

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) **PO Box 15441**
Check if different than previously reported. (ACC) **Washington DC 20003-0441**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00522094 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / 2024 through / / 2024

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

Signature of Treasurer **Phillips, Justin, , ,** Date / / 2024

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

PSYCHOLOGY PAC OF AMERICAN PSYCHOLOGICAL ASSOCIATION SERVICES INC.

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2024"/>		<input type="text" value="174667.18"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="182444.59"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="25339.41"/>	<input type="text" value="36616.82"/>
(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="207784.00"/>	<input type="text" value="211284.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="6501.00"/>	<input type="text" value="10001.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="201283.00"/>	<input type="text" value="201283.00"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

PSYCHOLOGY PAC OF AMERICAN PSYCHOLOGICAL ASSOCIATION SERVICES INC.

Report Covering the Period: From: 02 / 01 / 2024 To: 02 / 29 / 2024

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).....	15562.00	22562.00
(ii) Unitemized	9777.41	14054.82
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	25339.41	36616.82
(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)	25339.41	36616.82
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	25339.41	36616.82
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	25339.41	36616.82

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	6000.00	9500.00
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	501.00	501.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	501.00	501.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	6501.00	10001.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6501.00	10001.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	25339.41	36616.82
34. Total Contribution Refunds (from Line 28(d))	501.00	501.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	24838.41	36115.82
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 17
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. de las Fuentes, Cynthia, , Dr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Anderson House at Heritage Sq
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 Occupation (for Individual) Psychologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt 02 / 08 / 2024
Transaction ID : A41D5526A090D4E46A5E

Amount of Each Receipt this Period 700.00

Memo Item

B. Buckman, Lindsey, Renee, Dr, PsyD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4545 N 36th St
Ste 114

City Phoenix State AZ Zip Code 85018-3473

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 02 / 08 / 2024
Transaction ID : A8466F393B0DF4625BB5

Amount of Each Receipt this Period 600.00

Memo Item

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

Mailing Address 205 Hardee Ave

City Summerville State SC Zip Code 29485-8157

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

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

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 02 / 08 / 2024
Transaction ID : AF9ED8CD73D244E85B69

Amount of Each Receipt this Period 600.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1900.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 17
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Spears, Gayle, G, Dr, PhD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 160 Red Bluff Dr
 Ste 200
 City Athens State GA Zip Code 30607-6562
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GA Psych Asso Occupation (for Individual) ED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 02 / 08 / 2024
Transaction ID : AF93C6EAAAD7342BDB4/
 Amount of Each Receipt this Period 600.00
 Memo Item

B. Smedley, Jessica, M, Dr., PsyD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2512 Berkley St
 City Temple Hills State MD Zip Code 20748-2828
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Clinical Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 249.00

Date of Receipt 02 / 08 / 2024
Transaction ID : A993985002913480AAB
 Amount of Each Receipt this Period 99.00
 Memo Item

C. Vieira-Baker, Catherine, , Dr,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 41 Carousel Dr
 City Riverside State RI Zip Code 02915-3682
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) South Coast Educational Collaborative Occupation (for Individual) Psychologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 02 / 09 / 2024
Transaction ID : AFC0C42D80B854ECC9D6
 Amount of Each Receipt this Period 600.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1299.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 17
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Howell, Gary, L, Dr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4400 W Spruce St
 Apt 489
 City Tampa State FL Zip Code 33607-4244
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) National Louis University Occupation (for Individual) Psychologist & Director of Practicum T
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 09 / 2024
Transaction ID : AFCAAB3340E204D4B8BF
 Amount of Each Receipt this Period
 600.00
 Memo Item

B. Heitzmann, Joshua, , Dr, PhD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1790 Oakwood Ave
 City San Jose State CA Zip Code 95124-3716
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Heitzmann, Inc. Occupation (for Individual) Clinical Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 09 / 2024
Transaction ID : AB3C013FF66AD4FB295B
 Amount of Each Receipt this Period
 600.00
 Memo Item

C. Lyn, Tamara, S, Dr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 Grandwood Cir
 City Durham State NC Zip Code 27712-8731
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) High Ready Coaching and Consulting Occupation (for Individual) Consulting Psychologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 09 / 2024
Transaction ID : ACED0A1DCE6FF4F4E9DB
 Amount of Each Receipt this Period
 600.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1800.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 17
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Puentes, Antonio, E, Dr., PhD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Department of Psychology
University of North Carolina

