

**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 Academy of Pediatric Dentistry Political Action Committee

ADDRESS (number and street)

211 E Chicago Ave

Suite 700

Check if different than previously reported. (ACC)

Chicago

IL

80611

2863

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C00365965

3. IS THIS REPORT

X

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)

X 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

07

01

2003

through

12

31

2003

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

John S. Rutkauskas

Signature of Treasurer

Electronically Filed by John S. Rutkauskas

Date

01

21

2004

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. 02/2003)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

American Academy of Pediatric Dentistry Political Action Committee

Report Covering the Period: From: ^M07 ^D01 ^Y2003 To: ^M12 ^D31 ^Y2003

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 ^Y 2003 ^M ^D		91495.00
(b) Cash on Hand at Beginning of Reporting Period	129295.00	
(c) Total Receipts (from Line 19)	68385.00	106185.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	197680.00	197680.00
<hr/>		
7. Total Disbursements (from Line 31)	2000.00	2000.00
<hr/>		
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	195680.00	195680.00
<hr/>		
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. 02/2003)

Page 3

Write or Type Committee Name

American Academy of Pediatric Dentistry Political Action Committee

Report Covering the Period: From: ^M07 ⁻01 ⁻2003 To: ^M12 ⁻31 ⁻2003

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)	8825.00	
(ii) Unitemized	59560.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii))	68385.00	106185.00
(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)	68385.00	106185.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
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))	68385.00	106185.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	68385.00	106185.00

DETAILED SUMMARY PAGE

of Disbursements

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
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.....	2000.00	2000.00
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 ActMty (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))..	2000.00	2000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	2000.00	2000.00

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
33. Total Contributions (other than loans) from Line 11(d), page 3)	68385.00	106185.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	68385.00	106185.00
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)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 18

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
13	14	15	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 Academy of Pediatric Dentistry Political Action Committee

Full Name (Last, First, Middle Initial) A. Dr. Dwight J. Ashby		Date of Receipt M / D / Y 12 / 23 / 2003
Mailing Address 450B Union Deposit Road		Transaction ID: SA11A1.7431
City Harrisburg	State PA	Zip Code 17111
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self-Employed	Occupation Pediatric Dentist	Aggregate Year-to-Date ▼ 350.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Dr. James C. Beall		Date of Receipt M / D / Y 07 / 24 / 2003
Mailing Address 1243 Savannah Highway		Transaction ID: SA11A1.6822
City Charleston	State SC	Zip Code 29407
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Children's Dentistry, PA	Occupation Pediatric Dentist	Aggregate Year-to-Date ▼ 350.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Dr. K. Jean Beuchamp		Date of Receipt M / D / Y 07 / 18 / 2003
Mailing Address 1833 Memorial Drive		Transaction ID: SA11A1.6598
City Clarksville	State TN	Zip Code 37043
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self Employed	Occupation Pediatric Dentist	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts TN's Page (optional)	600.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 7 / 18

(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
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NAME OF COMMITTEE (In Full)
American Academy of Pediatric Dentistry Political Action Committee

Full Name (Last, First, Middle Initial) A. Dr. Stephen R. Branam		Date of Receipt M / D / Y 07 / 24 / 2003
Mailing Address 314D Dustin Road		Transaction ID: SA11A1.6802
City Oregon	State OH	Zip Code 43616
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Self-Employed	Occupation Pediatric Dentist	450.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) B. Dr. Carol J. Braun		Date of Receipt M / D / Y 07 / 18 / 2003
Mailing Address 2816 Veach Road		Transaction ID: SA11A1.6591
City Owensboro	State IN	Zip Code 42303
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Self-Employed	Occupation Pediatric Dentist	300.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) C. Dr. Kennal P. Brown, Jr.		Date of Receipt M / D / Y 07 / 21 / 2003
Mailing Address 308 North Lewis Street, #2		Transaction ID: SA11A1.6734
City New Iberia	State LA	Zip Code 70563
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Self Employed	Occupation Pediatric Dentist	350.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	

SUBTOTAL of Receipts This Page (optional)	600.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 8/18

(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
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NAME OF COMMITTEE (In Full)
American Academy of Pediatric Dentistry Political Action Committee

