FEC FORM 3X	AN	D DISB	OF REC SURSEM An Authorize	ENTS	ee	C	Office Use Only	
1. NAME OF COMMITTEE (in fu		EC MAILING		ample:If typing er the lines	g, type			
California Dental As		al Action Comn	nittee Federal F	und				
ADDRESS (number and	street)	01 K Street, 15	th Floor					
Check if differ than previously reported. (ACC	/ LSa	cramento			___		95814	
2. FEC IDENTIFICAT	ION NUMBER	¥	CITY 🛋		S	TATE	ZIPCODE	A
C00005751			3. IS THIS REPOR		NEW (N) OR	AME (A)	NDED	
July 15 Quarterly Cotober	ports: Report(Q1) Report(Q2)) Monthly Report Due On: (c) 12-Day PRE -El Report	ection)		Aug 20 Sep 20 Oct 20 General (12 Special (12)	G) (M9) C(M9) C(M9) C(M9) C(M9) C(M10) C(M10	lov 20 (M11) Non-Election ear Only) Dec 20 (M12) Non-Election ear Only) an 31 (YE)
July 31 M Report(N Year Only	Report(YE) lid-Year on-election	(d) 30-Day Post -E Report	Election	General (300	<u>а</u>)	Runoff (30F	in the State of R) in the State of	Special (30S)
5. Covering Period	07	01 2	0 1 0	through	09	30	2010	
I certify that I have exam Type or Print Name of T		and to the best raig Noblett	t of my knowledge	and belief it is	true, correct ar	nd complete.		
Signature of Treasurer	Electronically	Filed by Crai	ig Noblett		Da	te 10	14 2	010
NOTE : Submission of f	alse, erroneous,	or incomplete i	nformation may s	ubject the pers	on signing this	Report to the pe	enalties of 2 U.S.C	C 437g.
Office Use Only							(Rev. 12/2004)	

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6.

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) 2 / 5 Write or Type Committee Name California Dental Association Political Action Committee -- Federal Fund DD Y Y Y ММ D м м Y D Υ 07 01 2010 09 30 2010 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 20¹0¹ 52478.78 January 1 (b) Cash on Hand at 42478.78 Begining of Reporting Period 0.00 0.00 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 42478.78 52478.78 6(a) and 6(c) for Column B) 0.00 10000.00 Total Disbursements (from Line 31) 7. Cash on Hand at Close of 8. **Reporting Period** 42478.78 42478.78 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed то the committee (Itemize all on 0.00 Schedule C and/or Schedule D)

10. Debts and Obligations owed BY the committee (Itemize all on 0.00 Schedule C and/or Schedule D)

X 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

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DETAILED SUMMARY PAGE OF RECEIPTS

3 / 5

Write or Type Committee Name

FEC Form 3X (Rev. 06/2004)

California Dental Association Political Action Committee -- Federal Fund

F	Report Covering the Period:From:M M 07D D 01Y Y W Y 2010To:M M 09D D 30Y Y Y 2010				
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)	0.00	0.00		
	(ii) Unitemized	0.00	0.00		
	(iii) TOTAL (add Lines 11(a)(i) and (ii) 🕨	0.00	0.00		
	(b) Political Party Committees	0.00	0.00		
	 (c) Other Political Committees (such as PACs) (d) Total Contributions (add Lines 	0.00	0.00		
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ►	0.00	0.00		
2.	Transfers From Affiliated/Other Party Committees	0.00	0.00		
3.	All Loans Received	0.00	0.00		
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00		
6.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00		
	to Federal candidates and Other Political Committees	0.00	0.00		
7.	Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00		
Β.	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		
9.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	0.00	0.00		
).	Total Federal Receipts (subtract Line 18(c) from Line 19)	0.00	0.00		

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DETAILED SUMMARY PAGE

of Disbursements

COLUMN A Total This Period 0.00 0.00 0.00 0.00	COLUMN B Calendar Year-to-Date
0.00 0.00 0.00	0.00
0.00	0.00
0.00	
	0.00
0.00	
	0.00
0.00	0.00
	10000.00
0.00	0.00
0.00	0.00
0.00	0.00
0.00	0.00
0.00	0.00
0.00	0.00
0.00	0.00
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0.00	0.00
0.00	0.00
0.00	0.00
0.00	0.00
0.00	0.00
0.00	0.00
0.00	10000.00
0.00	10000.00
	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0

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4/5

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)	0.00	0.00	
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00	
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	0.00	
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	

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