City Wilmington State NC Zip Code 28403-5730

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt 02 / 09 / 2024
Transaction ID : A84E67DEB9E5B456CBE8

Amount of Each Receipt this Period 500.00

Memo Item

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

Mailing Address 15019 Bankfield Dr

City Waterford State VA Zip Code 20197-1265

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 02 / 09 / 2024
Transaction ID : ACEB6D24AE24340109E9

Amount of Each Receipt this Period 600.00

Memo Item

C. Diaz-Granados, Jim, , Dr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6507 Cavalier Dr

City Alexandria State VA Zip Code 22307-1306

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

Name of Employer (for Individual) APA Occupation (for Individual) Deputy CEO

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 699.00

Date of Receipt 02 / 09 / 2024
Transaction ID : A4EF60FA59118413DBD1

Amount of Each Receipt this Period 99.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1199.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 17
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Buckman, Lindsey, Renee, Dr, PsyD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4545 N 36th St
 Ste 114

City Phoenix State AZ Zip Code 85018-3473

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 ▼
 624.00

Date of Receipt
 02 / 09 / 2024
Transaction ID : A29C7206DC2B44CC5B77

Amount of Each Receipt this Period
 24.00

Memo Item

B. Berman, Paul, C, Dr, PhD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 102 W Pennsylvania Ave
 Ste 306

City Towson State MD Zip Code 21204-4543

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

Name of Employer (for Individual) Berman & Killeen Occupation (for Individual) Psychologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 02 / 09 / 2024
Transaction ID : AFEF2DA35FF894189920

Amount of Each Receipt this Period
 250.00

Memo Item

C. Crosby, Antoine, LaRyan, Mr, PhD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 82 I St SE
 Apt 1307

City Washington State DC Zip Code 20003-3793

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

Name of Employer (for Individual) Affirmative Spaces Occupation (for Individual) Clinical Psychologist/Self-Employed

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 02 / 09 / 2024
Transaction ID : AFCAF27770AD84E928E6

Amount of Each Receipt this Period
 240.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 514.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 17
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Puentes, Antonio, E, Dr., PhD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Department of Psychology
 University of North Carolina
 City Wilmington State NC Zip Code 28403-5730
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNCW Occupation (for Individual) Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 02 / 11 / 2024
Transaction ID : A9A1743FB01344E638D7
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Siegel, Alex, M, Dr, PhD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 746 Righters Mill Rd
 City Penn Valley State PA Zip Code 19072-1429
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Psychologist/Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 13 / 2024
Transaction ID : A58CB48B145674CB6B5D
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Stark, Trisha, A, , 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) Retired Occupation (for Individual) Psychologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 02 / 17 / 2024
Transaction ID : A007A155172F34934A03
 Amount of Each Receipt this Period 3000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	3550.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 17
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Berg, Gayle, Rockmore, Dr., PhD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 Elmhurst Dr
 City Old Westbury State NY Zip Code 11568-1007
 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 ▼ 699.00

Date of Receipt 02 / 17 / 2024
Transaction ID : AD61FF0562FFA4587BA2
 Amount of Each Receipt this Period 600.00
 Memo Item

B. Siegel, Alex, M, Dr, PhD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 746 Righters Mill Rd
 City Penn Valley State PA Zip Code 19072-1429
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Psychologist/Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 02 / 20 / 2024
Transaction ID : AD634EC3081B24E0DBB9
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Oswald, Frederick, L, Dr,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Dept Of Psychology Ms 25 Rice Univ
 City Houston State TX Zip Code 77005-1827
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Rice University Occupation (for Individual) Professor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 20 / 2024
Transaction ID : A3CE76642CA7646809F7
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	950.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 17
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Wise, Erica, H, Dr., PhD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 Hunt St
 Unit 302
 City Durham State NC Zip Code 27701-3379
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNC Chapel Hill Occupation (for Individual) Psychologist
 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
 02 / 21 / 2024
Transaction ID : AB4113A0D9A1D4EE8BA7
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. D'Angelo, Eugene, Joseph, Dr., PhD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 Woodholm Cir
 City Manchester State MA Zip Code 01944-1038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Boston Children's Hospital Occupation (for Individual) Chief, Division of Psychology
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2024
Transaction ID : AA84BB89ABEEB46FBB0F
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. Kent, Leigh, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17369 FM 362 Rd
 City Navasota State TX Zip Code 77868-6931
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Houston Christian University Occupation (for Individual) Assistant Professor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2024
Transaction ID : AC08351E8267D43B0A1D
 Amount of Each Receipt this Period
 600.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 17
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Johnson, Elizabeth, Bates, Dr., PhD.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10813 E Windgate Pass Dr
 City Scottsdale State AZ Zip Code 85255-7144
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 02 / 22 / 2024
Transaction ID : AF659E8970F964E77914
 Amount of Each Receipt this Period 600.00
 Memo Item