Full Name (Last, First, Middle Initial) A. Dr. J. David Crossley		Date of Receipt M / D / Y 08 / 21 / 2008
Mailing Address 950 West First North Street		Transaction ID: SA11A1.7093
City Morristown	State TN	Zip Code 37814-4550
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self-Employed	Occupation Pediatric Dentist	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Dr. Barry J. Durrey		Date of Receipt M / D / Y 07 / 11 / 2008
Mailing Address 8500 Quaker Avenue, Suite F		Transaction ID: SA11A1.6570
City Lubbock	State TX	Zip Code 79413
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self-Employed	Occupation Pediatric Dentist	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Dr. Barry J. Durrey		Date of Receipt M / D / Y 07 / 18 / 2008
Mailing Address 8500 Quaker Avenue, Suite F		Transaction ID: SA11A1.6703
City Lubbock	State TX	Zip Code 79413
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Self-Employed	Occupation Pediatric Dentist	Aggregate Year-to-Date ▼ 350.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts TN's Page (optional)	▶	850.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 18
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Academy of Pediatric Dentistry Political Action Committee

Full Name (Last, First, Middle Initial) A. Dr. Catherine Enright		Date of Receipt M / D / Y 08 / 06 / 2003
Mailing Address 328D Howell Mill Road, #230		Transaction ID: SA11A1.7013
City Atlanta	State GA	Zip Code 30327
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 125.00
Name of Employer Self Employed	Occupation Pediatric Dentist	275.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) B. Dr. Scott D. Goodman		Date of Receipt M / D / Y 07 / 18 / 2003
Mailing Address 134D Matthews Township Pkwy. Suite 201		Transaction ID: SA11A1.6595
City Matthews	State SC	Zip Code 28105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self Employed	Occupation Pediatric Dentist	500.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) C. Dr. Tameka L. Gough		Date of Receipt M / D / Y 07 / 18 / 2003
Mailing Address 201 North Alma Drive		Transaction ID: SA11A1.6529
City Allen	State TX	Zip Code 75013
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Self Employed	Occupation Pediatric Dentist	350.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	

SUBTOTAL of Receipts This Page (optional)	▶	725.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 18

(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
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NAME OF COMMITTEE (In Full)
American Academy of Pediatric Dentistry Political Action Committee

Full Name (Last, First, Middle Initial) A. Dr. Rhea Haugseth		Date of Receipt M / D / Y 09 / 16 / 2003
Mailing Address 283B Hearthside Court		Transaction ID: SA11A1.7335
City Marietta	State GA	Zip Code 30067
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self Employed	Occupation Pediatric Dentist	Aggregate Year-to-Date ▼ 1100.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Dr. Craig S. Hollander		Date of Receipt M / D / Y 07 / 18 / 2003
Mailing Address 3555 Sunset Office Drive, #210		Transaction ID: SA11A1.6623
City Sunset Hills	State MO	Zip Code 63127
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Pediatric Dentistry of Sunset Hills	Occupation Pediatric Dentist	Aggregate Year-to-Date ▼ 600.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Dr. Jeffrey D. Holt		Date of Receipt M / D / Y 07 / 18 / 2003
Mailing Address 4112 N. Josey Lane, #128		Transaction ID: SA11A1.6596
City Carrollton	State TX	Zip Code 75007-1518
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Self-Employed	Occupation Pediatric Dentist	Aggregate Year-to-Date ▼ 300.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	▶	1400.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 11 / 18

(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
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NAME OF COMMITTEE (In Full)
American Academy of Pediatric Dentistry Political Action Committee

Full Name (Last, First, Middle Initial) A. Dr. William L. Humphries		Date of Receipt M / D / Y 08 / 06 / 2003
Mailing Address 11215 Hermitage Road, #10D		Transaction ID: SA11A1.7024
City Little Rock	State AR	Zip Code 72211-3857
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Self Employed	Occupation Pediatric Dentist	Aggregate Year-to-Date ▼ 300.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Dr. Brad M. Jerger		Date of Receipt M / D / Y 07 / 18 / 2003
Mailing Address 2101 North Main Street		Transaction ID: SA11A1.6643
City Decatur	State IL	Zip Code 62526
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
Name of Employer Self Employed	Occupation Pediatric Dentist	Aggregate Year-to-Date ▼ 800.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Dr. James E. Jerger		Date of Receipt M / D / Y 07 / 18 / 2003
Mailing Address 2101 North Main Street		Transaction ID: SA11A1.6620
City Decatur	State IL	Zip Code 62526
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Self Employed	Occupation Pediatric Dentist	Aggregate Year-to-Date ▼ 300.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	▶	800.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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FOR LINE NUMBER: PAGE 12 / 18
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Academy of Pediatric Dentistry Political Action Committee

