

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED
FEC MAIL CENTER

2015 JUL 14 AM 10:25
Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

American Association of Bioanalysts Political Action Committee (AABA PCA)

ADDRESS (number and street)

906 Olive Street, Suite 1200

Check if different
than previously
reported. (ACC)

Saint Louis

MO

63101

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00249581

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

04 / 01 / 2015

through

06 / 30 / 2015

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 Mark S. Birenbaum

Signature of Treasurer

Mark S. Birenbaum

Date

07 / 09 / 2015

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
Use
Only

FEC FORM 3X
Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

(AAB#PAC)

American Association of Bioanalysts Political Action Committee

Report Covering the Period:

From:

MM ' DD ' YYYY
04 ' 01 ' 2015

To:

MM ' DD ' YYYY
06 ' 30 ' 2015

**COLUMN A
This Period**

**COLUMN B
Calendar Year-to-Date**

6. (a) Cash on Hand

January 1,

YYYY
2015

2512031

(b) Cash on Hand at

Beginning of Reporting Period.....

2512341

(c) Total Receipts (from Line 19).....

14115

14425

(d) Subtotal (add Lines 6(b) and

6(c) for Column A and Lines

6(a) and 6(c) for Column B).....

2526456

2526456

7. Total Disbursements (from Line 31).....

000

000

8. Cash on Hand at Close of

Reporting Period

(subtract Line 7 from Line 6(d)).....

2526456

2526456

9. Debts and Obligations Owed **TO**

the Committee (Itemize all on

Schedule C and/or Schedule D).....

000

10. Debts and Obligations Owed **BY**

the Committee (Itemize all on

Schedule C and/or Schedule D).....

000



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)

Page 3

Write or Type Committee Name

*American Association of Bioanalysts Political Action Committee (AAB*PAC)*

Report Covering the Period:

From:

MM / DD / YYYY
04 / 01 / 2015

To:

MM / DD / YYYY
06 / 30 / 2015

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).....

(ii) Unitemized

(iii) TOTAL (add
Lines 11(a)(i) and (ii).....▶

(b) Political Party Committees

(c) Other Political Committees
(such as PACs).....

(d) Total Contributions (add Lines
11(a)(iii), (b), and (c)) (Carry
Totals to Line 33, page 5).....▶

12. Transfers From Affiliated/Other

Party Committees.....

13. All Loans Received.....

14. Loan Repayments Received.....

15. Offsets To Operating Expenditures
(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

16. Refunds of Contributions Made
to Federal Candidates and Other
Political Committees.....

17. Other Federal Receipts
(Dividends, Interest, etc.).....

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account
(from Schedule H3).....

(b) Levin Funds (from Schedule H5).....

(c) Total Transfers (add 18(a) and 18(b))..

**19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c)).....▶**

20. Total Federal Receipts
(subtract Line 18(c) from Line 19).....▶

000

138.00

138.00

138.00

3.15

141.15

141.15

000

138.00

138.00

138.00

6.25

144.25

144.25

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Ex-
penditures

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

33. Total Contributions (other than loans)
(from Line 11(d), page 3)
34. Total Contribution Refunds
(from Line 28(d))
35. Net Contributions (other than loans)
(subtract Line 34 from Line 33)
36. Total Federal Operating Expenditures
(add Line 21(a)(i) and Line 21(b)) ►
37. Offsets to Operating Expenditures
(from Line 15, page 3).....
38. Net Operating Expenditures
(subtract Line 37 from Line 36) ►

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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 1 OF 1	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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)

American Association of Bioanalysts Political Action Committee

(AAB + PAC)

Full Name (Last, First, Middle Initial)

A.

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. ☐ C

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

Y Y Y Y Y Y Y Y

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. ☐ C

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

Y Y Y Y Y Y Y Y

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. ☐ C

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

Y Y Y Y Y Y Y Y

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

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

Y Y Y Y Y Y Y Y

0.00

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)

PAGE 1 OF 1

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)

*American Association of Bioanalysts Political Action Committee (AAB*PCA)*

Full Name (Last, First, Middle Initial)

A.