B. Solomon, Steven, Dale, Dr., PhD.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3262 Holiday Ct Ste 203
 City La Jolla State CA Zip Code 92037-1811
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Clinical Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 02 / 22 / 2024
Transaction ID : AD5018C8826C14C33920
 Amount of Each Receipt this Period 600.00
 Memo Item

C. Overmier, James, Bruce, Dr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 69 Fife Ct
 City San Ramon State CA Zip Code 94583-2523
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) None
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 02 / 22 / 2024
Transaction ID : AA3D94880BA0F423E8E0
 Amount of Each Receipt this Period 350.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1550.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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

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

A. Kuechle, Ralph, Gunther, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2129 E Taft Ave
 City Orange State CA Zip Code 92867-4028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HME Enterprises, Inc. Occupation (for Individual) Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 02 / 23 / 2024
Transaction ID : AF7DCE082FCD044348AE
 Amount of Each Receipt this Period 600.00
 Memo Item

B. Greenspan, Barney, , Dr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1302 E Green Haven St
 City Meridian State ID Zip Code 83646-5935
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-employed Occupation (for Individual) Clinical Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 02 / 23 / 2024
Transaction ID : ACEE817B4D627409BB3B
 Amount of Each Receipt this Period 600.00
 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
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	15562.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

PSYCHOLOGY PAC OF AMERICAN PSYCHOLOGICAL ASSOCIATION SERVICES INC.

Full Name (Last, First, Middle Initial)

A. SCHOLTEN FOR CONGRESS

Mailing Address 415 New Jersey Ave SE - #1

City
Washington

State
DC

Zip Code
20003-4036

Purpose of Disbursement

Contribution to Committee

Candidate Name

Scholten, Hillary, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2024
 Primary General
 Other (specify) ▼

State: MI District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	5		2	0	2	4

FEC Identification Number

C C00711317

Transaction ID : BBA9A8C442

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. COLLINS FOR SENATOR

Mailing Address 1020 N Fairfax St.
Suite 201

City
Alexandria

State
VA

Zip Code
22314-2068

Purpose of Disbursement

Contribution to Committee

Candidate Name

Collins, Susan, , Sen.,

Office Sought: House
 Senate
 President

Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: ME District:

Date of Disbursement

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

FEC Identification Number

C C00314575

Transaction ID : B405EAC36B

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. LISA MURKOWSKI FOR US SENATE

Mailing Address PO Box 10847

City
Anchorage

State
AK

Zip Code
99510

Purpose of Disbursement

Contribution to Committee

Candidate Name

Murkowski, Lisa, , Sen.,

Office Sought: House
 Senate
 President

Disbursement For: 2028
 Primary General
 Other (specify) ▼

State: AK District:

Date of Disbursement

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

FEC Identification Number

C C00384529

Transaction ID : B082E7D4BE

Amount of Each Disbursement this Period

2500.00

Memo Item

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

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

6000.00
6000.00

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

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

A. Full Name (Last, First, Middle Initial)
Vieira-Baker, Catherine, , Dr,

Mailing Address 41 Carousel Dr

City Riverside State RI Zip Code 02915-3682

Purpose of Disbursement
refund of 2/9/2024 contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
02 / 12 / 2024

FEC Identification Number: C

Transaction ID : **BB48B6C993**

Amount of Each Disbursement this Period: 501.00

Memo Item

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	501.00
TOTAL This Period (last page this line number only).....▶	501.00