Full Name (Last, First, Middle Initial) A. Dr. Douglas B. Keck		Date of Receipt M / D / Y 07 / 24 / 2003
Mailing Address 991 State Street		Transaction ID: SA11A1.6814
City New Haven	State CT	Zip Code 06511
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Pediatric Dentistry Associates, LLC	Occupation Pediatric Dentist	Aggregate Year-to-Date ▼ 400.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Dr. Jessica Meecke		Date of Receipt M / D / Y 07 / 21 / 2003
Mailing Address 801 North St. Joseph		Transaction ID: SA11A1.6712
City Hastings	State NE	Zip Code 68901
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Lockwood Meecke Ped. Dentistry	Occupation Pediatric Dentist	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Dr. Jack W. Monroe		Date of Receipt M / D / Y 07 / 31 / 2003
Mailing Address 4200 Bryant Irvin Road, Ste. 129		Transaction ID: SA11A1.6942
City Fort Worth	State TX	Zip Code 76109
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Self-Employed	Occupation Pediatric Dentist	Aggregate Year-to-Date ▼ 350.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	800.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 18

(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
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NAME OF COMMITTEE (In Full)
American Academy of Pediatric Dentistry Political Action Committee

Full Name (Last, First, Middle Initial) A. Dr. James R. Musser		Date of Receipt M / D / Y 09 / 05 / 2003
Mailing Address 10425 Fair Oaks Boulevard		Transaction ID: SA11A1.7219
City Fair Oaks	State CA	Zip Code 95628
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self Employed	Occupation Pediatric Dentist	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Dr. Donald T. Norby		Date of Receipt M / D / Y 07 / 24 / 2003
Mailing Address 1701 Leighton Avenue		Transaction ID: SA11A1.6781
City Anniston	State AL	Zip Code 36207
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Self Employed	Occupation Pediatric Dentist	Aggregate Year-to-Date ▼ 350.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Dr. Curt S. Ralstrom		Date of Receipt M / D / Y 07 / 31 / 2003
Mailing Address 39400 Garfield Road, Suite 200		Transaction ID: SA11A1.6946
City Clinton Township	State MI	Zip Code 48038-4058
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Self-Employed	Occupation Pediatric Dentist	Aggregate Year-to-Date ▼ 600.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	450.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 14 / 18

(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
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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)
American Academy of Pediatric Dentistry Political Action Committee

Full Name (Last, First, Middle Initial) A. Dr. Paul A. Reggiardo		Date of Receipt M / D / Y 11 / 25 / 2003
Mailing Address 18731 Patrician Drive		Transaction ID: SA11A1.7407
City Villa Park	State CA	Zip Code 92861
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Paul Reggiardo DDS, APC	Occupation Pediatric Dentist	Aggregate Year-to-Date ▼ 1000.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Dr. George M. Richardson		Date of Receipt M / D / Y 07 / 18 / 2003
Mailing Address Timberlane Dental Group 8D Timber Lane		Transaction ID: SA11A1.6594
City South Burlington	State VT	Zip Code 05403
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Timberlane Dental Group	Occupation Pediatric Dentist	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Dr. Charles W. Rigg		Date of Receipt M / D / Y 07 / 21 / 2003
Mailing Address 7863 Broadway		Transaction ID: SA11A1.6730
City Merillville	State IN	Zip Code 46410
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self-Employed	Occupation Pediatric Dentist	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	▶	1750.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 15 / 18
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Academy of Pediatric Dentistry Political Action Committee