Date of Disbursement

Mailing Address

MM / DD / YYYY

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

Mailing Address

MM / DD / YYYY

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

Mailing Address

MM / DD / YYYY

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

Office Sought: ☐ House
☐ Senate
☐ President

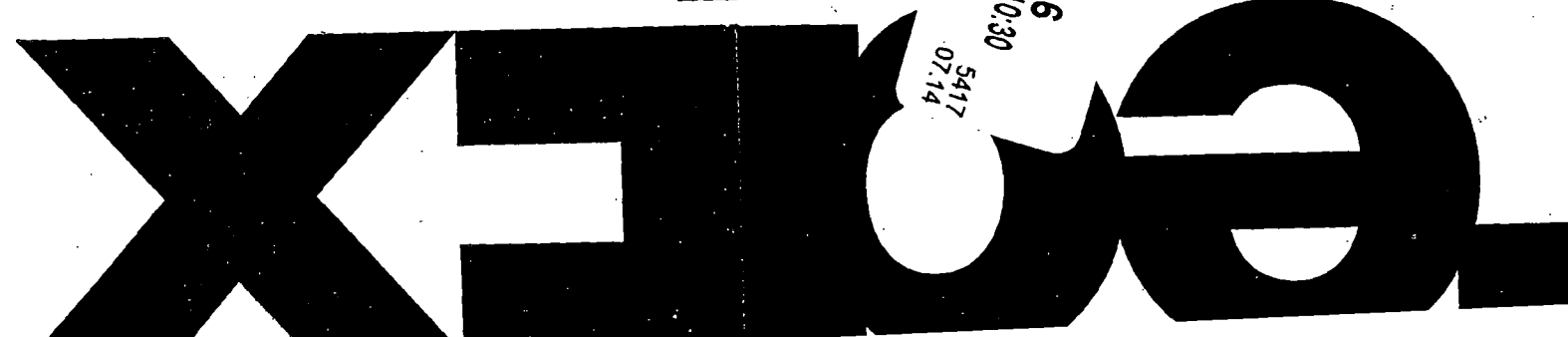
Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

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

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

000
000



Express

RT 677
FZ

6
10:30
5417
07.14

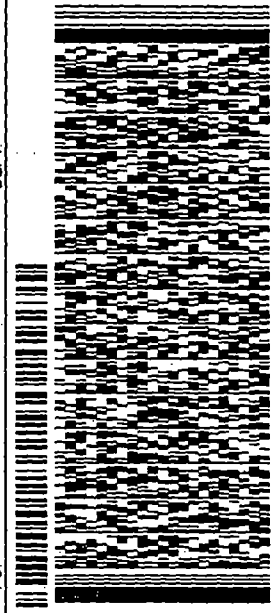
earthsmart
FedEx carbon-neutral
envelope shipping

MARY S. BARNBAUM
AMERICAN ASSOCIATION OF BIOANALYSTS
906 OLIVE STREET
SUITE 1200
SAINT LOUIS, MO 63101
UNITED STATES US

ACT WT: 0.50 LB
CAD: 4689003/NET3670
BILL SENDER

TO
FEDERAL ELECTION COMMISSION
FEDERAL ELECTION COMMISSION
999 E ST NW

WASHINGTON DC 20463
(202) 694-1000
INV. REF.
PO. DEPT.

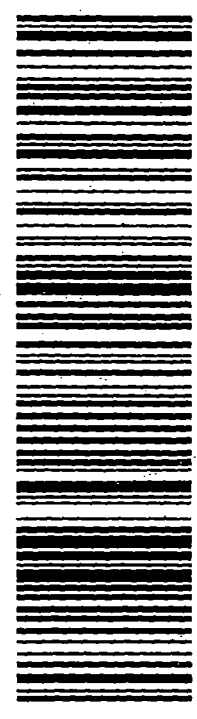


REL #
3783346

TUE - 14 JUL 10:30A
PRIORITY OVERNIGHT

TRK# 7740 3737 5417
0201


XC RDVA
20463
DC-US IAD



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2015 JUL 14

539J3M1A15/3100

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
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<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>fed Ex</i>	Shipping Date <i>7/13/15</i>
	Next Business Day Delivery <input checked="" type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
 PREPARER	<i>7/14/15</i> DATE PREPARED

(3/2015)

2015-07-14 09:00:00