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### FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines College of American Pathologists Political Action Committee 1350 I Street, NW ADDRESS (number and street) Suite 590 Check if different than previously Washington DC 20005 reported. (ACC) FEC IDENTIFICATION NUMBER STATE. CITY A ZIPCODE A IS THIS **AMENDED** NEW C00274944 Х REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Х Runoff (30R) Post -Election General (30G) Special (30S) Report for the: Termination Report (TER) in the 07 2006 11 Election on State of 10 19 2006 27 2006 11 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Dr. Alfred Wray Campbell Type or Print Name of Treasurer Electronically Filed by Dr. Alfred Wray Campbell 12 07 2006 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 02/2003) Only

### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

R	eport Covering the Period: From:	19 2006	To: 11 27 2006
	_	COLUMN A This Period	COLUMN B Calendar Year-to-Date
	(a) Cash on Hand  January 1  Y2006		46180.02
	(b) Cash on Hand at Begining of Reporting Period	8274.79	
	(c) Total Receipts (from Line 19)	53900.00	338787.80
	(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	62174.79	384967.82
	Total Disbursements (from Line 31)	21950.90	344743.93
	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	40223.89	40223.89
	Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
	Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

### 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. 02/2003) Page 3

Write or Type Committee Name

(subtract Line 18(c) from Line 19) .....

College of American Pathologists Political Action Committee

1 9 м м 1 0 м м 1 1 2<sup>D</sup>7 2006 2006 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 38235.00 224790.00 (i) Itemized (use Schedule A) ...... 14665.00 112997.80 (ii) Unitemized ..... (iii) TOTAL (add 52900.00 337787.80 Lines 11(a)(i) and (ii) ...... 0.00 0.00 (b) Political Party Committees ..... Other Political Committees 0.00 0.00 (such as PACs) ..... Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 52900.00 337787.80 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 1000.00 1000.00 Political Committees ..... 17. Other Federal Receipts 0.00 0.00 (Dividends, Interest, etc.) ..... 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) ...... 0.00 0.00 (c) Total Transfer (add 18(a) and 18(b)). 19. Total Receipts (add Lines 11(d), 53900.00 338787.80 12, 13, 14, 15, 16, 17, and 18(c)) ..... 20. Total Federal Receipts

53900.00

338787.80

### **DETAILED SUMMARY PAGE**

of Disbursements

Page 4

FEC Form 3X (Rev. 02/2003)

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Shared Federal/Non-Federal		
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating  Expenditures	1200.90	5793.93
	(c) Total Operating Expenditures		
	(add 21(a)(i), (a)(ii) and (b))	1200.90	5793.93
2.	Transfers to Affiliated/Other Party Committees	0.00	0.00
3.	Contributions to	0.00	
	Federal Candidates/Committeesand Other Political Committees	20750.00	338950.00
4.	Independent Expenditure	0.00	0.00
5.	(use Schedule E)		3.00
	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
6.	Loan Repayments Made	0.00	0.00
7.	Loans Made	0.00	0.00
8.	Refunds of Contributions To: (a) Individuals/Persons Other	0.00	0.00
	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
9.	Other Disbursements	0.00	0.00
0	Federal Election Activity (2 U.S.C 431(20))		
٠.	(a) Shared Federal Election Activity		
	(from Schedule H6)	0.00	0.00
	(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
1.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	21950.90	344743.93
2.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) from Line 30(a)(ii)	04050.00	044740.00
	from Line 31)	21950.90	344743.93

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	52900.00	337787.80
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	52900.00	337787.80
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1200.90	5793.93
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	1200.90	5793.93

SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 6 / 47
		Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12
		Detailed Guillinary Fage	13 14 15 16 17
Any information copied from such Reports and Sta	atements may	y not be sold or used by any perso	on for the purpose of soliciting contributions
or for commercial purposes, other than using the r	name and add	dress of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
College of American Pathologists Politic	cal Action (	Committee	
/			
Full Name (Last, First, Middle Initial)			
S. Shanti Agarwal, Dr.			Date of Receipt
Mailing Address Department of Patholog	У		10 27 2006
PO Box 1150	01-1-	7's Oads	
City	State	Zip Code	Transaction ID: SA11A1.22564
Loxahatchee	<u>FL</u>	33470	Amount of Each Receipt this Period
FEC ID number of contributing	С		250.00
federal political committee.			
Name of Employer	Occupation	n	7
Name of Employer Palms West Hosp	Patholog		
Receipt For:		e Year-to-Date ▼	
Primary General	199.19		1
Other (specify) ▼		250.00	
			1
Full Name (Last, First, Middle Initial)			
3. R Ted Allred, Dr.			Date of Receipt
Mailing Address Dept of Pathology			M M / D D / Y Y Y Y
7400 Osborn Rd			10 20 2006
City	State	Zip Code	Transaction ID: SA11A1.22522
<u>Scottsdale</u>	AZ	85251	Amount of Each Receipt this Period
FEC ID number of contributing			700.00
federal political committee.	С		700.00
Name of Franksia			4
Name of Employer Scottsdale Health Care	Occupation		
Receipt For:	Patholog	e Year-to-Date <b>V</b>	$\dashv$
Primary General	Aggregate	e rear-to-Date V	,
Other (specify)	' '	700.00	
Carior (opcomy) 🔻			
Full Name (Last, First, Middle Initial)			
C. Taha Salaam Alobeidy, Dr.			Date of Receipt
Mailing Address 18 W New York Ave			M M / D D / Y Y Y Y
			11 16 2006
City	State	Zip Code	Transaction ID: SA11A1.22734
Somers Point	NJ	08244-1800	Amount of Each Receipt this Period
FEC ID number of contributing			E25.00
federal political committee.	С		535.00
Name of Franksia	10		4
Name of Employer Atlantic Shore Pulmonary	Occupation		
Assoc	Patholog		$\dashv$
Receipt For:  Primary General	Aggregate	e Year-to-Date ▼	,
Other (specify)	' '	535.00	
			1
L			
SUBTOTAL of Receipts This Page (optional)			1485.00
COSTOTAL OF HOSCIPIO THIS Fage (optional)		······································	
TOTAL This Period (last page this line number o	nly)	<b>)</b>	

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 7 / 47
	EMIZED RECEIPTS		or each category of the	(check only one)
•••	LIMIZED RECEIPTS		Detailed Summary Page	X   11a   11b   11c   12
	information and the second December and Obs			13 14 15 16 17
or	y information copied from such Reports and Sta for commercial purposes, other than using the n	atements may	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)		_	
$\angle$	College of American Pathologists Politic	cal Action (	Committee	
A.	Full Name (Last, First, Middle Initial) F Dale Andres, Dr.			Date of Receipt
	Mailing Address Lab 1111 6th Ave			11 19 2006
	City	State	Zip Code	Transaction ID: SA11A1.22795
	Des Moines	IA	50314-2611	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1750.00
	Name of Employer Mercy Med Ctr-Des Moines	Occupation Patholog		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General	, , ,	1750.00	1
	Other (specify)	0 0	1 1 1 1 1 1 1	J.
— В.	Full Name (Last, First, Middle Initial) A. Donald Antonioli, Dr.			Date of Receipt
	Mailing Address Department of Patholog 330 Brookline Avenue	у		10 DD / YYYYY 10 27 2006
	City	State	Zip Code	Transaction ID: SA11A1.22536
	Boston	MA	02215	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		535.00
	Name of Employer Beth Israel Deaconess Med Ctr	Occupation Patholog		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General	, ,	535.00	1
	Other (specify) ▼	0 0	000.00	]
<u> </u>	Full Name (Last, First, Middle Initial) Nadarajah Balasubramaniam			Date of Receipt
	Mailing Address Dept. of Pathology 1101 Nott St.			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.22770
	Schenectady	NY	12308	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Ellis Hospital	Occupation Patholog		
	Receipt For:		e Year-to-Date ▼	$\dashv$
	Primary General	3333		1
	Other (specify) ▼	0 0	1000.00	]
[ e	UBTOTAL of Receipts This Page (optional)			3285.00
13	Upiloliai)			

