

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) American Dental Association Independent Expenditures Committee
FEC IDENTIFICATION NUMBER C C00488338
Check if 24-hour report 48-hour report New report Amends report filed on 01 / 30 / 2014

Full Name of Payee Public Opinion Strategies
Mailing Address 214 N. Fayette Street
City Alexandria State VA Zip Code 22314
Purpose of Expenditure Polling Survey TX-36 Category/Type 005
Name of Federal Candidate Brian Babin Support Oppose
Calendar Year-To-Date Per Election for Office Sought 8125.00

Date of Public Distribution/Dissemination 01 / 29 / 2014
Amount 8125.00
Transaction ID : 12226256
Date of Disbursement or Obligation
Office Sought: House District: 36 State: TX
Disbursement For: Primary General Other (specify)

Full Name of Payee
Mailing Address
City State Zip Code
Purpose of Expenditure Category/Type
Name of Federal Candidate Support Oppose
Calendar Year-To-Date Per Election for Office Sought

Date of Public Distribution/Dissemination
Amount
Date of Disbursement or Obligation
Office Sought: House District: State:
Disbursement For: Primary General Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 8125.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
Signature: Dr. Douglas Hadnot [Electronically Filed] Date: 03 / 18 / 2014

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F24A

Transaction ID :

Due to a software error, the dissemination date was not being pulled onto the report. That error has now been fixed. All subsequent reports will also be amended and filed.

Form/Schedule:

Transaction ID: