

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 the American Psychological Association Practice Organization

ADDRESS (number and street) PO Box 65353 Washington DC 20035 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00522094 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X] NEW (N) [ ] 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 [X], 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 05 / 01 / 2017 through 05 / 31 / 2017

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

Signature of Treasurer Mason, David, , , [Electronically Filed] Date 06 / 20 / 2017

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 the American Psychological Association Practice Organization

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="2017"/>	<input type="text" value="161261.99"/>	<input type="text" value="161261.99"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="180502.24"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="30224.55"/>	<input type="text" value="65059.55"/>
(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="210726.79"/>	<input type="text" value="226321.54"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="10844.57"/>	<input type="text" value="26439.32"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="199882.22"/>	<input type="text" value="199882.22"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> 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:**

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)

Page 3

Write or Type Committee Name

**Psychology PAC of the American Psychological Association Practice Organization**

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
05 / 01 / 2017 To: M M / D D / Y Y Y Y Y Y  
05 / 31 / 2017

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).....	10315.00	28225.00
(ii) Unitemized .....	19435.50	36360.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	29750.50	64585.50
(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) .....	29750.50	64585.50
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).....	474.05	474.05
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)).....▶	30224.55	65059.55
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	30224.55	65059.55

**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 .....	844.57	2439.32
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	844.57	2439.32
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10000.00	24000.00
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	0.00
(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	0.00
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)) ..	10844.57	26439.32
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10844.57	26439.32

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	29750.50	64585.50
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	29750.50	64585.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	844.57	2439.32
37. Offsets to Operating Expenditures (from Line 15, page 3).....	474.05	474.05
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	370.52	1965.27

**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 16
<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 the American Psychological Association Practice Organization**

**A. Stark, Trisha, A, Dr, PhD**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 47 Groveland Ter  
 City Minneapolis State MN Zip Code 55403-1104  
 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 ▼ 5000.00

Date of Receipt 05 / 07 / 2017  
**Transaction ID : AC4FF782939F84AC3A80**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**B. Norcross, John, C, Dr, PhD**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Dept of Psychology Univ of Scranton  
 City Scranton State PA Zip Code 18510-4596  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) University of Scranton Occupation (for Individual) Psychologist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt 05 / 08 / 2017  
**Transaction ID : A59535304154D4D1EB35**  
 Amount of Each Receipt this Period 365.00  
 Memo Item

**C. Sammons, Morgan, T, , PhD**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address National Register Of Health Servic 1200 New York Ave Nw Ste 800  
 City Washington State DC Zip Code 20005-6142  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Psychologist  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 10 / 2017  
**Transaction ID : A33EB508FAE334C7481F**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5465.00
<b>TOTAL</b> 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 16
<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 the American Psychological Association Practice Organization**

**A. Nguyen, Annie, Ha, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 640  
 City Kailua State HI Zip Code 96734-0640  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-employed Occupation (for Individual) Psychologist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 10 / 2017  
**Transaction ID : AAA370CD4F88740BB866**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. Gross, Seymour, Z, Dr, PhD**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1941 Drew Ave S  
 City Minneapolis State MN Zip Code 55416-3617  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Hennepin County Occupation (for Individual) Clinical Psychologist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 05 / 16 / 2017  
**Transaction ID : AD78909DF2EB3476F8E2**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. DiGiulio, Diane, V, Dr,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8024 Poppy Ct  
 City Juneau State AK Zip Code 99801-8779  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Private practice Occupation (for Individual) clinical Neuropsychologist  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 16 / 2017  
**Transaction ID : A0246344B9A5245619AE**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1100.00
<b>TOTAL</b> 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 8 OF 16
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Psychology PAC of the American Psychological Association Practice Organization**

**A. Kotlarz, Gregory, , Dr.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 221 S Main St  
Ste 201

City Royal Oak State MI Zip Code 48067-2653

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

Name of Employer (for Individual) Seniors Wellness Group of Michigan,P.C Occupation (for Individual) Psychologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 17 / 2017  
Transaction ID : **A01969E99CDF84AFD9F9**

Amount of Each Receipt this Period 250.00

Memo Item

**B. Zilber, Suzanne, M, Dr, PhD**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Catalyst Counslg Plc  
600 5th St Ste 302

City Ames State IA Zip Code 50010-6072

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

Name of Employer (for Individual) Catalyst Consulting Occupation (for Individual) Psychologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 22 / 2017  
Transaction ID : **AF371D033DBFC4AB0B35**