Full Name (Last, First, Middle Initial) A. Dr. Terry G. Schechner		Date of Receipt M / D / Y 07 / 11 / 2003
Mailing Address 809 Wall Street, #D		Transaction ID: SA11A1.6550
City Valparaiso	State IN	Zip Code 46383
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self-Employed	Occupation Pediatric Dentist	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Dr. Stanley A. Sheppard		Date of Receipt M / D / Y 07 / 18 / 2003
Mailing Address 2424 East Plaza Drive		Transaction ID: SA11A1.6625
City Tallahassee	State FL	Zip Code 32308
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Self-Employed	Occupation Pediatric Dentist	Aggregate Year-to-Date ▼ 350.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Dr. Frederick H. Simmons		Date of Receipt M / D / Y 07 / 18 / 2003
Mailing Address P.O. Box 10129		Transaction ID: SA11A1.6542
City Terre Haute	State IN	Zip Code 47801-0129
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Self-Employed	Occupation Pediatric Dentist	Aggregate Year-to-Date ▼ 350.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	450.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 16 / 18

(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
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NAME OF COMMITTEE (In Full)
American Academy of Pediatric Dentistry Political Action Committee

Full Name (Last, First, Middle Initial) A. Dr. John C. Strikus		Date of Receipt M / D / Y 09 / 05 / 2003
Mailing Address 1703 Temple Avenue		Transaction ID: SA11A1.7204
City Nashville	State TN	Zip Code 37215
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Self-Employed	Occupation Pediatric Dentist	Aggregate Year-to-Date ▼ 350.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Dr. Nanni Behrke Takum		Date of Receipt M / D / Y 08 / 21 / 2003
Mailing Address 1414 East Blanco Road		Transaction ID: SA11A1.7133
City Boerne	State TX	Zip Code 78006
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Self-Employed	Occupation Pediatric Dentist	Aggregate Year-to-Date ▼ 350.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Dr. Dante P. Trupkin		Date of Receipt M / D / Y 08 / 07 / 2003
Mailing Address 7400 NW 5th Street		Transaction ID: SA11A1.7049
City Plantation	State FL	Zip Code 33317
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Nacht, Trupkin & Babyak DDS PA	Occupation Pediatric Dentist	Aggregate Year-to-Date ▼ 1100.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts TN's Page (optional)	300.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 17 / 18
(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
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NAME OF COMMITTEE (In Full)
American Academy of Pediatric Dentistry Political Action Committee

Full Name (Last, First, Middle Initial) A. Dr. Mary Jane Vallee		Date of Receipt M / D / Y 09 / 25 / 2009	
Mailing Address 9215 Old Buddington Road P.O. Box 911		Transaction ID: SA11A1.7265	
City Groton	State CT	Zip Code 06340	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self-Employed	Occupation Pediatric Dentist		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional)	▶	100.00
TOTAL This Period (last page this line number only)	▶	8825.00

**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)

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<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)
American Academy of Pediatric Dentistry Political Action Committee

Full Name (Last, First, Middle Initial)
A. GRASSLEY COMMITTEE

Mailing Address PO BOX 1000

City DES MOINES State IA Zip Code 50304

Purpose of Disbursement
2004 U.S. Senate Election

Candidate Name

Office Sought: House Disbursement For: 2004
 Senate Primary General
 President
 State: IA District: D0 Other (specify) ▼

Category/
Type

Transaction ID: SB23.7423

Date of Disbursement
08 / 15 / 2003

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)
B. JUDD GREGG COMMITTEE

Mailing Address PO BOX 1812

City CONCORD State NH Zip Code 03302

Purpose of Disbursement
2004 U.S. Senate Election

Candidate Name

Office Sought: House Disbursement For: 2004
 Senate Primary General
 President
 State: NH District: D0 Other (specify) ▼

Category/
Type

Transaction ID: SB23.7420

Date of Disbursement
07 / 09 / 2003

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)
C. PALLONE FOR CONGRESS

Mailing Address PO BOX 3176

City LONG BRANCH State NJ Zip Code 07740

Purpose of Disbursement
2004 U.S. House Election

Candidate Name

Office Sought: House Disbursement For: 2004
 Senate Primary General
 President
 State: NJ District: D6 Other (specify) ▼

Category/
Type

Transaction ID: SB23.7422

Date of Disbursement
08 / 14 / 2003

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) ▶

2000.00

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

2000.00