S	CHEDULE A (FEC Form 3X)	DULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 8 / 47
	•		Use separate schedule(s)	(check only one)
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Ar	ry information copied from such Reports and Sta	atements may	not be sold or used by any perso	
or	for commercial purposes, other than using the r	name and add	lress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	` ,	aal Aatian C	No ma ma itt o a	
/	College of American Pathologists Politic	cai Action C	Committee	
<u>/_</u>	Full Name (Last First Middle Initial)			1
Δ	Full Name (Last, First, Middle Initial)  A. Carl Barnes, Dr.			Date of Receipt
<i>~</i> .	Mailing Address PO Box 1179			M M / D D / Y Y Y Y
	Walling Address PO Box 1179			10 2006
	City	State	Zip Code	Transaction ID: SA11A1.22662
	Florence	AL	35631-1179	
		AL	33031-1179	Amount of Each Receipt this Period
	FEC ID number of contributing	C		250.00
	federal political committee.			
	Name of Employer	Occupation	<u> </u>	_
	Name of Employer Eliza Coffee Memorial Hos-	Pathologi		
	pital Receipt For:		Year-to-Date ▼	
	Primary General	Aggregate	Teal-to-Date V	
	Other (specify)		350.00	
	Curer (Specify)			
_	Full Name (Last First Middle Initial)			
B.	Full Name (Last, First, Middle Initial) E James Beecham. Dr.			Date of Receipt
	Mailing Address 1101 N Rainbow Blvd			M M / D D / Y Y Y Y
	Apt 39			1 1 7 2 0 0 6
	City	State	Zip Code	Transaction ID: SA11A1.22777
	Las Vegas	NV	89108	Amount of Each Receipt this Period
		111	90.00	Amount of Each recorpt this remod
	FEC ID number of contributing federal political committee.	C		250.00
	rodoral political committees.			
	Name of Employer	Occupation	1	
	Laboratory Medicine Consultants, Ltd	Pathologi	st	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	1 1	050.00	1
	Other (specify)		250.00	
_	Full Name (Last, First, Middle Initial)			
C.	Ira Michael Belenko, Dr.			Date of Receipt
	Mailing Address Pathology Department			10 27 Y Y Y Y Y Y Y Y
	777 Rural Ave	01-1-	7:- 0 - 4 -	
	City	State	Zip Code	Transaction ID: SA11A1.22586
	Williamsport	PA	17701	Amount of Each Receipt this Period
	FEC ID number of contributing	C		300.00
	federal political committee.	0		
	Name of Employer	Occupation	1	-
		Pathologi		
	Receipt For:		Year-to-Date ▼	_
	Primary General	gg. ogulo		1
	Other (specify)		300.00	
				1
_	IIDTOTAL of December This December 19			800.00
L	UBTOTAL of Receipts This Page (optional)		······	
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SCHI	EDULE A (FEC Form 3X)		Use separate schedule(s)	Check only one)
ITEM	IZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Any info	ormation copied from such Reports and Statommercial purposes, other than using the na	ements may ame and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
\ NAN	ME OF COMMITTEE (In Full)			
Col	lege of American Pathologists Politic	al Action (	Committee	_
	Name (Last, First, Middle Initial) d Brent Benjamin, Dr.			Date of Receipt
Mailing Address 1280 116th Ave NE Ste 100		100		11 22 7 2006
City		State	Zip Code	Transaction ID: SA11A1.22821
	levue	WA	98004-3803	Amount of Each Receipt this Period
	ID number of contributing ral political committee.	C		250.00
Nam Eas PS	ne of Employer tside Pathology Inc,	Occupation Pathologic		
	eipt For:	Aggregate	Year-to-Date ▼	
	Primary		250.00	
	Name (Last, First, Middle Initial) aurence Berg, Dr.			Date of Receipt
	ing Address Department of Pathology 1900 South Ave			11 09 7 2006
City	Crosse	State WI	Zip Code	Transaction ID: SA11A1.22623
	ID number of contributing		54601	Amount of Each Receipt this Period
fede	ral political committee.	C		100.00
Nam Gun	ne of Employer Idersen Lutheran Med Ctr	Occupation Pathologic		
Rec	eipt For:		Year-to-Date ▼	
	Primary General		250.00	
	Other (specify) 🔻	0 0		
_	Name (Last, First, Middle Initial) arl Biesemier, Dr.			Date of Receipt
	ing Address 1705 Atherholt Rd			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		State	Zip Code	Transaction ID: SA11A1.22750
	chburg	VA	24501	Amount of Each Receipt this Period
	ID number of contributing ral political committee.	C		535.00
Nam Path	ne of Employer nology Consultants of	Occupation		
<u>Cen</u>	tral VA eipt For:	Pathologi Aggregate	Year-to-Date ▼	-
	Primary General	33. 334.0		
	Other (specify) ▼		535.00	
SUBT	OTAL of Receipts This Page (optional)			885.00
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IUIA	L This Period (last page this line number on	ıy)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER:	PAGE 10/47
	EMIZED RECEIPTS		or each category of the	(check only one)	] 440 🖂 40
-			Detailed Summary Page	X 11a 11b 1	11c 12 15 16 17
An	y information copied from such Reports and State for commercial purposes, other than using the na	ements may	not be sold or used by any perso		
or		me and add	dress of any political committee to	solicit contributions from s	such committee.
$\setminus$	NAME OF COMMITTEE (In Full)	. 1. 4 . 15	S		
/	College of American Pathologists Politica	al Action C	Committee		
	Full Name (Last, First, Middle Initial)				
۹.	M. Stephen Bologna, Dr.			Date of Receipt	
	Mailing Address Department of Pathology 1406 6th Avenue, North			1 1 1 0	2006
	City	State	Zip Code	Transaction ID: SA	11A1.22652
	St Cloud	MN	56303	Amount of Each Red	
	FEC ID number of contributing	С			250.00
	federal political committee.				
	Name of Employer CentraCare Laboratory Ser-	Occupation		7	
	vices	Patholog			
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼		
	Other (specify)		250.00		
,	Full Name (Last, First, Middle Initial)			Data of Danaist	
3.	A. David Brinker, Dr.  Mailing Address Department of Pathology	,		Date of Receipt	/ Y Y Y Y Y
	7601 Osler Dr			11 1 10	2006
	City	State	Zip Code	Transaction ID: SA	11A1.22707
	Towson	MD	21204	Amount of Each Red	ceipt this Period
	FEC ID number of contributing federal political committee.	С			250.00
	·				
	Name of Employer St. Joseph Med Ctr	Occupation Patholog			
	Receipt For:		e Year-to-Date ▼		
	Primary General	133.13		1	
	Other (specify) ▼		250.00		
	Full Name (Last First Middle Leitel)			1	
Э.	Full Name (Last, First, Middle Initial) David Mark Brissette, Dr.			Date of Receipt	
	Mailing Address 8320 Colesville Rd Apt 1	04		M M / D D	/ Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA	2006
	Silver Spring	MD	20910-6364	Amount of Each Rec	
	FEC ID number of contributing			7 tillount of Edolf floor	<del> </del>
	federal political committee.	C			250.00
	Name of Employer	Occupation	<u> </u>	┥	
	Walter Reed Army Med Ctr	Patholog	ist		
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼	, , ,	250.00		
	□ Other (specify) ₩		0 0 0 0 0 0 0		
S	UBTOTAL of Receipts This Page (optional)		······		750.00
_	OTAL This David (look some this Personal Land	I. A			
- 11	OTAL This Period (last page this line number on	ıy)	<b>&gt;</b>		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 47 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\rangle$	NAME OF COMMITTEE (In Full) College of American Pathologists Political	al Action (	Committee	
۹.	Full Name (Last, First, Middle Initial) Christopher Bullock  Mailing Address Department of Pathology 1501 W Chisholm St	1		Date of Receipt  M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.22641
	Alpena FEC ID number of contributing federal political committee.	C	49707-1498	Amount of Each Receipt this Period  250.00
	Name of Employer Alpena Reg Med Ctr  Receipt For:  Primary General  Other (specify) ▼	Occupation Patholog Aggregate		
3.	Full Name (Last, First, Middle Initial) B. James Cash, Dr.  Mailing Address Laboratory Po Box 3898  City	State	Zip Code	Date of Receipt    M
	Wilson FEC ID number of contributing federal political committee.	NC C	27895	Amount of Each Receipt this Period 250.00
	Name of Employer Eastern Carolina Patholog- y, Inc Receipt For:  Primary General Other (specify) ▼	Occupation Patholog Aggregate		
 C.	Full Name (Last, First, Middle Initial) Alexander Castiello			Date of Receipt
	Mailing Address Admin Dept 1602 Hatcher Ln City	State	Zip Code	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Columbia  FEC ID number of contributing federal political committee.	C	38401-4827	Amount of Each Receipt this Period  250.00
	Name of Employer Pathology Corp of America Southeast Receipt For: Primary General Other (specify)	Occupation Patholog Aggregate		
s	UBTOTAL of Receipts This Page (optional)			750.00
T	OTAL This Period (last page this line number on	lv)		

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 12 / 47
TEMIZED RECEIPTS		or each category of the	(check only one)
		Detailed Summary Page	X   11a   11b   11c   12   15   16   17
Any information copied from such Reports and Sta or for commercial purposes, other than using the n	tements may	not be sold or used by any perso	
	ame and add	dress of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		2	
College of American Pathologists Politic	cal Action (	Committee	
Full Name (Last, First, Middle Initial)			
A. Lizardo Cerezo  Mailing Address Dept of Path			Date of Receipt
Mailing Address Dept of Path 1414 Kuhl Ave			10 20 2006
City	State	Zip Code	Transaction ID: SA11A1.22518
Orlando	FL	32806-2115	Amount of Each Receipt this Period
FEC ID number of contributing	С		500.00
federal political committee.			
Name of Employer Orlando Regional Med Ctr	Occupation		
Receipt For:	Patholog	e Year-to-Date ▼	$\dashv$
Primary General	Aggregate		
Other (specify) ▼		500.00	
Full Name (Last, First, Middle Initial)  3. J. Carmine Cerra, Dr.			Date of Receipt
Mailing Address Department of Pathology	у		M M / D D / Y Y Y Y
206 E. Brown Street		7: 0 1	11 09 2006
City  East Stroudsburg	State DA	Zip Code	Transaction ID: SA11A1.22628
East Stroudsburg	PA	18301	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer	Occupation	2	
Name of Employer Pocono Med Ctr	Occupation Patholog		
Receipt For:		e Year-to-Date ▼	1
Primary General		350.00	
Other (specify)		350.00	
Full Name (Last, First, Middle Initial)			
M. James Chiadis, Dr.			Date of Receipt
Mailing Address 4416 Tracey Lane			1 1 1 0 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: SA11A1.22693
<u>Bethlehem</u>	PA	18017	Amount of Each Receipt this Period
FEC ID number of contributing			500.00
federal political committee.	С		300.00
Name of Employer Sacred Heart Hosp	Occupation		7
· · · · · · · · · · · · · · · · · · ·	Patholog		
Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
Other (specify)		500.00	
			1250.00
SUBTOTAL of Receipts This Page (optional)		<u> </u>	1230.00
TOTAL This Period (last page this line number or	ah.A	<b>&gt;</b>	. [

