02/18/2002 13 : 39

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 Dental Political Action Cmte.

ADDRESS (number and street) ▼ 1111 14th Street NW

Suite 1100

Check if different than previously reported. (ACC)

Washington | DC | 20005 –

2. **FEC IDENTIFICATION NUMBER** ▼ C00000729

CITY ▲ STATE ▲ ZIPCODE ▲

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)

January 31 Quarterly Report(YE)

July 31 Mid-Year Report(Non-election Year Only) (MY)

Termination Report (TER)

(b) Monthly Report Due On: X

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 (M13)

(c) 12-Day **PRE**-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12G)

Election on in the State of

(d) 30-Day **P**ost -Election Report for the: General (30G) Runoff (30R) Special (30S)

Election on in the State of

5. Covering Period 01 01 2002 through 01 31 2002

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 Mr. Frank McLaughlin

Signature of Treasurer Electronically Filed by Mr. Frank McLaughlin Date 02 18 2002

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** (Revised 1/2001)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC **Form 3X** (Revised 1/2001)

Write or Type Committee Name
American Dental Political Action Cmte.

Report Covering the Period: From: 01 01 2002 To: 01 31 2002

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2002		637207.94
(b) Cash on Hand at Begining of Reporting Period	637207.94	
(c) Total Receipts (from Line 19)	74675.55	74675.55
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	711883.49	711883.49
7. Total Disbursements (from Line 30)	12000.00	12000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	699883.49	699883.49
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	

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

DETAILED SUMMARY PAGE
OF RECEIPTS

Write or Type Committee Name

American Dental Political Action Cmte.

Report Covering the Period: From: 01 01 2002 To: 01 31 2002

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	
(ii) Unitemized	3270.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	3270.00	3270.00
(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 32, page 4) ▶	3270.00	3270.00
12. Transfers From Affiliated/Other Party Committees	71405.55	71405.55
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 36, page 4)	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 Nonfederal Account for Joint Activity	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18) ▶	74675.55	74675.55
20. Total Federal Receipts (subtract Line 18 from Line 19) ▶	74675.55	74675.55

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Revised 1/2001)

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	12000.00	12000.00
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. Total Disbursements (add Lines 21(c), 22, 23,24,25,26,27,28(d),and 29) ▶	12000.00	12000.00
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30) ▶	12000.00	12000.00
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) from Line 11(d), page 3)	3270.00	3270.00
33. Total Contribution Refunds (from Line 28(d))	0.00	0.00
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)	3270.00	3270.00
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	0.00	0.00
36. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
37. Net Operating Expenditures (subtract Line 36 from Line 35) ▶	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: (check only one) PAGE 5 / 16

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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 Dental Political Action Cmte.

A. Full Name (Last, First, Middle Initial)
Alaska Dental PAC

Mailing Address
3305 Arctic Blvd. Suite 102

City: Anchorage State: AK Zip Code: 99503-4975

FEC ID number of contributing federal political committee.

Name of Employer: Alaska Dental PAC
Occupation:

Receipt For: 2002
X Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 01 18 2002

Amount of Each Receipt this Period: 1000.00

Check

Transaction ID: R10199

B. Full Name (Last, First, Middle Initial)
Connecticut Dental PAC

Mailing Address
62 Russ Street

City: Hartford State: CT Zip Code: 06106

FEC ID number of contributing federal political committee.

Name of Employer: Connecticut Dental PAC
Occupation:

Receipt For: 2002
X Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼ 75.00

Date of Receipt: 01 31 2002

Amount of Each Receipt this Period: 75.00

Check

Transaction ID: R10224

C. Full Name (Last, First, Middle Initial)
Florida Dental PAC

Mailing Address
1111 E. Tennessee Street Suite 102

City: Tallahassee State: FL Zip Code: 32308-6914

FEC ID number of contributing federal political committee.

