Image# 14960627947 PAGE 1 / 13

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

1 OTTIVI OX	For Other Than An Au	ithorized Committee	Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
College of American	Pathologists Political	Action Committee	
ADDRESS (number and street)	1350 I Street, NW		
▼ (number and street)	Suite 590		
Check if different than previously reported. (ACC)	Washington		DC 20005 -
2. FEC IDENTIFICATION N	NUMBER ▼ C	ITY 🛦	STATE ▲ ZIP CODE ▲
C C00274944		IS THIS REPORT X NEW (N)	AMENDED (A)
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports:	Report Due On:	ar 20 (M3) May 20 Jun 20 ((Non-Election Year Only)
April 15	× Ap	or 20 (M4) Jul 20 (M	
Quarterly Report	(Q1) (c) 12-Day	Primary (12P)	General (12G) Runoff (12R)
July 15 Quarterly Report	(Q2) PRE-Election Report for the:	Convention (12C)	Special (12S)
October 15 Quarterly Report	(Q3)		
January 31 Year-End Report	(YE) Elect	tion on	in the State of
July 31 Mid-Year Report (Non-elect Year Only) (MY)	ion (d) 30-Day POST-Election Report for the:	General (30G)	Runoff (30R) Special (30S)
Termination Repo (TER)	rt .	tion on	in the State of
5. Covering Period	03 01 / 2014		31 2014
I certify that I have examined	this Report and to the best of	of my knowledge and belief it	is true, correct and complete.
Type or Print Name of Treasu	rer Dr. Renee R. Ellerbroek		
Signature of Treasurer Dr.	Renee R. Ellerbroek	[Electronically Filed]	Date 04 09 / 2014
NOTE: Submission of false, erro	neous, or incomplete informati	ion may subject the person sign	ng this Report to the penalties of 2 U.S.C. §437g.
Office			FEC FORM 3X
Use Only			Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

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

Write or Type Committee Name

College of American Pathologists Political Action Committee

Report Covering the Period: From: 03 01 2014 To: 03 31 2014

		COLUMN A This Period			
6.	(a) Cash on Hand January 1, 2014		476964.56		
	(b) Cash on Hand at Beginning of Reporting Period	502309.79			
	(c) Total Receipts (from Line 19)	10138.45	60687.98		
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	512448.24	537652.54		
7.	Total Disbursements (from Line 31)	15583.90	40788.20		
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	496864.34	496864.34		
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00			
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00			

×

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

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

College of American Pathologists Political Action Committee

Report Covering the Period: From: 03	01 2014 To:	03 31 2014				
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)	8650.00	34751.00				
(ii) Unitemized(iii) TOTAL (add	1488.45	6516.45				
Lines 11(a)(i) and (ii)	10138.45	41267.45				
(b) Political Party Committees	0.00	0.00				
(such as PACs)(d) Total Contributions (add Lines	0.00	0.00				
11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	10138.45	41267.45				
12. Transfers From Affiliated/Other Party Committees	0.00	0.00				
	0.00	0.00				
13. All Loans Received	7	0.00				
Loan Repayments Received Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00				
(Carry Totals to Line 37, page 5)	0.00	19420.53				
to Federal Candidates and Other Political Committees	0.00	0.00				
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00				
 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))▶	10138.45	60687.98				
20. Total Federal Receipts (subtract Line 18(c) from Line 19)▶	10138.45	60687.98				

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures: (a) Allocated Federal/Non-Federal	Total Tills I Gilou	Calcilual Teal-10-Date
Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(II)	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	83.90	288.20
(c) Total Operating Expenditures	00.00	100.20
(add 21(a)(i), (a)(ii), and (b))▶	83.90	288.20
Transfers to Affiliated/Other Party		
CommitteesContributions to	0.00	0.00
Federal Candidates/Committees and Other Political Committees	15500.00	40500.00
Independent Expenditures	0.00	0.00
(use Schedule E) Coordinated Party Expenditures	0.00	0.00
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
(use soliedule i)		0.00
Loan Repayments Made	0.00	0.00
Lagra Mada	0.00	0.00
Loans Made Refunds of Contributions To:	0.00	0.00
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees		
(such as PACs)	0.00	0.00
(d) Total Contribution Refunds		
(add Lines 28(a), (b), and (c))▶	0.00	0.00
Other Disbursements	0.00	0.00
Fodoval Floation Activity (0.11.C.C. \$401(00))		
Federal Election Activity (2 U.S.C. §431(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	0.00	0.00
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
Emico co(a)(i), co(a)(ii) and co(b))	7	
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	15583.90	40788.20
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	15583.90	40788.20