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 13 / 47
			Use separate schedule(s) or each category of the	(check only one)
Ш	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
			, ,	13 14 15 16 17
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the r	tements may	not be sold or used by any perso	on for the purpose of soliciting contributions
or		ame and add	aress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$\angle$	College of American Pathologists Politic	cal Action C	Jommittee	
Α.	Full Name (Last, First, Middle Initial) S Larry Cribbett, Dr.			Date of Receipt
	Mailing Address 8150 Chancellor Dr Ste	110		1 1 1 6 2 0 0 6
	City	State	Zip Code	Transaction ID: SA11A1.22732
	Orlando	FL	32809-7665	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		250.00
	Name of Employer AmeriPath	Occupation Pathologi		
	Receipt For:		Year-to-Date ▼	
	Primary General	33 13		1
	Other (specify) ▼	1	250.00	
В.	Full Name (Last, First, Middle Initial) Andrew Charles Daniels			Date of Receipt
	Mailing Address Dept of Path			M M / D D / Y Y Y
	2700 Wayne Mem Dr			11 16 2006
	City	State	Zip Code	Transaction ID: SA11A1.22758
	Goldsboro	NC	27534	Amount of Each Receipt this Period
	FEC ID number of contributing	С		750.00
	federal political committee.			
	Name of Employer	Occupation	1	
	Wayne Memoriál Hosp	Pathologi		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	' '	750.00	
	Other (specify)		1 1 1 1 1 1 1	
_	Full Name (Last, First, Middle Initial) H. Phillip Deos, Dr.			Date of Receipt
<b>U</b> .	Mailing Address 2625 Coffee Road			M M / D D / Y Y Y Y
	Zozo Conee Moad			11 10 2006
	City	State	Zip Code	Transaction ID: SA11A1.22723
	Modesto	CA	95355	Amount of Each Receipt this Period
	FEC ID number of contributing			300.00
	federal political committee.	C		300.00
	Name of Employer Yosemite Pathology Med Grp	Occupation		
		Pathologi		_
	Receipt For:  Primary  General	Aggregate	Year-to-Date ▼	,
	Other (specify)		300.00	
			0 0 0 0 0 0 0	1
	I			
s	UBTOTAL of Receipts This Page (optional)			1300.00
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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 47 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
Ar or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may ame and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) College of American Pathologists Politica	al Action (	Committee	
<b>A</b> .	Full Name (Last, First, Middle Initial)  M. Margaret Flanagan, Dr.  Mailing Address 50 Kenwood Road  City  Chambersburg  FEC ID number of contributing federal political committee.  Name of Employer The Chambersburg Hospital  Receipt For:  Primary General  Other (specify)	State PA  C Occupation Pathologi Aggregate		Date of Receipt  M M J 10 2006  Transaction ID: SA11A1.22712  Amount of Each Receipt this Period  100.00
3.	Full Name (Last, First, Middle Initial) A. Robert Frazier, Dr. Mailing Address 801 Boush St  City  Norfolk	State VA	Zip Code 23510	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	FEC ID number of contributing federal political committee.  Name of Employer Dominion Pathology Laboratories  Receipt For:  Primary General  Other (specify) ▼	Occupation Pathologi Aggregate		2500.00
<b>C</b> .	Full Name (Last, First, Middle Initial) M. Richard Fulks, Dr.  Mailing Address 1576 Clark Rd  City Charleston  FEC ID number of contributing federal political committee.  Name of Employer Thomas Mem Hosp  Receipt For: Primary General Other (specify)	State WV  C  Occupation Pathologi Aggregate		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
s	UBTOTAL of Receipts This Page (optional)			2800.00
T	OTAL This Period (last page this line number on	lv)		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 15 / 47
ITEMIZED RECEIPTS		or each category of the		(check only one)
TI LIVIIZED TIECEIF 13			Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Ar or	ny information copied from such Reports and St for commercial purposes, other than using the	atements may name and ado	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\setminus$	NAME OF COMMITTEE (In Full)			
$\rangle$	College of American Pathologists Politi	cal Action (	Committee	
Α.	Full Name (Last, First, Middle Initial) J. Michael Gandour, Dr.			Date of Receipt
	Mailing Address Dept of Path/Lab 4500 13th St			11 22 7 2006
	City	State	Zip Code	Transaction ID: SA11A1.22829
	Gulfport	MS	39501	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Memorial Hosp @ Gulfport	Occupation Pathologi		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		250.00	
	Other (specify) ▼	0 0	250.00	
В.	Full Name (Last, First, Middle Initial) M Paul Gibbs, Dr.			Date of Receipt
	Mailing Address 2308 Sandridge Dr			10 27 2006
	City	State	Zip Code	Transaction ID: SA11A1.22539
	Dayton	OH	45439-1856	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer CompuNet Clinical Labs	Occupation Pathologic		
	Receipt For:		Year-to-Date ▼	
	Primary General		050.00	
	Other (specify) ▼		250.00	
<u>с</u> .	Full Name (Last, First, Middle Initial) J. Phillip Haberman, Dr.			Date of Receipt
	Mailing Address 2301 House Ave. Suite 108			11 10 2006
	City	State	Zip Code	Transaction ID: SA11A1.22644
	Cheyenne	WY	82001-3177	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Anapath Diagnostics, Inc	Occupation Pathologi		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		500.00	
	Other (specify) ▼		500.00	
_				1
				1000.00
S	UBTOTAL of Receipts This Page (optional)		<u> </u>	1000.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 47 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Ar or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any persoress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) College of American Pathologists Politica	al Action C	Committee	
۹.	Full Name (Last, First, Middle Initial) Forbes John Hamilton, Dr.  Mailing Address Department of Pathology			Date of Receipt
	4440 West 95th Street			111 / 10 / 2006
	City Oak Lawn	State II	Zip Code 60453	Transaction ID: SA11A1.22640  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1 1 1 1 1	250.00
	Name of Employer Advocate Christ Medical Center Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Pathologi Aggregate		
3.	Full Name (Last, First, Middle Initial) H. M. Elizabeth Hammond, Dr.  Mailing Address Dept of Pathology 8th Ave and C St  City  Salt Lake City  FEC ID number of contributing federal political committee.  Name of Employer LDS Hosp  Receipt For: Primary General Other (specify)	State UT  C  Occupation Pathologi Aggregate		Date of Receipt  M M M / 22 2 2 006  Transaction ID: SA11A1.22826  Amount of Each Receipt this Period  250.00
Э.	Full Name (Last, First, Middle Initial) T. Clarke Harding, Dr.  Mailing Address 2007 Greenbrier Drive	Ctata	7in Code	Date of Receipt  1 1 7 2 0 0 6
	City Collinsville	State IL	Zip Code 62234	Transaction ID: SA11A1.22787  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
unoffiliated '		Occupation Pathologi		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
s	UBTOTAL of Receipts This Page (optional)			600.00
	<u> </u>			

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 17 / 47	
ITEMIZED RECEIPTS			or each category of the	(check only one)
••			Detailed Summary Page	X   11a     11b     11c     12     15     16     17
Δr	by information copied from such Reports and Sta	tements may	y not be sold or used by any perso	
or	y information copied from such Reports and Sta for commercial purposes, other than using the n	ame and add	dress of any political committee to	solicit contributions from such committee.
$\setminus$	NAME OF COMMITTEE (In Full)			
	College of American Pathologists Politic	cal Action C	Committee	
A.	Full Name (Last, First, Middle Initial) D. Jeff Harvell, Dr.			Date of Receipt
	Mailing Address Bethesda Dermatopathology 1730 Elton Road			11 20 2006
	City	State	Zip Code	Transaction ID: SA11A1.22806
	Silver Spring	MD	20903	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer unaffiliated	Occupation Pathologic		
	Receipt For:		Year-to-Date ▼	
	Primary General		250.00	1
	Other (specify) ▼	0 0	250.00	
В.	Full Name (Last, First, Middle Initial) R. Glenn Hessel			Date of Receipt
	Mailing Address 2800 W 95 th Street			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.22616
	Evergreen Park	IL	60805	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1000.00
	Name of Employer	Cocupation	,	
	Little Co. of Mary Hosp.	Occupation Pathologic		
	Receipt For:	,	Year-to-Date ▼	
	Primary General		1000.00	1
	Other (specify)	0 0	1000.00	
<u> </u>	Full Name (Last, First, Middle Initial) L. Brent Himes, Dr.			Date of Receipt
	Mailing Address One Genesys Parkway			M M / D D / Y Y Y
	City	State	Zip Code	1 0 2 0 2 0 0 6 Transaction ID: SA11A1.22508
	Grand Blanc	MI	48439-1477	Amount of Each Receipt this Period
	FEC ID number of contributing		1 1 1 1 1 1	
	federal political committee.	C		500.00
	Name of Employer Genesys Regional Med Ctr	Occupation Pathologic		
	Receipt For:	1	Year-to-Date <b>V</b>	_
	Primary General			1
	Other (specify) ▼		500.00	
Г	L			1650.00
S	UBTOTAL of Receipts This Page (optional)			1030.00
_	OTAL This Period (last page this line number o	nlv)		

9	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 18 / 47		
	•		Use separate schedule(s)	(check only one)		
ITEMIZED RECEIPTS			or each category of the Detailed Summary Page	X 11a 11b 11c 12		
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Ar or	ry information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	not be sold or used by any persolress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.		
$\setminus$	NAME OF COMMITTEE (In Full)					
$\rangle$	College of American Pathologists Politic	cal Action (	Committee			
Α.	Full Name (Last, First, Middle Initial) Lane Daniel Hood, Dr.			Date of Receipt		
	Mailing Address 6845 Penridge Rd			10 27 2006		
	City	State	Zip Code	Transaction ID: SA11A1.22537		
	Centerville	OH	45459-6604	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		500.00		
	Name of Employer Valley Pathology Inc	Occupation Pathologi				
	Receipt For:  Primary  General	Aggregate	Year-to-Date ▼	7		
	Other (specify) ▼	0 0	500.00			
В.	Full Name (Last, First, Middle Initial) L Jerry Hudson, Dr.			Date of Receipt		
	Mailing Address 7026 Edgewater Dr			1 1 1 0 2 0 0 6		
	City	State	Zip Code	Transaction ID: SA11A1.22695		
	Mandeville	LA	70471-7415	Amount of Each Receipt this Period		
	FEC ID number of contributing		1 1 1 1 1			
	federal political committee.	C		250.00		
	Name of Employer Slidell Memorial Hosp	Occupation Pathologic				
	Receipt For:	<u> </u>	Year-to-Date ▼			
	Primary General		050.00	7		
	Other (specify) ▼	0 0	250.00			
<u> </u>	Full Name (Last, First, Middle Initial) S. Peter Johnson, Dr.			Date of Receipt		
	Mailing Address Clinical Laboratory 1600 South Andrews Avenue			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: SA11A1.22647		
	Ft Lauderdale	FL	33316	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		250.00		
	Name of Employer Broward General Med Ctr	Occupation Pathologic		7		
	Receipt For:	Aggregate	Year-to-Date ▼			
	Primary General		250.00	1		
	Other (specify)		230.00	1		
_	LIDTOTAL of Desciots This Description 1			1000.00		
S	UBTOTAL of Receipts This Page (optional)					