Name of Employer: Florida Dental PAC
Occupation:

Receipt For: 2002
X Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼ 5400.00

Date of Receipt: 01 18 2002

Amount of Each Receipt this Period: 5325.00

Check

Transaction ID: R10185

SUBTOTAL of Receipts This Page (optional) ..... ▶ **6400.00**

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: (check only one) PAGE 6 / 16

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
American Dental Political Action Cmte.

A.
Full Name (Last, First, Middle Initial)
Florida Dental PAC
Mailing Address
1111 E. Tennessee Street — Suite 102
City — State — Zip Code
Tallahassee — FL — 32308-6814
FEC ID number of contributing federal political committee.
Name of Employer: Florida Dental PAC
Occupation
Receipt For: 2002
X Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 8800.00
Date of Receipt: 01 18 2002
Amount of Each Receipt this Period: 3475.00
Check
Transaction ID: R10205

B.
Full Name (Last, First, Middle Initial)
Illinois Dental PAC
Mailing Address
PO Box 376 — 1010 S. 2nd St.(zip-62704)
City — State — Zip Code
Springfield — IL — 62705
FEC ID number of contributing federal political committee.
Name of Employer: Illinois Dental PAC
Occupation
Receipt For: 2002
X Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 40.00
Date of Receipt: 01 18 2002
Amount of Each Receipt this Period: 40.00
Check
Transaction ID: R10207

C.
Full Name (Last, First, Middle Initial)
Iowa Dental PAC
Mailing Address
505 5th Avenue — Suite 333
City — State — Zip Code
Des Moines — IA — 50309-2379
FEC ID number of contributing federal political committee.
Name of Employer: Iowa Dental PAC
Occupation
Receipt For: 2002
X Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 1270.00
Date of Receipt: 01 18 2002
Amount of Each Receipt this Period: 1270.00
Check
Transaction ID: R10201

SUBTOTAL of Receipts This Page (optional) ..... ▶ **4785.00**

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: (check only one) PAGE 7 / 16

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
American Dental Political Action Cmte.

A.
Full Name (Last, First, Middle Initial): Kansas Dental PAC
Mailing Address: 5200 S.W. Huntoon Street
City: Topeka State: KS Zip Code: 66604
FEC ID number of contributing federal political committee.
Name of Employer: Kansas Dental PAC
Occupation:
Receipt For: 2002
X Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 280.00
Date of Receipt: 01 18 2002
Amount of Each Receipt this Period: 280.00
Check
Transaction ID: R10200

B.
Full Name (Last, First, Middle Initial): Maine Dental PAC
Mailing Address: PO Box 215
City: Manchester State: ME Zip Code: 04351
FEC ID number of contributing federal political committee.
Name of Employer: Maine Dental PAC
Occupation:
Receipt For: 2002
X Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 25.00
Date of Receipt: 01 18 2002
Amount of Each Receipt this Period: 25.00
Check
Transaction ID: R10204

C.
Full Name (Last, First, Middle Initial): Massachusetts Dental PAC
Mailing Address: 83 Speen Street
City: Natick State: MA Zip Code: 01760
FEC ID number of contributing federal political committee.
Name of Employer: Massachusetts Dental PAC
Occupation:
Receipt For: 2002
X Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 5532.00
Date of Receipt: 01 18 2002
Amount of Each Receipt this Period: 1800.00
Check
Transaction ID: R10183

SUBTOTAL of Receipts This Page (optional) ..... ▶ **2105.00**

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: (check only one) PAGE 8 / 16

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
American Dental Political Action Cmte.

A.
Full Name (Last, First, Middle Initial)
Massachusetts Dental PAC
Mailing Address
83 Speen Street
City: Natick State: MA Zip Code: 01760
FEC ID number of contributing federal political committee.
Name of Employer: Massachusetts Dental PAC
Occupation:
Receipt For: 2002
X Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 5532.00
Date of Receipt: 01 31 2002
Amount of Each Receipt this Period: 3732.00
Check
Transaction ID: R10235