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
3. Total Contributions (other than loans) (from Line 11(d), page 3)	10138.45	41267.45
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10138.45	41267.45
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	83.90	288.20
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	19420.53
8. Net Operating Expenditures (subtract Line 37 from Line 36)	83.90	-19132.33

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

FOR LINE NUMBER:						PAGE		6	OF		13	
(0	(check only one)											
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	I Statements may not be sold or used by any persithe name and address of any political committee to	
NAME OF COMMITTEE (In Full)		
College of American Patholog	ists Political Action Committee	
Full Name (Last, First, Middle Initial) A. Dr Dale F Andres DO		Date of Receipt
Mailing Address Mercy Clinical Laboratory		M = M / D = D / Y = Y = Y
1111 6th Ave	State 7:- 0-1	03 24 2014
City Des Moines	State Zip Code IA 50314-2611	Transaction ID : SA11AI.50424
		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	1
Mercy Med Ctr-Des Moines	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	0.0	
Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Dr. Robert P DeCresce MD,MBA		Date of Receipt
Mailing Address Jelke Bldg, Rm 532		M = M / D = D / Y = Y = Y
1750 W Harrison	State 7in Code	03 24 2014
City Chicago	State Zip Code IL 60612	Transaction ID : SA11AI.50426
Chicago	550.2	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	2500.00
Name of Employer	Occupation	
University Pathology Consultants	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	2500.00	
Other (specify) ▼	2300.00	
Full Name (Last, First, Middle Initial) S. Paul Dickman Dr.		Date of Receipt
Mailing Address Department of Pathology/La 1919 E Thomas Rd	aboratory	03 01 2014
City	State Zip Code	Transaction ID : SA11AI.50472
Phoenix	AZ 85016-7710	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	Added Back - Removed from Feb.14 Reporting
Phoenix Children's Hosp	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)		3750.00
, , ,	<u>*</u>	
TOTAL This Period (last page this line number	er only)	

	FOR LI	NE N	JMBER:	:	PAGE	-	/
Use separate schedule(s)	(check	only o	ne)				
for each category of the Detailed Summary Page	X 118	a 🗌	11b		11c		12
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13

	tatements may not be sold or used by any perso name and address of any political committee to	
NAME OF COMMITTEE (In Full)		
College of American Pathologis	ts Political Action Committee	
Full Name (Last, First, Middle Initial) Or. Janet R Durham MD		Date of Receipt
Mailing Address Great Lakes Pathologists SC		M = M / D = D / Y = Y = Y = Y
8901 W Lincoln Ave	State Zip Code	03 24 2014 Transaction ID : SA11AI.50427
West Allis	WI 53227-2409	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	1000.00
Name of Employer	Occupation	
Aurora Health ACL Labs	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) 3. Dr. Thomas E. Higgins MD		Date of Receipt
Mailing Address Department of Pathology 400 E Main St		03 24 2014
City	State Zip Code	Transaction ID : SA11AI.50428
Mount Kisco	NY 10549-3417	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer Northern Westchester Hosp	Occupation Pathologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Douglas G Knapman MBA		Date of Receipt
Mailing Address 325 Waukegan Rd		03 25 2014 _
City	State Zip Code	Transaction ID : SA11AI.50430
Northfield	IL 60093-2750	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	550.00
Name of Employer	Occupation	
College of American Pathologists	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	550.00	
SUBTOTAL of Receipts This Page (optional)	_	1800.00
TOTAL This Period (last page this line number	only)	