SCHEDULE A (FEC Form 3X)			l la a consueta a chardula (a)	FOR LINE NUMBER: PAGE 19 / 47
ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	(check only one)
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
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An or	y information copied from such Reports and St for commercial purposes, other than using the	atements may name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	College of American Pathologists Politi	cal Action (	Committee	
_	Full Name (Last, First, Middle Initial)			B . (B
A.	Carl Randal Juengel, Dr.			Date of Receipt
	Mailing Address Department of Patholog 4401 S Western	Jy		11 03 2006
	City	State	Zip Code	Transaction ID: SA11A1.22605
	Oklahoma City	OK	73109	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		250.00
	Name of Employer	Occupation	 1	_
	Name of Employer Integris Southwest Medical Center	Pathologi		
	Receipt For:		Year-to-Date ▼	
	Primary General	1 1	250.00	1
	Other (specify)		250.00	
_	Full Name (Lant First Afficial Letter)			
В.	Full Name (Last, First, Middle Initial) Barry David Kaminsky, Dr.			Date of Receipt
	Mailing Address Pathology, Inc			M ' M / D ' D / Y ' Y ' Y ' Y
	1401 N Palm Canyon D			11 16 2006
	City	State	Zip Code	Transaction ID: SA11A1.22748
	Palm Springs	CA	92262	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		200.00
	Name of Employer	Occupation		
	Production I	Pathologi		
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	3
	Other (specify)		400.00	
		0 0		
_	Full Name (Last, First, Middle Initial)			2. (2
C.	F. Collins Kankam, Dr.  Mailing Address   Laboratory Services			Date of Receipt
	Mailing Address Laboratory Services 3300 Gallows Road			10 20 2006
	City	State	Zip Code	Transaction ID: SA11A1.22509
	Falls Church	VA	22046	Amount of Each Receipt this Period
	FEC ID number of contributing	С		500.00
	federal political committee.			555.55
	Name of Employer Inova Fairfax Hosp	Occupation	1	7
	Inova Fairtax Hosp	Patholog		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		500.00	]
	Other (specify)		000.00	1
١	UBTOTAL of Receipts This Page (optional)			950.00
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S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 20 / 47	
	·		Use separate schedule(s) or each category of the	(check only one)	
Ш	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12	
				13 14 15 16 17	
An	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	not be sold or used by any perso	on for the purpose of soliciting contributions	
or		ame and add	iress of any political committee to	solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full)				
	College of American Pathologists Politic	cal Action C	Committee		
Α.	Full Name (Last, First, Middle Initial) H. Ernest Kawamoto, Dr.			Date of Receipt	
	Mailing Address 1912 Everett Avenue			M M / D D / Y Y Y	
	City	Ctoto	7in Codo		
	City	State WA	Zip Code	Transaction ID: SA11A1.22814	
	Everett	VVA	98201	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		150.00	
	Name of Employer Associated Pathologists	Occupation Pathologi			
	Receipt For:		Year-to-Date ▼		
	Primary General	7 1991 09410		1	
	Other (specify)		300.00		
				4	
В.	Full Name (Last, First, Middle Initial) B. Susan Kern, Dr.			Date of Receipt	
	Mailing Address Department of Patholog	у		M M / D D / Y Y Y Y	
	800 W Central	01-1-	7'- 0-4-	10 20 2006	
	City	State	Zip Code	Transaction ID: SA11A1.22516	
	Arlington Heights	IL	60005-2392	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		250.00	
	· · · · · · · · · · · · · · · · · · ·	1			
	Name of Employer Northwest Community Hosp	Occupation Pathologi			
	Receipt For:		Year-to-Date <b>V</b>		
	Primary General	Aggregate	rear-to-Date V	1	
	Other (specify)		250.00		
		0 0	0 0 0 0 0 0 0	1	
C.	Full Name (Last, First, Middle Initial) Paul Kirchgraber			Date of Receipt	
	Mailing Address 5500 Highlands Pkwy S	10 27 2006			
	City	State	Zip Code	Transaction ID: SA11A1.22574	
	Smyrna	GA	30082	Amount of Each Receipt this Period	
	FEC ID number of contributing			250.00	
	federal political committee.	C		250.00	
	Name of Employer Quintiles Laboratories,	Occupation			
	Ltd. Receipt For:	Pathologi	St Year-to-Date ▼	_	
	Primary General	Aggregate	r rear-lu-Dale ▼	,	
	Other (specify)		250.00		
		-	0 0 0 0 0 0 0	1	
٩	UBTOTAL of Receipts This Page (optional)			650.00	
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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 21 / 4/
TEMIZED RECEIPTS		or each category of the	(check only one)  X 11a  11b  11c  12
		Detailed Summary Page	X   11a   11b   11c   12   15   16   17
Any information copied from such Reports and Stator for commercial purposes, other than using the na	on for the purpose of soliciting contributions		
NAME OF COMMITTEE (In Full)			
College of American Pathologists Politic	al Action (	Committee	
Full Name (Last, First, Middle Initial) L. Lynn Kleopfer, Dr.			Date of Receipt
Mailing Address 200 Portland St			1 1 1 7 2 0 0 6
City Columbia	State MO	Zip Code 65201-6525	Transaction ID: SA11A1.22762  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		03201 0323	250.00
Name of Employer Boyce & Bynum PS Inc	Occupation Pathologic		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial)  D Mark Kolins, Dr.			Date of Receipt
Mailing Address 3601 W. 13 Mile Road			11 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: SA11A1.22722
Royal Oak	MI	48073-6769	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer William Beaumont Hosp	Occupation Pathologic		
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		500.00	
Full Name (Last, First, Middle Initial)  R Paula Larson, Dr.			Date of Receipt
Mailing Address 7700 Floyd Curl Dr			11 1 10 / Y Y Y Y Y
City	State	Zip Code	Transaction ID: SA11A1.22697
San Antonio	TX	78229-3979	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Southwest Texas Methodist	Occupation Pathologic		
Hosp Receipt For:		Year-to-Date ▼	-
Primary General Other (specify) ▼	0 0	250.00	
SUBTOTAL of Receipts This Page (optional)			1000.00
TOTAL This Period (last page this line number or	nly)	<b></b>	

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 22 / 47	
	•		Use separate schedule(s) or each category of the	(check only one)	
П	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12	
				13 14 15 16 17	
Ar	y information copied from such Reports and Sta	tements may	not be sold or used by any perso	on for the purpose of soliciting contributions	
or	for commercial purposes, other than using the n	ame and add	lress of any political committee to	solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full)				
17	College of American Pathologists Politic	al Action C	Committee		
_	Full Name (Last, First, Middle Initial)				
A.	W Jessica Leiden, Dr.			Date of Receipt	
	Mailing Address 1105 20th St E			M M / D D / Y Y Y Y	
				10 25 2006	
	City	State	Zip Code	Transaction ID: SA11A1.22532	
	Tifton	GA	31794-3692	Amount of Each Receipt this Period	
	FEC ID number of contributing	С		250.00	
	federal political committee.				
	Name of Employer Tifton Pathological Srvcs	Occupation	1		
	PC	Pathologi	st		
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General		250.00	1	
	Other (specify)	0 0	200.00	J	
_	Full Name (Last, First, Middle Initial)				
В.	A Patrick Leoni, Dr.			Date of Receipt	
	Mailing Address Dept of Path			M M / D D / Y Y Y Y	
	9100 W 74th St			10 27 2006	
	City	State	Zip Code	Transaction ID: SA11A1.22575	
	Shawnee Mission	KS	66204-4019	Amount of Each Receipt this Period	
	FEC ID number of contributing	С		200.00	
	federal political committee.				
	Name of Employer	Occupation	1		
	Shawnee Mission Med Ctr	Pathologi	st		
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General	' '	300.00	1	
	Other (specify)	0 0	000.00	J	
_	Full Name (Last, First, Middle Initial)				
C.	Edwin Leschhorn	_		Date of Receipt	
	Mailing Address Meridian Health System			M M / D D / Y Y Y Y	
	Dept of Pathology		7: 0 1	11 01 2006	
	City	State	Zip Code	Transaction ID: SA11A1.22598	
	Red Bank	NJ	07701-7701	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		250.00	
	rederal political committee.				
	Name of Employer Riverview Medical Center	Occupation			
		Pathologi			
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General Other (specify) ▼		250.00		
	Curier (specify)	0 0	1 1 1 1 1 1 1	1	
ا (	JBTOTAL of Receipts This Page (optional)			700.00	
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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 23 / 47
TEMIZED RECEIPTS		or each category of the	(check only one)
		Detailed Summary Page	X   11a   11b   11c   12   15   16   17
Any information copied from such Reports and Sta or for commercial purposes, other than using the r	atements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)		,,	
College of American Pathologists Politic	cal Action (	Committee	
Full Name (Last, First, Middle Initial) C. John Maddox, Dr.			Date of Receipt
Mailing Address Department of Patholog 500 J. Clyde Morris Blvd	d.	7. 0.1	1 1 1 7 2 0 0 6
City Newport News	State VA	Zip Code 23601	Transaction ID: SA11A1.22781  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		100.00
Name of Employer Riverside Reg Med Ctr	Occupatio Patholog		
Receipt For:		e Year-to-Date ▼	
Primary General Other (specify) ▼		300.00	
Full Name (Last, First, Middle Initial)  M Thomas Mark, Dr.			Date of Receipt
Mailing Address Dept of Path 5000 University Dr			10 27 7 2006
City Coral Gables	State FL	Zip Code	Transaction ID: SA11A1.22558
		33146	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		535.00
Name of Employer Mark & Kambour Pathology	Occupation Patholog		
Associates Receipt For:		e Year-to-Date <b>V</b>	+
Primary General	00 0		1
Other (specify)	0 0	535.00	
Full Name (Last, First, Middle Initial)  S. Thomas Mego, Dr.			Date of Receipt
Mailing Address Department of Patholog 611 St. Landry Street	Jy		11 20 7 2006
City	State	Zip Code	Transaction ID: SA11A1.22803
Lafayette	LA	70506	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Our Lady of Lourdes Reg	Occupatio		
Med Ctr Receipt For:	Patholog Aggregate	e Year-to-Date <b>V</b>	$\dashv$
Primary General	33 -3		1
Other (specify)	0 0	250.00	
SUBTOTAL of Receipts This Page (optional)			885.00
TOTAL This Period (last page this line number o	nly)		

