

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
American Clinical Laboratory Association PAC (LabPAC)

ADDRESS (number and street) 1100 New York Avenue, NW  
Suite 725 West  
 Check if different than previously reported. (ACC)  
Washington DC 20005

2. **FEC IDENTIFICATION NUMBER** C00410084  
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 Quarterly 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 08 05 2010 through 09 30 2010

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 Charlene MacDonald

Signature of Treasurer Electronically Filed by Charlene MacDonald Date 10 05 2010

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									
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**FEC FORM 3X**  
(Rev. 12/2004)

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
American Clinical Laboratory Association PAC (LabPAC)

Report Covering the Period: From: 

M	M
0	8

D	D
0	5

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		4400.00
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	13950.00									
(c) Total Receipts (from Line 19) .....	1450.00	48950.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	15400.00	53350.00								
7. Total Disbursements (from Line 31) .....	14400.00	52350.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	1000.00	1000.00								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> 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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

American Clinical Laboratory Association PAC (LabPAC)

Report Covering the Period: From: 

M	M
0	8

D	D
0	5

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

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) .....	1200.00	43400.00
(ii) Unitemized .....	250.00	550.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	1450.00	43950.00
(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) .....	1450.00	43950.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	5000.00
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 Transfer (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)) .....	1450.00	48950.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	1450.00	48950.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared 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.....	14400.00	52350.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	14400.00	52350.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	14400.00	52350.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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) .....	1450.00	43950.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	1450.00	43950.00
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:	PAGE 6 / 11
	(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

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 Clinical Laboratory Association PAC (LabPAC)

**A.**

Full Name (Last, First, Middle Initial) Richard Daly		Date of Receipt MM / DD / YYYY 09 / 27 / 2010
Mailing Address 1233 University Ave		<b>Transaction ID:</b> 00929.C105
City Palo Alto	State CA	Zip Code 94301-2241
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer Laboratory Partners	Occupation Manager	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

**B.**

Full Name (Last, First, Middle Initial) Mark Schroeder		Date of Receipt MM / DD / YYYY 08 / 27 / 2010
Mailing Address 23111 Umstead		<b>Transaction ID:</b> 00929.C104
City Chapel Hill	State NC	Zip Code 27517-8502
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 200.00
Name of Employer Lab Corp of America	Occupation Manager	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1200.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	1200.00

**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"/> 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 Clinical Laboratory Association PAC (LabPAC)

<b>A.</b> Full Name (Last, First, Middle Initial) <b>NEW DEMOCRAT COALITION POLITICAL ACTION COMMITTEE AKA NDC PAC</b> Mailing Address 315 C Street SE Lower Level City Washington State DC Zip Code 20003-2080 Purpose of Disbursement STOP PAYMENT Candidate Name NEW DEMOCRAT COALITION POLITICAL ACTION COMMITTEE AKA NDC PAC Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ ANNUAL/OTHER	Transaction ID: 00929.E146 Date of Disbursement 09 / 02 / 2010
	Amount of Each Disbursement this Period -5000.00 STOP PAYMENT

<b>B.</b> Full Name (Last, First, Middle Initial) <b>NEW DEMOCRAT COALITION POLITICAL ACTION COMMITTEE AKA NDC PAC</b> Mailing Address 315 C Street SE Lower Level City Washington State DC Zip Code 20003-2080 Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name NEW DEMOCRAT COALITION POLITICAL ACTION COMMITTEE AKA NDC PAC Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ ANNUAL/OTHER	Transaction ID: 00929.E145 Date of Disbursement 09 / 07 / 2010
	Amount of Each Disbursement this Period 5000.00 DIRECT CONTRIBUTION

<b>C.</b> Full Name (Last, First, Middle Initial) <b>Burgess for Congress</b> Mailing Address 217 3rd St SE City Washington State DC Zip Code 20003-1904 Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name MICHAEL C. BURGESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 26 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00929.E141 Date of Disbursement 09 / 07 / 2010
	Amount of Each Disbursement this Period 500.00 DIRECT CONTRIBUTION

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**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"/> 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 Clinical Laboratory Association PAC (LabPAC)

<b>A.</b> Full Name (Last, First, Middle Initial) <b>DEMOCRATIC SENATORIAL CAMPAIGN COMMITTEE</b> Mailing Address 120 Maryland Ave NE City Washington State DC Zip Code 20002-5610 Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name DEMOCRATIC SENATORIAL CAMPAIGN COMMITTEE Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: ANNUAL/OTHER	Transaction ID: 00929.E154 Date of Disbursement 09 / 17 / 2010
	Amount of Each Disbursement this Period 1000.00 DIRECT CONTRIBUTION

<b>B.</b> Full Name (Last, First, Middle Initial) <b>Gingrey for Congress</b> Mailing Address 700 12th St NW Suite 700 City Washington State DC Zip Code 20005-3945 Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name J. PHILLIP GINGREY Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: GA District: 11	Transaction ID: 00929.E144 Date of Disbursement 09 / 07 / 2010
	Amount of Each Disbursement this Period 1000.00 DIRECT CONTRIBUTION

<b>C.</b> Full Name (Last, First, Middle Initial) <b>Herger for Congress</b> Mailing Address PO Box 1007 City Willows State CA Zip Code 95988-1007 Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name WALLY HERGER Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CA District: 02	Transaction ID: 00929.E152 Date of Disbursement 09 / 15 / 2010
	Amount of Each Disbursement this Period 1000.00 DIRECT CONTRIBUTION

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)



**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"/> 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 Clinical Laboratory Association PAC (LabPAC)

A.	Full Name (Last, First, Middle Initial) Georgians for Isakson	Transaction ID: 00929.E147 Date of Disbursement 09 / 15 / 2010
	Mailing Address 900 19th St NW FI 8	
	City Washington State DC Zip Code 20006-2105	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement DIRECT CONTRIBUTION	Category/ Type
	Candidate Name JOHN HARDY ISAKSON	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		DIRECT CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) Pallone for Congress	Transaction ID: 00929.E151 Date of Disbursement 09 / 15 / 2010
	Mailing Address P.O. Box 3176	
	City Long Branch State NJ Zip Code 07740-	Amount of Each Disbursement this Period 2400.00
	Purpose of Disbursement DIRECT CONTRIBUTION	Category/ Type
	Candidate Name FRANK PALLONE, JR.	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 06	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		DIRECT CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) Pascrell for Congress	Transaction ID: 00929.E143 Date of Disbursement 09 / 07 / 2010
	Mailing Address 38 Ivy Street SE	
	City Washington State DC Zip Code 20003-4006	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement DIRECT CONTRIBUTION	Category/ Type
	Candidate Name WILLIAM J. PASCRELL, JR.	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 08	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		DIRECT CONTRIBUTION

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	4400.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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 Clinical Laboratory Association PAC (LabPAC)

A.	Full Name (Last, First, Middle Initial) Friends of Harry Reid	Transaction ID: 00929.E142 Date of Disbursement 09 / 07 / 2010
	Mailing Address 426 C Street, NE Rear Bldg	Amount of Each Disbursement this Period 1500.00
	City Washington State DC Zip Code 20002-5840	
	Purpose of Disbursement DIRECT CONTRIBUTION	Category/Type
	Candidate Name HARRY REID	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		DIRECT CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) Roskam for Congress	Transaction ID: 00929.E148 Date of Disbursement 09 / 15 / 2010
	Mailing Address PO Box 713	Amount of Each Disbursement this Period 1000.00
	City Wheaton State IL Zip Code 60187-0713	
	Purpose of Disbursement DIRECT CONTRIBUTION	Category/Type
	Candidate Name PETER ROSKAM	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 06	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		DIRECT CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) Volunteers for Shimkus	Transaction ID: 00929.E150 Date of Disbursement 09 / 15 / 2010
	Mailing Address 700 12th St NW	Amount of Each Disbursement this Period 1000.00
	City Washington State DC Zip Code 20005-3945	
	Purpose of Disbursement DIRECT CONTRIBUTION	Category/Type
	Candidate Name JOHN M SHIMKUS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 19	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		DIRECT CONTRIBUTION

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3500.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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 Clinical Laboratory Association PAC (LabPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Pete Stark Re-Election Committee  Mailing Address PO Box 75214  City Washington State DC Zip Code 20013-0214 Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name FORTNEY P. STARK Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 13 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 00929.E149 <b>Date of Disbursement</b> 09 / 15 / 2010	Amount of Each Disbursement this Period 1000.00  DIRECT CONTRIBUTION
<b>B.</b>	Full Name (Last, First, Middle Initial) Tiberi for Congress  Mailing Address 217 3rd St SE  City Washington State DC Zip Code 20003-1904 Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name PATRICK J TIBERI Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 12 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 01005.E155 <b>Date of Disbursement</b> 09 / 29 / 2010	Amount of Each Disbursement this Period 1000.00  DIRECT CONTRIBUTION
<b>C.</b>	Full Name (Last, First, Middle Initial) Upton for All of Us  Mailing Address 104 Hume Ave  City Alexandria State VA Zip Code 22301-1015 Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name FREDERICK STEPHEN UPTON Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 06 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 00929.E153 <b>Date of Disbursement</b> 09 / 17 / 2010	Amount of Each Disbursement this Period 1000.00  DIRECT CONTRIBUTION

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>14400.00</b>