Amount of Each Receipt this Period 250.00

Memo Item

**C. Douce, Louise, Ann, Dr, PhD**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4707 Blue Church Rd

City Sunbury State OH Zip Code 43074-9519

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

Name of Employer (for Individual) The Ohio State University Occupation (for Individual) Psychologist

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 22 / 2017  
Transaction ID : **A80C92E60261E4659AD4**

Amount of Each Receipt this Period 250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	750.00
<b>TOTAL</b> 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 9 OF 16
<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 the American Psychological Association Practice Organization**

**A. Judy Miller Psyd LLC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10380 SW Canterbury Ln

City Portland	State OR	Zip Code 97224-4810
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2017

**Transaction ID : A08D900C6D280425E8E6**

Amount of Each Receipt this Period  
500.00

Memo Item

**B. Hill, Edwin, L, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2013 S 19th St

City Tacoma	State WA	Zip Code 98405-2920
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Advanced Behavioral Medicine	Occupation (for Individual) Psychologist
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2017

**Transaction ID : AECB8E7301F1643D9A23**

Amount of Each Receipt this Period  
250.00

Memo Item

**C. Auerbach, Anita, L, , PhD**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Director  
Commowwealth Psychological Assoc P

City Mclean	State VA	Zip Code 22101-4549
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Virginia Psychological Association	Occupation (for Individual) Director
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2017

**Transaction ID : A47CA1B0EC5FB4577908**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> 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 10 OF 16
<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 the American Psychological Association Practice Organization**

**A. Sheras, Peter, L, Dr., PhD**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 100 E South St  
 Ste 5  
 City Charlottesville State VA Zip Code 22902-5217  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Virginia Psychological Association Occupation (for Individual) Psychologist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 22 / 2017  
**Transaction ID : AE7ED468F4EAC43CB910**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Bellwoar, Vincent, J, Dr, PhD**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1489 Baltimore Pike  
 Ste 250  
 City Springfield State PA Zip Code 19064-3974  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Springfield Psychological Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 22 / 2017  
**Transaction ID : AE4CDE8DF73CE4DAF87E**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Vasquez, Melba, J, , PhD**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2901 Bee Caves Rd  
 Ste N  
 City Austin State TX Zip Code 78746-5571  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Psychologist  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 22 / 2017  
**Transaction ID : AF1FC661BC9AF4C87819**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> 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 11 OF 16
<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 the American Psychological Association Practice Organization**

**A. Worrell, Frank, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4511 Tolman Hall MC1670 School Psy  
 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, Berkley Occupation (for Individual) Professor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 22 / 2017  
**Transaction ID : A6F21B68E948947479A0**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Barr, Charles, Russell, Dr, PhD**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 131 N El Molino Ave Ste 220  
 City Pasadena State CA Zip Code 91101-1877  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Psychologist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 22 / 2017  
**Transaction ID : A0FC095B215994AB7802**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Malik, Mary, Loretta, , PhD**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1060 Willow Cir Ste E  
 City San Luis Obispo State CA Zip Code 93401-7177  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Psychologist  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 22 / 2017  
**Transaction ID : ADA3B4A1673514044A27**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	10315.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 OF 16  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**Psychology PAC of the American Psychological Association Practice Organization**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
American Psychological Association Practice Organization

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
474.05

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2017

**Transaction ID : AC36DBC436C214EC5937**

Amount of Each Receipt this Period  
474.05

Memo Item  
Reimbursement for PAC Expenses

**B.** 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)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
MM / DD / YYYY

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)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	474.05
<b>TOTAL</b> This Period (last page this line number only).....	474.05

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 the American Psychological Association Practice Organization**

Full Name (Last, First, Middle Initial)

**A. Aristotle International, Inc.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		01		2017

Mailing Address 205 Pennsylvania Ave SE

FEC Identification Number

C
---

**Transaction ID : BEA8EF630A**  
Amount of Each Disbursement this Period

30.00
-------

Memo Item

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement  
Credit Card Processing Fees

--

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. BB&T**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		26		2017

Mailing Address 300 S Washington St

FEC Identification Number

C
---

**Transaction ID : B2741266750**  
Amount of Each Disbursement this Period

50.00
-------

Memo Item

City Alexandria State VA Zip Code 22314-5403

Purpose of Disbursement  
Bank Fees

--

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Aristotle International, Inc.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		31		2017

Mailing Address 205 Pennsylvania Ave SE

FEC Identification Number

C
---

**Transaction ID : B4F248F36D**  
Amount of Each Disbursement this Period

764.57
--------

Memo Item

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement  
Credit Card Processing Fees

--

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

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

844.57
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**TOTAL** This Period (last page this line number only)..... ▶