SC	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE	24 / 47
ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	(check only one)	_
111	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c	12
			, ,	13 14 15	16 17
An or f	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	r not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contrib solicit contributions from such comn	utions nittee.
$\overline{\ }$	NAME OF COMMITTEE (In Full)				
$\rangle$	College of American Pathologists Politic	al Action (	Committee		
	Full Name (Last, First, Middle Initial) D. Bruce Melin, Dr.			Date of Receipt	
	Mailing Address Department of Pathology 401 E Spruce St			10 27 2	2006
	City	State	Zip Code	Transaction ID: SA11A1.22	
	Garden City	KS	67846-5672	Amount of Each Receipt this F	'eriod
	FEC ID number of contributing federal political committee.	С			500.00
	Name of Employer St. Catherine Hosp	Occupation Pathologic			
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General		650.00		
	Other (specify) ▼	0 0	030.00		
	Full Name (Last, First, Middle Initial)  A. Sheldon Miller, Dr.			Date of Receipt	
	Mailing Address 6031 E. Palomino Circle	10 27 2	2006		
	City	State	Zip Code	Transaction ID: SA11A1.22	.578
	Somis	CA	93066	Amount of Each Receipt this F	'eriod
	FEC ID number of contributing federal political committee.	С			250.00
	Name of Employer St John's Reg Med Ctr	Occupation Pathologic			
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General Other (specify) ▼		250.00		
 C.	Full Name (Last, First, Middle Initial) Gerald Minkowitz			Date of Receipt	
	Mailing Address 904 49th St				2006
	City	State	Zip Code	Transaction ID: SA11A1.22	.855
	Brooklyn	NY	11219	Amount of Each Receipt this F	'eriod
	FEC ID number of contributing federal political committee.	С			250.00
	Name of Employer Minkowitz Consultant Path-	Occupation Pathologic		7	
	ology Receipt For:		Year-to-Date <b>V</b>	-	
	Primary General	7.99.094.0			
	Other (specify) ▼	0 0	350.00		
SI	JBTOTAL of Receipts This Page (optional)			10	00.00
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SCHEDULE A (FEC Form 3X)			11	FOR LINE NUMBER: PAGE 25 / 47	
•			Use separate schedule(s) or each category of the	(check only one)	
Ш	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12	
			_ common common, rage	13 14 15 16 17	
An	y information copied from such Reports and Sta	atements may	not be sold or used by any perso	on for the purpose of soliciting contributions	
or	for commercial purposes, other than using the r	name and add	lress of any political committee to	solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full)				
17	College of American Pathologists Politic	cal Action C	Committee		
	Full Name (Last, First, Middle Initial)				
A.	James Michael Myhre, Dr.			Date of Receipt	
	Mailing Address 1151 Miller St			M M / D D / Y Y Y Y	
	<u></u>			11 10 2006	
	City	State	Zip Code	Transaction ID: SA11A1.22670	
	Boise	ID	83702-6965	Amount of Each Receipt this Period	
	FEC ID number of contributing	С		250.00	
	federal political committee.				
	Name of Employer IDX Pathology, PA	Occupation	1	7	
	IDX Pathology, PA	Pathologi	st		
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General		500.00		
	Other (specify)				
	Full Name (Last, First, Middle Initial)			_	
В.	C Carlos Navarro, Dr.			Date of Receipt	
	Mailing Address Dept of Path			M M / D D / Y Y Y Y	
	506 Lenox Ave			10 27 2006	
	City	State	Zip Code	Transaction ID: SA11A1.22550	
	New York	NY	10037-1889	Amount of Each Receipt this Period	
	FEC ID number of contributing	С		300.00	
	federal political committee.				
	Name of Employer	Occupation	1	7	
	Harlem Hosp Ctr	Pathologi	st		
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General	, ,	300.00		
	Other (specify)		000.00		
	Full Name (Last, First, Middle Initial)				
C.	H. Margaret Neal, Dr.			Date of Receipt	
	Mailing Address 1899 Eider Ct			M M / D D / Y Y Y Y	
	<u></u>			11 03 2006	
	City	State	Zip Code	Transaction ID: SA11A1.22608	
	Tallahassee	FL	32308	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		1000.00	
	rederal political committee.				
	Name of Employer KWB Pathology Associates	Occupation	1	7	
		Pathologi		_	
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General		1000.00		
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0	UBTOTAL of Receipts This Page (optional)			1550.00	
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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)		(check only one)		
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			Detailed Summary Page	13 14 15 16 17		
Δr	ny information copied from such Reports and Sta	tements may	not be sold or used by any ners			
or	for commercial purposes, other than using the n	ame and add	lress of any political committee to	o solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full)					
$ \rangle$	College of American Pathologists Politic	cal Action C	Committee			
Α.	Full Name (Last, First, Middle Initial) P. Steven Nuernberger, Dr.			Date of Receipt		
	Mailing Address 2 Briarwood			10 27 2006		
	City	State	Zip Code	Transaction ID: SA11A1.22534		
	Collinsville	IL	62234	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		300.00		
	Name of Employer Anderson Hosp	Occupation Pathologi				
	Receipt For: Primary General	Aggregate	Year-to-Date ▼			
	Other (specify) ▼		300.00			
_	Full Name (Leat First Middle Initial)					
В.	Full Name (Last, First, Middle Initial) Frank Steven O'Sheal, Dr.			Date of Receipt		
	Mailing Address 1004 1st ST N SUITE 200			1 1 2 7 2 0 0 6		
	City	State	Zip Code	Transaction ID: SA11A1.22850		
	ALABASTER	AL	35007-8796	Amount of Each Receipt this Period		
	FEC ID number of contributing					
	federal political committee.	C		250.00		
	Name of Employer Cytology & Pathology Serv-	Occupation				
	ices	Pathologi				
	Receipt For:  Primary General	Aggregate	Year-to-Date ▼			
	Primary General Other (specify) ▼		250.00			
	Curior (Specify)	- 1		1		
_	Full Name (Last, First, Middle Initial) Cheng Yao Ong, Dr.			Date of Receipt		
٥.	Mailing Address 4712 Grandview Avenue	<u> </u>		M M / D D / Y Y Y Y		
				11 09 2006		
	City	State	Zip Code	Transaction ID: SA11A1.22622		
	New Port Richey	<u>FL</u>	34652-1039	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.			250.00		
	Name of Employer Gulf Coast Pathologists	Occupation Pathologi				
	Receipt For:	Aggregate	Year-to-Date ▼	7		
	Primary General		050.00	11		
	Other (specify) ▼		250.00	1		
				800.00		
S	UBTOTAL of Receipts This Page (optional)		······	000.00		

