initial)  3. MORGAN GRIFFITH FOR CONGF  Mailing Address C/O K.B. DOUGHTERTY, 3213 DU SUITE700	First, Middle Initial)  GRIFFITH FOR CONGRESS  C/O K.B. DOUGHTERTY, 3213 DUKE ST		Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City ALEXANDRIA	State Zip Code VA 22314		FEC Identification Number
Purpose of Disbursement  Candidate Name	Category/ Type	C C00477240  Transaction ID: SB23.58796  Amount of Each Disbursement this Period	
Senate	nent For: 2020 Primary		1000.00 Memo Item
Full Name (Last, First, Middle Initial)  MULLIN FOR CONGRESS			Date of Disbursement
Mailing Address 439 NEW JERSEY AVE, SE			08 26 2020
,	State Zip Code DC 20003		FEC Identification Number  C C00498345  Transaction ID : SB23.58797
Candidate Name	Candidate Name  Category/ Type		
Senate	nent For: 2020 Primary    General  Other (specify) ▼		1000.00  Memo Item
SUBTOTAL of Disbursements This Page (optional)		·····	4500.00
TOTAL This Period (last page this line number only).			

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate sche	dule(s)   (c	le(s) (check only one)		PAGE 24 OF 26
	for each category of Detailed Summary	of the Page	21b 28a	22 <b>X</b> 28b	23 26 27 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 F					
Full Name (Last, First, Middle Initial)  A. MULLIN FOR CONGRESS				Date of Dis	bursement
Mailing Address 439 NEW JERSEY AVE, SE				08	26 2020
WASHINGTON	State Zip Cod DC 20003	le			cation Number
Purpose of Disbursement  Candidate Name			egory/	Transa	498345 ction ID : SB23.58798 Each Disbursement this Period
Senate	nent For: 2020 Primary	neral	уре	Memo	1000.00
Full Name (Last, First, Middle Initial)  B. RALPH NORMAN FOR CONGRES  Mailing Address PO BOX 37467	ot, Middle Initial) MAN FOR CONGRESS			Date of Dis	bursement 26 2020
ROCK HILL	State Zip Cod SC 29732			1.1	cation Number
Purpose of Disbursement  Candidate Name		egory/	Transac	633610 ction ID : SB23.58799 Each Disbursement this Period	
Senate President	nent For: 2020 Primary 🗶 Ger Other (specify)	neral	21	Memo	1000.00
State: SC District: 05  Full Name (Last, First, Middle Initial)  C. RICHARD E NEAL FOR CONGRE	SS COMMITT	EE		Date of Dis	
Mailing Address 415 NEW JERSEY AVE SE UNIT 1				08	26 2020
,	State Zip Cod DC 20003		-	C coo	cation Number  226522  ction ID: SB23.58801
Candidate Name	Candidate Name  Cat				Each Disbursement this Period
Senate	nent For: 2020 Primary Ger Other (specify) ▼	neral		Memo I	3000.00 Item
SUBTOTAL of Disbursements This Page (optional)			····· <b>&gt;</b>		5000.00
TOTAL This Period (last page this line number only).					