844.57
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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 the American Psychological Association Practice Organization**

Full Name (Last, First, Middle Initial)

**A. Wyden for Senate**

Mailing Address 3612 Newark Street NW

City  
Portland

State  
OR

Zip Code  
97217-7435

Purpose of Disbursement  
Contribution to Committee

Candidate Name

**Wyden, Ron, , Sen.,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2022  
 Primary  General  
 Other (specify) ▼

State: OR District:

Date of Disbursement

MM / DD / YYYY  
05 / 01 / 2017

FEC Identification Number

**C** C00308676

**Transaction ID : B22AE2EA41**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Kind for Congress Committee**

Mailing Address Attn: Vanessa Ide  
233 Pennsylvania Avenue, SE

City  
Washington

State  
DC

Zip Code  
20003-1121

Purpose of Disbursement  
Contribution to Committee

Candidate Name

**Kind, Ron, J., Rep.,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify)

State: WI District: 03

Date of Disbursement

MM / DD / YYYY  
05 / 01 / 2017

FEC Identification Number

**C** C00312017

**Transaction ID : B281E8AEC4**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Paul Tonko For Congress**

Mailing Address 911 Central Avenue #221

City  
Albany

State  
NY

Zip Code  
12206-1350

Purpose of Disbursement  
Contribution to Committee

Candidate Name

**Tonko, Paul, D., Rep.,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: NY District: 20

Date of Disbursement

MM / DD / YYYY  
05 / 01 / 2017

FEC Identification Number

**C** C00450049

**Transaction ID : B6B1B127E5**

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

3000.00

**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 the American Psychological Association Practice Organization**

Full Name (Last, First, Middle Initial)

**A. Upton for Us All**

Mailing Address 104 Hume Avenue

City  
Alexandria

State  
VA

Zip Code  
22301-1015

Purpose of Disbursement  
Contribution to Committee

Candidate Name

**Upton, Fred, S., Rep.,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: MI District: 06

Date of Disbursement

MM / DD / YYYY  
05 / 01 / 2017

FEC Identification Number

C C00200584

**Transaction ID : B7FCCA607E**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Rounds for Senate**

Mailing Address c/o Paula Dukes  
22 Rio Vista Lane

City  
Richmond

State  
VA

Zip Code  
23226-2315

Purpose of Disbursement  
Contribution to Committee

Candidate Name

**Rounds, Mike, , Sen.,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2020  
 Primary  General  
 Other (specify)

State: SD District:

Date of Disbursement

MM / DD / YYYY  
05 / 05 / 2017

FEC Identification Number

C C00532465

**Transaction ID : B177AE31323**

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Nancy Pelosi for Congress**

Mailing Address c/o Amy Soenksen  
430 South Capitol Street SE

City  
Washington

State  
DC

Zip Code  
20003-4024

Purpose of Disbursement  
Contribution to Committee

Candidate Name

**Pelosi, Nancy, , Rep.,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: CA District: 12

Date of Disbursement

MM / DD / YYYY  
05 / 05 / 2017

FEC Identification Number

C C00213512

**Transaction ID : B3FB972B16**

Amount of Each Disbursement this Period

1000.00

Memo Item

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

5000.00

**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  
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 the American Psychological Association Practice Organization**

Full Name (Last, First, Middle Initial)

**A. Lance for Congress**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		05		2017

Mailing Address 1006 Pendleton St.

FEC Identification Number

C	C00444224
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**Transaction ID : B713A00BEE**  
Amount of Each Disbursement this Period

1000.00
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Memo Item

City  
Alexandria

State  
VA

Zip Code  
22314-1837

Purpose of Disbursement  
Contribution to Committee

Category/ Type
-------------------

Candidate Name

**Lance, Leonard, , Rep.,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: NJ District: 07

Full Name (Last, First, Middle Initial)

**B. LUCILLE ROYBAL-ALLARD FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		26		2017

Mailing Address 6 E STREET, SE

FEC Identification Number

C	C00259143
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**Transaction ID : B93E2DE68D**  
Amount of Each Disbursement this Period

1000.00
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Memo Item

City  
WASHINGTON

State  
DC

Zip Code  
20003

Purpose of Disbursement

Category/ Type
-------------------

Candidate Name

**Roybal-Allard, Lucille, , Rep.,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: CA District: 40

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Mailing Address

FEC Identification Number

C	
---	--

Amount of Each Disbursement this Period

--

Memo Item

City

State

Zip Code

Purpose of Disbursement

Category/ Type
-------------------

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

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

2000.00
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**TOTAL** This Period (last page this line number only)..... ▶

10000.00
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