9	CHEDIII E A /EEC Form 2V)			FOR LINE NUMBER: PAGE 27 / 47			
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Ar	y information copied from such Reports and Sta	atements may	not be sold or used by any perso				
or	for commercial purposes, other than using the n	name and add	lress of any political committee to	solicit contributions from such committee.			
abla	NAME OF COMMITTEE (In Full)						
$\rangle$	College of American Pathologists Politic	cal Action C	Committee				
Α.	Full Name (Last, First, Middle Initial) L. James Ownbey, Dr.			Date of Receipt			
	Mailing Address 3306 40th Street			10 27 2006			
	City	State	Zip Code	Transaction ID: SA11A1.22541			
	Lubbock	TX	79413-2728	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		500.00			
	Name of Employer Covenant Health System	Occupation Pathologi					
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	1			
	Other (specify) ▼	0 0	500.00				
В.	Full Name (Last, First, Middle Initial) Norman Robert Page, Dr.			Date of Receipt			
	Mailing Address 315 Erin Dr			1 1 1 6 2 0 0 6			
	City	State	Zip Code	Transaction ID: SA11A1.22740			
	Knoxville	TN	37919-6202	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		535.00			
	Name of Employer Knoxville Dermatopathology	Occupation Pathologi					
	Laboratorie Receipt For:		Year-to-Date ▼				
	Primary General	7.99.094.0	1 1 1 1 1 1 1 1 1	1			
	Other (specify) ▼	0 0	535.00				
	Full Name (Last, First, Middle Initial) P. Peter Patterson, Dr.			Date of Receipt			
•	Mailing Address 16384 W Glacier Ct			M M / D D / Y Y Y Y Y 1 1 1 1 9 2 0 0 6			
	City	State	Zip Code	Transaction ID: SA11A1.22797			
	Surprise	AZ	85387	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		150.00			
	Name of Employer unaffiliated	Occupation Pathologi		7			
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00				
s	UBTOTAL of Receipts This Page (optional)			1185.00			
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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 28 / 47
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NAME OF COMMITTEE (In Full)			
College of American Pathologists Polit	ical Action (	Committee	
Full Name (Last, First, Middle Initial)			Data of Receipt
A. P. Herman Payen, Dr.  Mailing Address 19710 N. 71st Av/Arror	whood Don		Date of Receipt
197 TO N. 7 TSL AV/AITO	wiicau i iaii		10 27 2006
City	State	Zip Code	Transaction ID: SA11A1.22595
Glendale	AZ	85308	Amount of Each Receipt this Period
FEC ID number of contributing	С		300.00
federal political committee.			556.55
Name of Employer VA Med Ctr-Fayetteville	Occupatio	n	7
VA Med Ctr-Fayetteville	Patholog		
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General		300.00	
Other (specify)			
Full Name (Last, First, Middle Initial)			+
<b>B.</b> J. Robert Poppiti, Dr.			Date of Receipt
Mailing Address Department of Patholo	gy		M M / D D / Y Y Y
4300 Alton Road			11 22 2006
City	State	Zip Code	Transaction ID: SA11A1.22830
Miami Beach	<u>FL</u>	33140	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
- Todorai ponticai committee.			
Name of Employer Mt Sinai Med Ctr	Occupatio		
	Patholog		4
Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
Other (specify)		1000.00	
			1
Full Name (Last, First, Middle Initial)			
C. James Puerner			Date of Receipt
Mailing Address Department of Patholo 13111 N. Port Washing			11 09 2006
City	State	Zip Code	Transaction ID: SA11A1.22634
Mequon	WI	53097	Amount of Each Receipt this Period
FEC ID number of contributing			250.00
federal political committee.	C		250.00
Name of Employer	Occupatio	 n	┪
St. Mary's Hosp	Patholog		
Receipt For:	,	e Year-to-Date 🔻	7
Primary General		250.00	
Other (specify)	0 0	250.00	
CURTOTAL of Descripts This Description II		_	1050.00
SUBTOTAL of Receipts This Page (optional)		······	
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S	CHEDULE A (FEC Form 3X)	FOR LINE NUMBER: PAGE 29 / 47		
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
			Detailed Summary Page	X   11a   11b   11c   12   13   14   15   16   17
An	y information copied from such Reports and Stat for commercial purposes, other than using the na	tements may	y not be sold or used by any perso	
or		ame and add	dress of any political committee to	solicit contributions from such committee.
/	NAME OF COMMITTEE (In Full)	=1 A : 11 - 1	Danis and Maria	
/	College of American Pathologists Politic	al Action (	Committee	
	Full Name (Last, First, Middle Initial)			Data of Bassint
٩.	James Puerner  Mailing Address Department of Pathology	,		Date of Receipt
	13111 N. Port Washingto			11 17 2006
	City	State	Zip Code	Transaction ID: SA11A1.22785
	Mequon	WI	53097	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		260.00
	Name of Employer St. Mary's Hosp	Occupation		1
	Receipt For:	Patholog	e Year-to-Date ▼	$\dashv$
	Primary General	, iggi egale		1
	Other (specify) ▼		510.00	
3.	Full Name (Last, First, Middle Initial) D. Dennis Reinke, Dr.			Date of Receipt
	Mailing Address 1627 11th St			M'M / D'D / Y'Y'Y
	City.	C+-+-	Zin Coel-	11 17 2006
	City Wichita Falls	State TY	Zip Code	Transaction ID: SA11A1.22780
	Wichita Falls	TX	76301	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer	Occupation		
	Name of Employer Med Ctr One	Patholog		
	Receipt For:		e Year-to-Date ▼	
	Primary General		1000.00	1
	Other (specify) ▼		1000.00	
_	Full Name (Last, First, Middle Initial)			5. (5. (
J.	M. Susan Rendon, Dr.  Mailing Address 913B North Blvd Fast			Date of Receipt
	Mailing Address 913B North Blvd East			11 10 2006
	City	State	Zip Code	Transaction ID: SA11A1.22687
	Leesburg	FL	34748	Amount of Each Receipt this Period
	FEC ID number of contributing	C		1750.00
	federal political committee.			
	Name of Employer	Occupation		
	Pathology Medical Laborat- ories, PA	Patholog		4
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	, [
	Other (specify)		2250.00	
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				3010 00
s	UBTOTAL of Receipts This Page (optional)			3010.00

S	CHEDULE A (FEC Form 3X)		Harris and a sale and date (a)	FOR LINE NUMBER: PAGE 30 / 47
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\ \	NAME OF COMMITTEE (In Full)	arrie ariu auc	iless of any political committee to	Solicit contributions from such committee.
	College of American Pathologists Politic	ol Action C	Committee	
	College of American Fathologists Follic	ai Action C	Johnnillee	
_	Full Name (Last, First, Middle Initial)			
Α.	H. Linda Riley, Dr.			Date of Receipt
	Mailing Address 1116 138th Ave NW			11 10 2006
	City	State	Zip Code	Transaction ID: SA11A1.22716
	Andover	MN	55304	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		500.00
	Name of Employer	Occupation	<u> </u>	+
	United Hosp	Pathologi		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	1 1	E00.00	1
	Other (specify) ▼	0 0	500.00	
	Full Name (Last, First, Middle Initial)			
В.	Mazhar Rishi			Date of Receipt
	Mailing Address 701 N Clayton St			M M / D D / Y Y Y Y
	01.	01-1-	7'. 0.4.	10 27 2006
	City	State	Zip Code	Transaction ID: SA11A1.22581
	Wilmington	DE	19805	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer St. Francis Hosp	Occupation		
	Receipt For:	Pathologi	Year-to-Date <b>V</b>	_
	Primary General	Aggregate	Teal-to-Date V	1
	Other (specify)		250.00	
C.	Full Name (Last, First, Middle Initial) E. Ronald Rocha, Dr.			Date of Receipt
Ο.	Mailing Address 3701 S Higuera St Ste 2	200		M M / D D / Y Y Y Y
		.00		11 22 2006
	City	State	Zip Code	Transaction ID: SA11A1.22816
	San Luis Obispo	CA	93401	Amount of Each Receipt this Period
	FEC ID number of contributing	С		300.00
	federal political committee.			
	Name of Employer Central Coast Pathology	Occupation		7
	Consultants	Pathologi		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify)		300.00	
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s	UBTOTAL of Receipts This Page (optional)		<b>_</b>	1050.00
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate sched or each category of Detailed Summary F	the (Crieck Grilly Grie)
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may not be sold or used by name and address of any political cor	any person for the purpose of soliciting contributions mmittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) College of American Pathologists Politi	cal Action Committee	
Full Name (Last, First, Middle Initial) F. Michael Schaldenbrand, Dr.  Mailing Address 29770 Fox Club Dr.  City Farmington Hills  FEC ID number of contributing federal political committee.  Name of Employer Oakwood Hosp & Med Ctr  Receipt For: Primary General Other (specify)	State Zip Code MI 48331  C  Occupation Pathologist  Aggregate Year-to-Date ▼	Date of Receipt  M M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial)  F. Jay Schamberg, Dr.  Mailing Address 8901 W Lincoln Ave  City  Milwaukee  FEC ID number of contributing federal political committee.  Name of Employer ACL Laboratories  Receipt For:  Primary  General  Other (specify)	State Zip Code WI 53227  C  Occupation Pathologist  Aggregate Year-to-Date ▼	Date of Receipt    M M M
Full Name (Last, First, Middle Initial) R. Mark Seifert, Dr.  Mailing Address Department of Patholog 400 N. Pepper Avenue City Colton  FEC ID number of contributing federal political committee.  Name of Employer Arrowhead Regional Med Ctr  Receipt For: Primary General Other (specify)	State Zip Code CA 92324  C  Occupation Pathologist Aggregate Year-to-Date	Date of Receipt    M M M
SUBTOTAL of Receipts This Page (optional)		750.00
TOTAL This Period (last page this line number of	nlv)	<b>L</b>

