

**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)

**Quest Diagnostics Incorporated Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Richard E Neal For Congress Committee**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		22		2017

Mailing Address 76 Magnolia Terrace

City Springfield State MA Zip Code 01108

FEC Identification Number

**C** C00226522

Purpose of Disbursement  
Contribution to a federal candidate

**011**  
Category/  
Type

**Transaction ID : 4310797**

Amount of Each Disbursement this Period

1500.00

Candidate Name

**Neal, Richard, E., Rep.,**

Office Sought:  House  
 Senate  
 President  
State: MA District: 01

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

Memo Item Contribution to a federal candidate

Full Name (Last, First, Middle Initial)

**B. American Clinical Laboratory Association PAC (LABPAC)**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		22		2017

Mailing Address 1100 New York Avenue, NW  
Suite 725 West

City Washington State DC Zip Code 20005

FEC Identification Number

**C** C00410084

Purpose of Disbursement  
Contribution to a federal committee

**011**  
Category/  
Type

**Transaction ID : 4310798**

Amount of Each Disbursement this Period

5000.00

Candidate Name

**American Clinical Laboratory Association PAC (LABPAC)**

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

Memo Item Contribution to a federal committee

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City State Zip Code

FEC Identification Number

**C**

Purpose of Disbursement

Category/  
Type

Amount of Each Disbursement this Period

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Memo Item

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

6500.00

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

6500.00