

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 PSYCHOLOGY PAC OF AMERICAN PSYCHOLOGICAL ASSOCIATION SERVICES INC.

ADDRESS (number and street) PO Box 15441 Washington DC 20003-0441

2. FEC IDENTIFICATION NUMBER C C00522094 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 03 / 01 / 2024 through 03 / 31 / 2024

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Phillips, Justin, , ,

Signature of Treasurer Phillips, Justin, , , Date 03 / 30 / 2024

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

PSYCHOLOGY PAC OF AMERICAN PSYCHOLOGICAL ASSOCIATION SERVICES INC.

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2024"/>		<input type="text" value="174667.18"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="201283.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="4639.41"/>	<input type="text" value="41256.23"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="205922.41"/>	<input type="text" value="215923.41"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="10000.00"/>	<input type="text" value="20001.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="195922.41"/>	<input type="text" value="195922.41"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

PSYCHOLOGY PAC OF AMERICAN PSYCHOLOGICAL ASSOCIATION SERVICES INC.

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	2975.00	25537.00
(ii) Unitemized	1664.41	15719.23
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	4639.41	41256.23
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	4639.41	41256.23
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	4639.41	41256.23
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	4639.41	41256.23

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10000.00	19500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	501.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	501.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. 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
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	10000.00	20001.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10000.00	20001.00

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

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)	4639.41	41256.23
34. Total Contribution Refunds (from Line 28(d))	0.00	501.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4639.41	40755.23
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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)	PAGE 6 OF 10
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
PSYCHOLOGY PAC OF AMERICAN PSYCHOLOGICAL ASSOCIATION SERVICES INC.

A. Worrell, Frank, C, , PhD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address University of California School Ps
 City Berkeley State CA Zip Code 94720-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) University of California, Berkeley Occupation (for Individual) Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 04 / 2024
Transaction ID : AC42B44C6755E40F48DF
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Robbins, Rosemary, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 W Sunset Dr
 City Wappingers Falls State NY Zip Code 12590-6931
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TeamHealth Occupation (for Individual) Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 06 / 2024
Transaction ID : A6C1477F09EFF446E958
 Amount of Each Receipt this Period 600.00
 Memo Item

C. Hellwig, Jane, Miller, Dr, PhD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1139 Royal Oak Dr
 City Chagrin Falls State OH Zip Code 44022-4135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Psychologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 10 / 2024
Transaction ID : AE1936A717A3B4260AFE
 Amount of Each Receipt this Period 600.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1700.00
TOTAL This Period (last page this line number only).....	

**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)	PAGE 7 OF 10
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
PSYCHOLOGY PAC OF AMERICAN PSYCHOLOGICAL ASSOCIATION SERVICES INC.

A. Metzler, Jonathan, Norman, Dr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 102 Rio Vista Dr
 City Georgetown State TX Zip Code 78626-4525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Magellan Federal Occupation (for Individual) Psychology of Performance & Resilienc
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 11 / 2024
Transaction ID : A0444CEC3B8D14CF5BC7
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Puente, Antonio, E, Dr., PhD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Department of Psychology University of North Carolina
 City Wilmington State NC Zip Code 28403-5730
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNCW Occupation (for Individual) Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 03 / 11 / 2024
Transaction ID : A365D7B90C1524036A77
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Brinson, LES, , Dr,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4617 Limerick Dr
 City Raleigh State NC Zip Code 27604-3525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Psychologist:/Professor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 17 / 2024
Transaction ID : A957DD6CEE174C6094F
 Amount of Each Receipt this Period 125.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	675.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 8 OF 10
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
PSYCHOLOGY PAC OF AMERICAN PSYCHOLOGICAL ASSOCIATION SERVICES INC.

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Oswald, Fred, , Dr.,

Mailing Address 2918 Stoney Brook Dr

City Houston	State TX	Zip Code 77063-4734
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Rice University	Occupation (for Individual) Professor
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		23		2024

Transaction ID : A1DEE15FC364241D98FC

Amount of Each Receipt this Period
600.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	2975.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PSYCHOLOGY PAC OF AMERICAN PSYCHOLOGICAL ASSOCIATION SERVICES INC.

Full Name (Last, First, Middle Initial)

A. Paul Tonko For Congress

Mailing Address 911 Central Avenue #221

City Albany State NY Zip Code 12206

Purpose of Disbursement
Contribution to Committee

Candidate Name

Tonko, Paul, D., Rep.,

Office Sought: House
 Senate
 President
State: NY District: 20

Disbursement For: 2024
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
03			06			2024			

FEC Identification Number

C C00450049

Transaction ID : BA4007324C

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. SCHAKOWSKY FOR CONGRESS

Mailing Address P.O. BOX 5130

City EVANSTON State IL Zip Code 60204

Purpose of Disbursement
Contribution to Committee

Candidate Name

Schakowsky, Jan, , Rep.,

Office Sought: House
 Senate
 President
State: IL District: 09

Disbursement For: 2024
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
03			07			2024			

FEC Identification Number

C C00327023

Transaction ID : BF33541C777

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. MICHELLE STEEL FOR CONGRESS

Mailing Address 220 West Windsor Ave

City Alexandria State VA Zip Code 22301-1518

Purpose of Disbursement
Contribution to Committee

Candidate Name

Steel, Michelle, , Rep.,

Office Sought: House
 Senate
 President
State: CA District: 45

Disbursement For: 2024
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
03			14			2024			

FEC Identification Number

C C00704981

Transaction ID : BA8FFED1B

Amount of Each Disbursement this Period

2500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

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

7500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PSYCHOLOGY PAC OF AMERICAN PSYCHOLOGICAL ASSOCIATION SERVICES INC.

Full Name (Last, First, Middle Initial)

A. ROBIN KELLY FOR CONGRESS

Mailing Address 413 New Jersey Ave. SE

City
Washington

State
DC

Zip Code
20003-4007

Purpose of Disbursement
Contribution to Committee

Candidate Name

Kelly, Robin, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2024
 Primary General
 Other (specify) ▼

State: IL District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	2	4

FEC Identification Number

C C00539866

Transaction ID : B37D897FF8!

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
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Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

--	--	--	--	--	--	--

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

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Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

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

2	5	0	0	.	0	0
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1	0	0	0	.	0	0
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