5(	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 32 / 47
ITEMIZED RECEIPTS			or each category of the	(check only one)
			Detailed Summary Page	X   11a   11b   11c   12   13   14   15   16   17
An	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	y not be sold or used by any perso	
or		ame and add	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) College of American Pathologists Politic	al Action (	Committee	
/	Conlege of American Fathologists Folition	ai Autiuii (	Johnmillee	
	Full Name (Last, First, Middle Initial)			Data of Bookint
٩.	L. Rhonda Shannon, Dr.  Mailing Address Department of Pathology	,		Date of Receipt
	6720 Bertner MC 4-265	y		11 1 2006
	City	State	Zip Code	Transaction ID: SA11A1.22700
	Houston	TX	77030	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		100.00
	Name of Employer St. Luke's Episcopal Hosp	Occupation Patholog		
	Receipt For:		e Year-to-Date ▼	
	Primary General		300.00	
	Other (specify) ▼		300.00	
 3.	Full Name (Last, First, Middle Initial) I Cleo Siderides, Dr.			Date of Receipt
	Mailing Address Dept of Path			M M / D D / Y Y Y Y
	Shelburne Rd at W Broa	d St State	Zip Code	11 09 2006
	City Stamford	CT	2ip Code 06904	Transaction ID: SA11A1.22636  Amount of Each Receipt this Period
	FEC ID number of contributing		00007	
	federal political committee.	C		250.00
			n	
	Name of Employer Stamford Hosp	Occupation		
		Occupation Patholog		
	Name of Employer Stamford Hosp  Receipt For: Primary General	Occupation Patholog	ist e Year-to-Date ▼	
	Name of Employer Stamford Hosp	Occupation Patholog	ist	
	Name of Employer Stamford Hosp  Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)	Occupation Patholog	ist e Year-to-Date ▼	Data of Resoirt
 C.	Name of Employer Stamford Hosp  Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) L. Howard Siegel, Dr.	Occupation Patholog Aggregate	ist e Year-to-Date ▼	Date of Receipt
— C.	Name of Employer Stamford Hosp  Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)	Occupation Patholog Aggregate	ist e Year-to-Date ▼	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
<b></b>	Name of Employer Stamford Hosp  Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) L. Howard Siegel, Dr.  Mailing Address Department of Pathology 6701 N. Charles St.  City	Occupation Patholog Aggregate State	ist  e Year-to-Date ▼  250.00  Zip Code	M M / D D / Y Y Y Y
<b>-</b> .	Name of Employer Stamford Hosp  Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) L. Howard Siegel, Dr.  Mailing Address Department of Pathology 6701 N. Charles St.  City Baltimore	Occupation Patholog Aggregate	ist e Year-to-Date ▼ 250.00	11
<b>C</b> .	Name of Employer Stamford Hosp  Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) L. Howard Siegel, Dr.  Mailing Address Department of Pathology 6701 N. Charles St.  City	Occupation Patholog Aggregate State	ist  e Year-to-Date ▼  250.00  Zip Code	1 1 2 0 2 0 0 6  Transaction ID: SA11A1.22799
<b>D</b> .	Name of Employer Stamford Hosp  Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) L. Howard Siegel, Dr.  Mailing Address Department of Pathology 6701 N. Charles St.  City Baltimore  FEC ID number of contributing federal political committee.  Name of Employer	Occupation Patholog Aggregate  State MD  C Occupation	Zip Code 21204	Transaction ID: SA11A1.22799  Amount of Each Receipt this Period
<b>C</b> .	Name of Employer Stamford Hosp  Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) L. Howard Siegel, Dr.  Mailing Address Department of Pathology 6701 N. Charles St.  City Baltimore  FEC ID number of contributing federal political committee.  Name of Employer Greater Baltimore Med Ctr	Occupation Patholog Aggregate  State MD  C  Occupation Patholog	ist  2 Year-to-Date ▼  250.00  Zip Code 21204	Transaction ID: SA11A1.22799  Amount of Each Receipt this Period
C.	Name of Employer Stamford Hosp  Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) L. Howard Siegel, Dr.  Mailing Address Department of Pathology 6701 N. Charles St.  City Baltimore  FEC ID number of contributing federal political committee.  Name of Employer Greater Baltimore Med Ctr  Receipt For:	Occupation Patholog Aggregate  State MD  C  Occupation Patholog	Zip Code 21204	Transaction ID: SA11A1.22799  Amount of Each Receipt this Period
<b>D.</b>	Name of Employer Stamford Hosp  Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) L. Howard Siegel, Dr.  Mailing Address Department of Pathology 6701 N. Charles St.  City Baltimore  FEC ID number of contributing federal political committee.  Name of Employer Greater Baltimore Med Ctr	Occupation Patholog Aggregate  State MD  C  Occupation Patholog	ist  2 Year-to-Date ▼  250.00  Zip Code 21204	Transaction ID: SA11A1.22799  Amount of Each Receipt this Period
<b>C</b> .	Name of Employer Stamford Hosp  Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) L. Howard Siegel, Dr.  Mailing Address Department of Pathology 6701 N. Charles St.  City Baltimore  FEC ID number of contributing federal political committee.  Name of Employer Greater Baltimore Med Ctr  Receipt For:  Primary General	Occupation Patholog Aggregate  State MD  C  Occupation Patholog	Zip Code 21204  Zip Code 21204   Code 21204  Code 21204  Code 21204  Code 21204  Code 21204  Code 21204  Code 21204	Transaction ID: SA11A1.22799  Amount of Each Receipt this Period
<b>D.</b>	Name of Employer Stamford Hosp  Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) L. Howard Siegel, Dr.  Mailing Address Department of Pathology 6701 N. Charles St.  City Baltimore  FEC ID number of contributing federal political committee.  Name of Employer Greater Baltimore Med Ctr  Receipt For: Primary General Other (specify) ▼	Occupation Patholog Aggregate  State MD  C  Occupation Patholog Aggregate	Zip Code 21204  Zip Code 21204   7  Source ▼	Transaction ID: SA11A1.22799  Amount of Each Receipt this Period  500.00
SI	Name of Employer Stamford Hosp  Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) L. Howard Siegel, Dr.  Mailing Address Department of Pathology 6701 N. Charles St.  City Baltimore  FEC ID number of contributing federal political committee.  Name of Employer Greater Baltimore Med Ctr  Receipt For:  Primary General	Occupation Patholog Aggregate  State MD  C  Occupation Patholog Aggregate	Zip Code 21204  Zip Code 21204   7  Source ▼	Transaction ID: SA11A1.22799  Amount of Each Receipt this Period

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 33 / 47			
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$\setminus$	NAME OF COMMITTEE (In Full)						
$\rangle$	College of American Pathologists Politic	al Action (	Committee				
Α.	Full Name (Last, First, Middle Initial) C. William Silberman, Dr.			Date of Receipt			
	Mailing Address PO Box 1668			11 22 2006			
	City	State	Zip Code	Transaction ID: SA11A1.22843			
	Leesburg	VA	20177-1668	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		200.00			
	Name of Employer unaffiliated	Occupation Patholog					
	Receipt For:	Aggregate	e Year-to-Date ▼				
	Primary General		100.00	1			
	Other (specify)	0 0	400.00				
В.	Full Name (Last, First, Middle Initial) J Andrew Sloman, Dr.			Date of Receipt			
	Mailing Address Dept of Path 1414 Kuhl Ave			10 27 2006			
	City	State	Zip Code	Transaction ID: SA11A1.22562			
	Orlando	FL	32806-2008	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		250.00			
	Name of Employer Orlando Regional Med Ctr	Occupation	n				
	Oriando Regional Med Ctr	Patholog	ist				
	Receipt For:	Aggregate	e Year-to-Date ▼				
	Primary General		250.00	1			
	Other (specify)		250.00				
<u> </u>	Full Name (Last, First, Middle Initial) Perry Daniel Snower, Dr.			Date of Receipt			
	Mailing Address Laboratory 22101 Moross Road			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	City	State	Zip Code	Transaction ID: SA11A1.22704			
	Detroit	MI	48236	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		250.00			
	Name of Employer St. John Hosp and Med Ctr	Occupation Patholog					
	Receipt For:	Aggregate	e Year-to-Date ▼				
	Primary General		050.00	1			
	Other (specify)		250.00	]			
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s	UBTOTAL of Receipts This Page (optional)			700.00			

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$\overline{\rangle}$	NAME OF COMMITTEE (In Full) College of American Pathologists Politica	al Action (	Committee	
Α.	Full Name (Last, First, Middle Initial) L. Susan Speaks, Dr.  Mailing Address 1133 College Avenue Building B  City  Manhattan  FEC ID number of contributing federal political committee.  Name of Employer Unaffiliated  Receipt For: Primary General Other (specify)	State KS  C  Occupation Pathologi Aggregate		Date of Receipt  M M M / 21 / 2006  Transaction ID: SA11A1.22810  Amount of Each Receipt this Period  250.00
3.	Full Name (Last, First, Middle Initial) Ang Bradford Tan, Dr. Mailing Address Department of Pathology 2520 Elisha Ave City Zion FEC ID number of contributing federal political committee. Name of Employer	State IL C	Zip Code 60099-0099	Date of Receipt  M M M / D D M 2 0 0 6  Transaction ID: SA11A1.22792  Amount of Each Receipt this Period  250.00
	Midwestern Regional Med Ctr  Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Patholog Aggregate	Year-to-Date ▼ 250.00	
C.	Full Name (Last, First, Middle Initial) G Warren Tucker, Dr.  Mailing Address Dept of Path 1128 Lango Ave  City Charleston  FEC ID number of contributing federal political committee.  Name of Employer Coastal Pathology Laboratories  Receipt For:  Primary General Other (specify)	State SC C Occupation Pathologi Aggregate		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
S	UBTOTAL of Receipts This Page (optional)			750.00
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S	CHEDULE A (FEC Form 3X)		l la a agravata a abaglula (a)	FOR LINE NUMBER: PAGE 35 / 47
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$\overline{\ }$	NAME OF COMMITTEE (In Full)			
$\rangle$	College of American Pathologists Politica	al Action (	Committee	
۹.	Full Name (Last, First, Middle Initial) E. Stuart VanMeter, Dr.			Date of Receipt
	Mailing Address Department of Pathology 1924 Alcoa Highway	•		111 / 10 / Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.22660
	Knoxville	TN	37920	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Univ of Tennessee Med Ctr	Occupation Pathologi		
	Receipt For:		Year-to-Date ▼	
	Primary General		500.00	
	Other (specify) ▼	0 0	300.00	
3.	Full Name (Last, First, Middle Initial) E Laura Van Newkirk, Dr.			Date of Receipt
	Mailing Address 2738 E 51st St Ste 290			11 22 7 2006
	City	State	Zip Code	Transaction ID: SA11A1.22842
	Tulsa	OK	74105-6271	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer Tulsa Medical Laboratory	Occupation Pathologic		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
 C.	Full Name (Last, First, Middle Initial) L. Arturo Vargas, Dr.			Date of Receipt
	Mailing Address Department of Pathology 2001 N Oregon St	1		1 1 1 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.22690
	El Paso	TX	79902	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		200.00
	Name of Employer Providence Memorial Hosp	Occupation Pathologic		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		300.00	
s	UBTOTAL of Receipts This Page (optional)			1200.00
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T	OTAL This Period (last page this line number on	ly)		