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

FOR LINE NUMBER:						PAGE	8	OF	13	
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		X	11a		11b		11c	12		
			13		14		15	16		17

or for commercial purposes, other than using the	name and address of any political committee to	
NAME OF COMMITTEE (In Full)		
College of American Pathologist	s Political Action Committee	
Full Name (Last, First, Middle Initial) A. Dr. George F. Kwass MD		Date of Receipt
Mailing Address Dept of Path		M = M / D = D / Y = Y = Y
140 Lincoln Ave	0000	03 03 2014
City Haverhill	State Zip Code MA 01830-6700	Transaction ID : SA11AI.50407
	1000-0700	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Merrimack Valley Hospital	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	55 0	
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Dr. Karla K. Murphy MD		Date of Receipt
Mailing Address Plaza 3		M = M / D = D / Y = Y = Y
1315 S Cliff Ave Ste 4100	State 7'- Cod-	03 04 2014
City	State Zip Code SD 57105	Transaction ID : SA11AI.50410
Sioux Falls	SD 57105	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	600.00
Name of Employer	Occupation	
Physicians Laboratory Ltd	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	55 0	
Other (specify) ▼	600.00	
Full Name (Last, First, Middle Initial) Dr. Assad J Saad MD		Date of Receipt
Mailing Address Dept of Path		M = M / D = D / Y = Y = Y
1411 N Beckley Ave Ste 174		03 30 2014
City	State Zip Code	Transaction ID : SA11AI.50451
Dallas	TX 75203	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	
Prism Pathology	Pathologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	1000.00	
SUBTOTAL of Receipts This Page (optional)		2100.00
oooo.p.o milo i age (optional)		7 7 7
TOTAL This Period (last page this line number of	only)	

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

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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) College of American Patholog	ists Political Action Committee			
Full Name (Last, First, Middle Initial) Dr. Louis D Wright Jr MD Mailing Address PO Box 998	ouis D Wright Jr MD			
City				
Charleston	State Zip Code SC 29402-0998	Transaction ID : SA11AI.50438 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	1000.00		
Name of Employer	Occupation			
Path Svcs Assoc LLC	Pathologist			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00			
Full Name (Last, First, Middle Initial) 3.		Date of Receipt		
Mailing Address	ailing Address			
City	State Zip Code	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С			
Name of Employer	Occupation			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼			
Full Name (Last, First, Middle Initial)		Date of Receipt		
Mailing Address		M = M / D = D / Y = Y = Y		
City	State Zip Code	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С	7		
Name of Employer	Occupation			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼			
SUBTOTAL of Receipts This Page (optional).		1000.00		
TOTAL This Period (last page this line number	er only)	8650.00		