SCHEDULE B (FEC Form 3X)	Line concrete cahadula/a\	FOR LINE		
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 28a	one) 22 <b>X</b> 23 26 27 28b 28c 29 30b	
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 P	olitical Action Comr	mittee		
Full Name (Last, First, Middle Initial)  A. ROBIN KELLY FOR CONGRESS			Date of Disbursement	
		08 26 2020		
Mailing Address 413 NEW JERSEY AVENUE, SE			00 20 2020	
,	tate Zip Code DC 20003		FEC Identification Number	
Purpose of Disbursement	20003		C 000530966	
,			C C00539866	
Candidate Name		Category/	Transaction ID : SB23.58802  Amount of Each Disbursement this Period	
		Type		
Office Sought:  House Disbursem	ent For: 2020		1000.00	
Senate	Primary <b>x</b> General			
President State: IL District: 02	Other (specify) ▼		Memo Item	
Full Name (Last, First, Middle Initial)				
RON WRIGHT FOR CONGRESS	,			
Mailing Address EPIPHANY PRODUCTIONS 1727 SUITE 300		08 26 2020		
,	tate Zip Code		FEC Identification Number	
7.12270.11271.11	VA 22314		C C00662171	
Purpose of Disbursement	Purpose of Disbursement			
Candidate Name			Transaction ID : SB23.58803	
	Category/ Type	Amount of Each Disbursement this Period		
Office Sought:	ent For: 2020	.,,,,	1000.00	
	Primary <b>x</b> General		4 4	
President State: TX District: 06	Other (specify)		Memo Item	
Full Name (Last, First, Middle Initial)				
STEVE CHABOT FOR CONGRESS			Date of Disbursement	
Mailing Address 617 EAST CUSTIS AVENUE		08 26 2020		
City	tate Zip Code		FEC Identification Number	
, 122, 0 11 12 1 11 1	VA 22301		TEC Identification Number	
Purpose of Disbursement			C C00301838	
			Transaction ID : SB23.58805	
Candidate Name	Category/ Type  fice Sought:     House   Disbursement For: 2020			
Office Sought: 🙀 House Disbursem				
<u> </u>	Primary 🗶 General		4 4	
	Other (specify) ▼		Memo Item	
State: OH District: 01			Mellio Itelli	
SUBTOTAL of Disbursements This Page (optional)			3000.00	
			7 7 7	
TOTAL This Period (last page this line number only).				

S	CHEDULE B (FEC Form 3X)			NE NUMBER: PAGE 26 OF 26			
ΙT	EMIZED DISBURSEMENTS		arate schedule(s) category of the	(check only one)		only one)	
			Summary Page			1b 22 <b>x</b> 23 26 27 8a 28b 28c 29 30b	
	ny information copied from such Reports and Stater						
or	for commercial purposes, other than using the name	ne and addr	ess of any polition	cal com	nmittee	e to solicit contributions from such committee.	
$ \rangle$	NAME OF COMMITTEE (In Full)  College of American Pathologists F	Political A	Action Com	mitte	e		
$\angle$							
Α.	Full Name (Last, First, Middle Initial) STIVERS FOR CONGRESS					Date of Disbursement	
	Mailing Address 1200 TRINITY DRIVE					08 26 2020	
	,	State VA	Zip Code			FEC Identification Number	
	ALEXANDRIA Purpose of Disbursement	VA	22314			C C00441352	
	•			1:		Transaction ID : SB23.58806	
	Candidate Name				egory/		
	Office Sought: 🗶 House Disburser	ment For: 2	2020	Ly	/pe	1000.00	
	Senate	Primary	<b>x</b> General			7 7 7	
	State: OH District: 15	Other (spec	cify) 🔻			Memo Item	
	Full Name (Last, First, Middle Initial)						
В.	TAMMY FOR ILLINOIS					Date of Disbursement	
	Mailing Address 124 WASHINGTON STREET				08 26 2020		
	SUITE 101					, , , , , , , , , , , , , , , , , , ,	
	City SOMBORO	State MA	Zip Code 02035		FEC Identification Number		
	Purpose of Disbursement				C C00574889		
	Candidate Name			السيا	Transaction ID : SB23.58809		
	Candidate Name			Category/ Type	Amount of Each Disbursement this Period		
		ment For: 2			•	1000.00	
	X Senate President	Primary Other (spec	General				
	State: IL District: 00	Other (oper	511 <b>y</b> )			Memo Item	
_	Full Name (Last, First, Middle Initial)						
C.	UPTON FOR ALL OF US			Date of Disbursement			
	Mailing Address 3410 ALABAMA AVENUE					08 26 2020	
	City	State	Zip Code			EEC Identification Number	
	ALEXANDRIA	VA	22305			FEC Identification Number	
	Purpose of Disbursement	Purpose of Disbursement				C C00200584	
	Candidate Name			Category/		Transaction ID : SB23.58811 Amount of Each Disbursement this Period	
	Office Sought:     House   Disburser	ment For: 2	2020		/pe	1000.00	
	Senate Dispurser	Primary	General		1555.55		
	President	Other (specify) ▼			Memo Item	Memo Item	
	State: MI District: 06						
8	SUBTOTAL of Disbursements This Page (optional)				▶	3000.00	
<u> </u>	OTAL This Deviced (f. s.					49500.00	
ιī	<b>OTAL</b> This Period (last page this line number only)	)				10000.00	