S	CHEDULE A (FEC Form 3X)			FOR LINE N	UMBER:	PAGE 36 / 47
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$\overline{\ }$	NAME OF COMMITTEE (In Full)					
$\rangle$	College of American Pathologists Political	Action C	Committee			
۹.	Full Name (Last, First, Middle Initial) E Stephen Vernon, Dr.			Date of F	eceipt	
	Mailing Address Holtz Center 2070 1611 NW 12 Ave			1 0	27	2006
	City	State	Zip Code	Transact	on ID: SA	A11A1.22552
	Miami	FL	33136	Amount o	f Each Re	ceipt this Period
	FEC ID number of contributing federal political committee.	С				250.00
		Occupation Pathologi				
	ROOMILITION		Year-to-Date ▼			
	Primary General		050.00	1		
	Other (specify) ▼	0 0	250.00			
3.	Full Name (Last, First, Middle Initial) G Patricia Wasserman, Dr.			Date of F	eceipt	
	Mailing Address 270-05 76th Ave			M M 1 1	1 0	2006
	City	State	Zip Code	Transacti	on ID: SA	A11A1.22671
	New Hyde Park	NY	11040	Amount o	f Each Re	ceipt this Period
	FEC ID number of contributing federal political committee.	С				500.00
	Long Island 'lewish Med Ctr	Occupation Pathologi				
	Receipt For:	Aggregate	Year-to-Date ▼			
	Primary General		600.00			
	Other (specify)	0 0	000.00			
Э.	Full Name (Last, First, Middle Initial) DeBolt Tracey Wentz, Dr.			Date of R	eceipt	
	Mailing Address Dept. of Pathology P. O. Box 995			1 1	10	2006
	City	State	Zip Code			A11A1.22708
	Ann Arbor	MI	48106	Amount o	f Each Re	ceipt this Period
	FEC ID number of contributing federal political committee.	C				100.00
	Ct Joseph Morey Hoop	Occupation Pathologi				
		Aggregate	Year-to-Date ▼			
	Primary General	-	300.00	1		
	Other (specify)	0 0	300.00			
S	UBTOTAL of Receipts This Page (optional)					850.00
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Т	OTAL This Period (last page this line number only	)	<b>&gt;</b>			

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 37/47			
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Δn	y information copied from such Reports and Stateme	ente may	not he sold or used by any nerso				
or	for commercial purposes, other than using the name	and add	ress of any political committee to	solicit contributions from such committee.			
$\overline{\ }$	NAME OF COMMITTEE (In Full)						
$\rangle$	College of American Pathologists Political A	Action C	ommittee				
_							
۹.	Full Name (Last, First, Middle Initial) Allen William Wesche, Dr.			Date of Receipt			
	Mailing Address Dept of Pathology			M M / D D / Y Y Y Y			
	2915 Missouri Ave			11 22 2006			
	•	State	Zip Code	Transaction ID: SA11A1.22840			
	<u>Shreveport</u> <u>L</u>	_A	71109	Amount of Each Receipt this Period			
	FEC ID number of contributing	` '		250.00			
	federal political committee.						
	Name of Employer Oc	ccupation		1			
	<u>LLO</u>	athologis					
		ggregate	Year-to-Date ▼				
	Primary General	1	250.00				
	Other (specify) ▼	0 0	0 0 0 0 0 0 0				
	Full Name (Last, First, Middle Initial)						
3.	L. Sherry Woodhouse, Dr.			Date of Receipt			
	Mailing Address 1440 Coral Ridge Dr #296			M M / D D / Y Y Y Y			
	City	State	Zip Code	11 10 2006			
	,	State FL	33071	Transaction ID: SA11A1.22684			
		1 '	33071	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	ר ו≎		250.00			
	Pathology Consultants of S	ccupation athologis					
	Bioward		Year-to-Date ▼	-			
	Primary General	ggrogato					
	Other (specify) ▼		250.00				
•	Full Name (Last, First, Middle Initial)			Date of Receipt			
J.	E Jan Woods, Dr.  Mailing Address Denver Co			M M / D D / Y Y Y Y			
	6665 S Kenton St Ste 210			10 27 2006			
	City	State	Zip Code	Transaction ID: SA11A1.22556			
	<u>Englewood</u>	CO	80111-6822	Amount of Each Receipt this Period			
	FEC ID number of contributing	<u>.                                      </u>		500.00			
	federal political committee.						
	Lab Corp of Amorica	ccupation		7			
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		ggregate	Year-to-Date ▼				
	Primary General Other (specify)		500.00				
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### SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

NAME OF COMMITTEE (In Full)

Full Name (Last, First, Middle Initial)

TX

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TX

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Occupation Pathologist

Aggregate Year-to-Date ▼

500.00

Mailing Address 2504 Elmen

FEC ID number of contributing

General

Dept of Pathology

9200 Wall St

General

federal political committee.

Other (specify)

FEC ID number of contributing

federal political committee.

Name of Employer Clinical Pathology Assoc

Other (specify)

Full Name (Last, First, Middle Initial)

Name of Employer unaffiliated

Primary

Receipt For:

B. Stephen Yurco

City

**Austin** 

Receipt For:

Primary

Mailing Address

F Rebecca Yorke, Dr.

City

Houston

PAGE 38 / 47 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the 11a 11b 11c **Detailed Summary Page** 13 14 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. College of American Pathologists Political Action Committee Date of Receipt 1.1 19 2006 State Zip Code Transaction ID: SA11A1.22798 77019 Amount of Each Receipt this Period 250.00 Occupation Pathologist Aggregate Year-to-Date ▼ 250.00 Date of Receipt 2006 10 Zip Code Transaction ID: SA11A1.22654 State 78754 Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)	•	750.00
TOTAL This Period (last page this line number only)	<b></b>	38235.00

FOR LINE NUMBER: PAGE 39 / 47 Use separate schedule(s) (check only one) or each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 13 14 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) College of American Pathologists Political Action Committee Full Name (Last, First, Middle Initial) HULSHOF FOR CONGRESS Date of Receipt Mailing Address PO BOX 16021 03 2006 City Zip Code State Transaction ID: SA16.22885 Alexandria VA 22302 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 C C00295923 federal political committee. Name of Employer Occupation Receipt For: 2006 Aggregate Year-to-Date ▼ X Primary General 1000.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)	<b>•</b>	1000.00
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	y Information copied from such Reports and Statem for commercial purposes, other than using the name											S
$\rangle$	NAME OF COMMITTEE (In Full) College of American Pathologists Political											
۹.	Full Name (Last, First, Middle Initial) Sun Trust Bank						e of C	Disburs	SB21E ement		75 0 ŏ 6	Y
	Mailing Address PO Box 85024					Ŀ	,				000	
	•	State VA	Zip Code 23285-5024			Amo	ount o	of Each	Disburs		-	-
	Purpose of Disbursement Bank Service Charges Candidate Name			Cat	tegory/		•		•		641.7	76
	Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spe	General cify) ▼		ype							
3.	Full Name (Last, First, Middle Initial) Sun Trust Bank					Dat	e of D	Disburs				·
	Mailing Address PO Box 85024					1 M	O M	/ D2	20 /	Ý Ž	0 Ď 6	Y
	•	State VA	Zip Code 23285-5024			Amo	ount (	of Each	Disburs	emen		-
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	Mailing Address PO Box 85024	Ctata	Zin Codo									
	Richmond	State VA	Zip Code 23285-5024			Amo	ount o	of Each	Disburs	emen	2.2	-
	Purpose of Disbursement  Candidate Name						•		•		2.4	25
					egory/ ype							
	Office Sought:  Senate  President  State:  Disburse  Disburse	ment For: Primary Other (spe	General cify) ▼									
•	UBTOTAL of Disbursements This Page (optional) .						•	•	•	. (	687.5	51
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	y Information copied from such Reports and State											ns
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$ \rangle$	NAME OF COMMITTEE (In Full)  College of American Pathologists Politica	I Action Committee										
<u></u>	Full Name (Last, First, Middle Initial)							ian ID	CDO1	D 000	77	
Α.	Sun Trust Bank					Date	of D	isburs	D /			Y
	Mailing Address PO Box 85024					1 0		3	3 Ö	2	Ý 0 Ŏ (	5
	City Richmond	State Zip Code VA 23285-5024	ļ			Amou	unt c	f Each	Disbur	semer		
	Purpose of Disbursement Bank Service Charges										16.	88
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В.	Full Name (Last, First, Middle Initial) Sun Trust Bank					Date	of D	isburs				V
	Mailing Address PO Box 85024					1 1	М	′ DC	6	1 2	ž o ŏ (	3 <sup>*</sup>
	City Richmond	State         Zip Code           VA         23285-5024	ļ.			Amou	unt c	of Each	Disbur	semer		
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	Candidate Name				egory/ vpe							
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	Mailing Address PO Box 85024					1 1 1	М	/ DC	7	Y	Ý 0 Ŏ (	3 Y
	City Richmond	State Zip Code VA 23285-5024	ļ			Amou	unt c	of Each	Disbur	semer	nt this	Period
	Purpose of Disbursement Bank Service Charges					T L.					22.	50
	Candidate Name				egory/ vpe							
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	y Information copied from such Reports and Statem for commercial purposes, other than using the name											S
$\rangle$	NAME OF COMMITTEE (In Full) College of American Pathologists Political											
۹.	Full Name (Last, First, Middle Initial) Sun Trust Bank Mailing Address PO Box 85024					Da		Disburs	: SB21E ement		81 0 ŏ 6	Y
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	,	State VA	Zip Code 23285-5024			Ar	nount	of Each	n Disburs	emen	t this F	Period
	Purpose of Disbursement Bank Service Charges Candidate Name			Cat	egory/						8.4	14
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	Senate President State: District:	Primary Other (spe	General Cify) ▼									
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	Mailing Address PO Box 85024						1 1		14 /	<u>'</u> 2	0 ŏ 6	
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	Mailing Address PO Box 85024					1	<b>1</b>	2	20 /	2	0 ŏ 6	
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