SCHEDULE B (FEC Form 3X)				FOR LINE NUMBER: PAGE 10 OF 13									
	EMIZED DISBURSEMENTS	Use separate schedule(s)	\ I ' '	OR LINE N check only o		THOMBETT.					. 10	01	
11	EIVIIZED DISDURSEIVIEN IS	for each category of the	"		21b	22		23	□ 2	4 Г	25		7 26
		Detailed Summary Page			27	28a		28b		8c	29	-	30b
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	NAME OF COMMITTEE (In Full)	Dalletaal Ascos C		_									
/	College of American Pathologists F	Political Action Com	mitte	е									
<u></u>	Full Name (Last, First, Middle Initial)												
Α.	Sun Trust Bank						Date of Disbursement						
<i>,</i>	Can Tract Built							M M / D D / Y Y Y					
	Mailing Address P.O. Box 85024						03 03 2014						
	-												
	City State Zip Code							Transaction ID : SB21B.50452					
	Richmond	VA 23285		irans	sact	ion iD	: 562	16.50	452				
	Purpose of Disbursement				\neg								
	Moneris ACH Fee					Amoun	t of	Each	Disbu	seme	nt this	Perio	od
	Candidate Name		Cate		y/						4	11.90	
	000		T	ype				7	_	7	_		
	Office Sought: House Disburser												
	Senate President	Primary General											
	State: President State:	Other (specify) ▼											
_													
D	Full Name (Last, First, Middle Initial)					Data	t D:	ممريحم	mant				
В.	Sun Trust Bank	un Trust Bank					Date of Disbursement						
	Mailing Address D.O. D 05004					M = M 03	1		D /	Y	y y 2014	Y	
	Mailing Address P.O. Box 85024					03 20 2014							
	City	State Zip Code											
	Richmond	VA 23285				Trans	sact	ion ID	: SB2	1B.50	453		
	Purpose of Disbursement			-	\neg								
	Account Analysis Fee					Amoun	t of	Each	Disbu	seme	nt this	Perio	od
	Candidate Name		Cate	egor	y/			-		-		57.00	
				ype	-		-	7	_	7	-	57.00	
	Office Sought: House Disburser												
	Senate	Primary General											
	President	Other (specify) ▼											
_	State: District:												
	Full Name (Last, First, Middle Initial)					_							
C.							Date of Disbursement						
	Marker Address						M M / D D / Y Y Y Y						
_	Mailing Address						4	_			_		
	City Chata 7:- Co-1-												
	City State Zip Code												
	Purpose of Disbursement												
						Amoun	t of	Fach	Dishu	seme	nt thic	Pario	nd
	Candidate Name		Cate	anor	v/	, anoun	. 01	_4011	u	331110		. 0110	
				ype	y,	Ι.				_			
	Office Sought: House Disburser	ment For:			\dashv			7		7			
	Senate	Primary General											
	President	Other (specify) ▼											
	State: District:												
							-	-	_	-	_		_
s	UBTOTAL of Disbursements This Page (optional)				•			.m 1		m	9	8.90	
\vdash	2 ,				_		-				-		
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S	CHEDULE B (FEC Form 3X)			FOR LINE I	NUMBER:		PAGE	11 (OF 13
IT	EMIZED DISBURSEMENTS	Use separate for each cate		(check only	one)				
		Detailed Sum		21b	22	X 23	24	25	26
_		<u> </u>		27	28a	28b	28c	29	30b
Ar or	ny information copied from such Reports and Staten for commercial purposes, other than using the name	nents may not b ne and address	e sold or use of any politica	ed by any perso al committee to	n for the solicit co	purpose of ntributions f	soliciting of rom such	contribut	tions ee.
	NAME OF COMMITTEE (In Full)								
	College of American Pathologists F	Political Act	ion Comr	nittee					
_	Full Name (Last, First, Middle Initial)				_				
Α.	BADGERPAC	Date of Disbursement							
	Mailing Address P O Box 70980				03	27		2014	,
	City S		Code		Trans	action ID :	SB23 50/F	:4	
	Washington	DC 20	004		ITAIIS	action ib .	3023.3040	, -	
	Purpose of Disbursement				Amoun	of Each D	isburseme	nt this f	Period
	Candidate Name			Category/				3000	.00
	Office Sought: House Disbursen	nent For: 2014		Туре		,	-		
	Senate	Primary	General						
		Other (specify)							
_	State: District:		OTHER						
_	Full Name (Last, First, Middle Initial)				5.	· D			
В.	BILIRAKIS FOR CONGRESS					Disbursem			
	Mailing Address P.O. BOX 606				03	27		2014	Y
	City S TARPON SPRINGS		Code 688		Trans	action ID :	SB23.504	56	
	Purpose of Disbursement								
					Amount	of Each D	isburseme	nt this F	Period
	Candidate Name			Category/ Type		.,	.,	1000	0.00
	Office Sought: House Disbursen	nent For: 2014							
		Primary	General						
		Other (specify)	▼						
_	State: FL District: 12 Full Name (Last, First, Middle Initial)								
C.	BUTTERFIELD FOR CONGRESS				Date of	Disbursem	ent		
					M = M	/ D D	/ Y	YY	Υ
	Mailing Address P.O. BOX 2571				03	27		2014	
			Code		Trans	action ID :	SB23.504	58	
	WILSON Purpose of Disbursement	NC 27	894						
	rulpose of disbursement				A	- (F B		. a. alede - T	Deside at
	Candidate Name			Category/ Type	Amoun	of Each D	isburseme	1000	
	Office Sought:	nent For: 2014		, ypc		7			
	Senate Senate	Primary	General						
	President	Other (specify)	▼						
	State: NC District: 01	<u> </u>							
								5000	00
S	SUBTOTAL of Disbursements This Page (optional)			······		-		5000	.00
Ţ.	OTAL This Period (last page this line number only)	<u> </u>							- 1
Ι'	'OTAL This Period (last page this line number only)					7	,		

