

Oct 6 10 54 AM '97

September 30, 1997

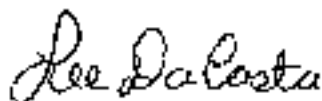
Neil Evans, Report Analyst  
Reports Analysis Division  
Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Dear Neil Evans:

This letter is in response to your letter dated September 10, 1997. I have made the name change from California Dental Political Action Committee-Federal Fund to California Dental ~~Association~~ Political Action Committee-Federal Fund. I had left you a voice mail message on September 25th notifying you that I had to wait for the return of Dr. Zakariasen (Treasurer) to get his signature on the amended Form 1 enclosed. I am sorry for any inconvenience.

Please endorse this transmittal letter as acknowledgment of receipt and return it in the preaddressed, stamped envelope provided.

Sincerely,



Lee DaCosta  
CaDPAC Assistant

Enclosure - FEC Form 1

1201 K Street

15th Floor

Sacramento

California

95814

F:\user\lced\fec.3x

916.443.0606

916.443.2943 FAX

cc: Secretary of State, CA

# STATEMENT OF ORGANIZATION

(See reverse side for instructions)

RECEIVED  
FEDERAL ELECTION  
COMMISSION MAIL ROOM

Oct 6 10 54 AM '97

1. (a) NAME OF COMMITTEE IN FULL <input checked="" type="checkbox"/> (Check if name is changed) California Dental Association Political Action Committee-Federal Fund	2. DATE 9/30/97
(b) Number and Street Address <input type="checkbox"/> (Check if address is changed) 1201 K Street	3. FEC Identification Number C00005751
(c) City, State and ZIP Code Sacramento, CA 95814	4. Is This Report An Amendment? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO

**5. TYPE OF COMMITTEE (Check one)**

- (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)
- | Name of Candidate | Candidate Party Affiliation | Office Sought | State/District |
|-------------------|-----------------------------|---------------|----------------|
|                   |                             |               |                |
- (c) This committee supports/opposes only one candidate \_\_\_\_\_ and is NOT an authorized committee.  
(name of candidate)
- (d) This committee is a \_\_\_\_\_ committee of the \_\_\_\_\_ Party.  
(National, State or subordinate) (Democratic, Republican, etc.)
- (e) This committee is a separate segregated fund.
- (f) This committee supports/opposes more than one Federal candidate and is NOT a separate segregated fund or a party committee.

6. Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship
California Dental Association	P.O. Box 13749 Sacramento, CA 95853-9981	Connected Organization
California Dental PAC - State	1201 K Street	Affiliated Committee
California Dental Independent Expenditure Committee	Sacramento, CA 95814	Affiliated Committee
American Dental PAC	1111-14th Street, NW, 12th Floor	Affiliated Committee
Type of Connected Organization <input type="checkbox"/> Corporation <input type="checkbox"/> Corporation w/o Capital Stock <input type="checkbox"/> Labor Organization <input type="checkbox"/> Membership Organization <input type="checkbox"/> Trade Association <input type="checkbox"/> Cooperative		Washington, DC 20005

**7. Custodian of Records:** Identify by name, address (phone number - optional) and position of the person in possession of committee books and records.

Full Name	Mailing Address	Title or Position
Kenneth L. Zakariasen, D.D.S.	1201 K Street, Sacramento, CA 95814	Treasurer


**8. Treasurer:** List the name and address (phone number - optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name	Mailing Address	Title or Position
Kenneth L. Zakariasen, D.D.S.	1201 K Street, Sacramento, CA 95814	Treasurer
Mark Alcorn	1201 K Street, Sacramento, CA 95814	Assistant Treasurer

**9. Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.	Mailing Address and ZIP Code
River City Bank, 825 K Street, Sacramento, CA	95814
Bank of America, Capitol Branch #0430, 1130 K Street, Sacramento, CA	95814
Mercantile Bank, 455 Capitol Mall, Sacramento, CA	95814

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

TYPE OR PRINT NAME OF TREASURER Kenneth L. Zakariasen, D.D.S.	SIGNATURE OF TREASURER 	DATE 9/30/97
--	--	-----------------

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

For further information contact:  
Federal Election Commission  
Toll-free 800-424-9530  
Local 202-219-3420

FEBAN053

**FEC FORM 1**  
(revised 4/87)

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE  
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

Hand Delivered

DATE OF RECEIPT

First Class Mail

POSTMARKED

Registered/Certified Mail

POSTMARKED

9/30/97

No Postmark

Postmark Illegible

Received from the House Office of Records  
and Registration

DATE OF RECEIPT

Received from the Senate Office of Public  
Records

DATE OF RECEIPT

Other (Specify):

POSTMARKED

and/or DATE OF RECEIPT

*Eric [Signature]*  
PREPARER

10/5/97  
DATE PREPARED