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SCHEDULE B (FEC Form 3X)	The committee of 1173	FOR LINE NUMBER: PAGE 12 OF 13							
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only							
	Detailed Summary Page	21b 27	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$						
Any information copied from such Reports and Statem	ents may not be sold or used								
or for commercial purposes, other than using the nam									
NAME OF COMMITTEE (In Full)									
College of American Pathologists F	olitical Action Comm	nittee							
Full Name (Last, First, Middle Initial)									
A. COMMITTEE TO ELECT MICHELI	Date of Disbursement								
Mailing Address 2015 DIETZ PL NW			03 27 2014						
City	tate Zip Code								
	NM 87107		Transaction ID : SB23.50459						
Purpose of Disbursement									
Condidate Name			Amount of Each Disbursement this Period						
Candidate Name		Category/	1000.00						
Office Sought:	ent For: 2014	Туре							
	Primary General								
President	Other (specify) ▼								
State: NM District: 01									
Full Name (Last, First, Middle Initial)			Data of Dishurasment						
B. FRIENDS OF JIM CLYBURN			Date of Disbursement						
Mailing Address P.O. BOX 12567			03 27 2014						
	tate Zip Code SC 29211		Transaction ID : SB23.50461						
COLUMBIA Purpose of Disbursement	SC 29211								
·			Amount of Each Disbursement this Period						
Candidate Name		Category/	1500.00						
0		Type	1500.00						
	ent For: 2014 Primary General								
	Other (specify)								
State: SC District: 06	· (-i								
Full Name (Last, First, Middle Initial)									
C. HAGAN FOR US SENATE INC			Date of Disbursement						
Mailing Address DO DOV 20102			M M / D D / Y Y Y Y Y						
Mailing Address PO BOX 29103			03 27 2014						
City	tate Zip Code		Transaction ID - SP22 F0465						
GREENSBORO	NC 27429		Transaction ID : SB23.50465						
Purpose of Disbursement									
Candidate Name			Amount of Each Disbursement this Period						
Canadate Name		Category/ Type	1000.00						
Office Sought: House Disbursen	ent For: 2014	V F -							
	Primary General								
	Other (specify) ▼								
State: NC District: 00									
CURTOTAL of Diskurs are and This Days (and			3500.00						
SUBTOTAL of Disbursements This Page (optional)		······							
TOTAL This Period (last page this line number only).									

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 13 OF 13			
ITEMIZED DISBURSEMENTS	Use separate schedule(s) (check only	INOMBETT.			
	for each category of the Detailed Summary Page	21b	22 🔀 23 24 25 26			
		27	28a 28b 28c 29 30k			
Any information copied from such Reports and State						
or for commercial purposes, other than using the na	me and address of any polit	ical committee to	solicit contributions from such committee.			
NAME OF COMMITTEE (In Full)	- 110					
College of American Pathologists	Political Action Com	nmittee				
Full Name (Last, First, Middle Initial)						
A. KELLY PAC	•					
	M M / D D / Y Y Y Y					
Mailing Address 901 N WASHINGTON STREET			03 27 2014			
SUITE 700	Ctata Zin Cada					
City WASHINGTON	State Zip Code DC 22314		Transaction ID : SB23.50467			
Purpose of Disbursement	22017					
·			Amount of Each Disbursement this Period			
Candidate Name		Category/	1000.00			
		Type	1000.00			
	ment For: 2014					
Senate President	Primary General					
State: District:	Other (specify) ▼ OTHER					
Full Name (Last, First, Middle Initial)	OTTIER					
B. NATIONAL REPUBLICAN CONG	RESSIONAL COM	MITTEE	Date of Disbursement			
Without tell obelotive conto	TEOOIOI VIE OOMI	VIII I LL	M M / D D / Y Y Y Y			
Mailing Address 320 FIRST STREET			03 27 2014			
·						
City WASHINGTON	State Zip Code DC 20003		Transaction ID: SB23.50468			
Purpose of Disbursement	20003					
•			Amount of Each Disbursement this Period			
Candidate Name		Category/	5000.00			
		Type	5000.00			
	ment For: 2014					
Senate President	Primary General					
State: District:	Other (specify) ▼ OTHER					
Full Name (Last, First, Middle Initial)	OHIEK					
C. PALLONE FOR CONGRESS	Date of Disbursement					
	M M / D D / Y Y Y Y					
Mailing Address PO BOX 3176			03 27 2014			
Cit.	Otata Zin O I					
City LONG BRANCH	State Zip Code NJ 07740		Transaction ID: SB23.50470			
Purpose of Disbursement	01110					
			Amount of Each Disbursement this Period			
Candidate Name		Category/	1000.00			
		Type	1000.00			
	ment For: 2014					
Senate President	Primary General					
State: NJ District: 06	Other (specify) ▼					
5.5to. 140 Biotilot. 00						
SUBTOTAL of Disbursements This Page (optional).			7000.00			
- 22.2.1.2 of 2.000100110110 Tills Fago (optional).						
TOTAL This Period (last page this line number only)		15500.00			