B.
Full Name (Last, First, Middle Initial)
Michigan Dental PAC
Mailing Address
230 Washington Square, North Suite 208
City: Lansing State: MI Zip Code: 48933
FEC ID number of contributing federal political committee.
Name of Employer: Michigan Dental PAC
Occupation:
Receipt For: 2002
X Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 21230.00
Date of Receipt: 01 31 2002
Amount of Each Receipt this Period: 21230.00
Check
Transaction ID: R10231

C.
Full Name (Last, First, Middle Initial)
Nevada Dental PAC
Mailing Address
6889 W. Charleston Blvd. Suite B
City: Las Vegas State: NV Zip Code: 89117
FEC ID number of contributing federal political committee.
Name of Employer: Nevada Dental PAC
Occupation:
Receipt For: 2002
X Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 3880.00
Date of Receipt: 01 18 2002
Amount of Each Receipt this Period: 280.00
Check
Transaction ID: R10184

SUBTOTAL of Receipts This Page (optional) ..... ▶ **25242.00**

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: (check only one) PAGE 9 / 16

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
American Dental Political Action Cmte.

A.
Full Name (Last, First, Middle Initial): Nevada Dental PAC
Mailing Address: 6889 W. Charleston Blvd. Suite B
City: Las Vegas State: NV Zip Code: 89117
FEC ID number of contributing federal political committee.
Name of Employer: Nevada Dental PAC
Occupation:
Receipt For: 2002
X Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 3880.00
Date of Receipt: 01 18 2002
Amount of Each Receipt this Period: 580.00
Check
Transaction ID: R10186

B.
Full Name (Last, First, Middle Initial): Nevada Dental PAC
Mailing Address: 6889 W. Charleston Blvd. Suite B
City: Las Vegas State: NV Zip Code: 89117
FEC ID number of contributing federal political committee.
Name of Employer: Nevada Dental PAC
Occupation:
Receipt For: 2002
X Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 3880.00
Date of Receipt: 01 18 2002
Amount of Each Receipt this Period: 1160.00
Check
Transaction ID: R10187

C.
Full Name (Last, First, Middle Initial): Nevada Dental PAC
Mailing Address: 6889 W. Charleston Blvd. Suite B
City: Las Vegas State: NV Zip Code: 89117
FEC ID number of contributing federal political committee.
Name of Employer: Nevada Dental PAC
Occupation:
Receipt For: 2002
X Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 3880.00
Date of Receipt: 01 18 2002
Amount of Each Receipt this Period: 720.00
Check
Transaction ID: R10188

SUBTOTAL of Receipts This Page (optional) ..... ▶ **2440.00**

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: (check only one) PAGE 10 / 16

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
American Dental Political Action Cmte.

A.
Full Name (Last, First, Middle Initial): Nevada Dental PAC
Mailing Address: 6889 W. Charleston Blvd. Suite B
City: Las Vegas State: NV Zip Code: 89117
FEC ID number of contributing federal political committee.
Name of Employer: Nevada Dental PAC
Occupation:
Receipt For: 2002
X Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 3880.00
Date of Receipt: 01 18 2002
Amount of Each Receipt this Period: 400.00
Check
Transaction ID: R10189

B.
Full Name (Last, First, Middle Initial): Nevada Dental PAC
Mailing Address: 6889 W. Charleston Blvd. Suite B
City: Las Vegas State: NV Zip Code: 89117
FEC ID number of contributing federal political committee.
Name of Employer: Nevada Dental PAC
Occupation:
Receipt For: 2002
X Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 3880.00
Date of Receipt: 01 31 2002
Amount of Each Receipt this Period: 780.00
Check
Transaction ID: R10222

C.
Full Name (Last, First, Middle Initial): New Jersey Dental PAC
Mailing Address: One Dental Plaza
City: North Brunswick State: NJ Zip Code: 08902-4311
FEC ID number of contributing federal political committee.
Name of Employer: New Jersey Dental PAC
Occupation:
Receipt For: 2002
X Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 16033.55
Date of Receipt: 01 31 2002
Amount of Each Receipt this Period: 75.00
Check
Transaction ID: R10232

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1235.00**

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: (check only one) PAGE 11 / 16

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
American Dental Political Action Cmte.

A.
Full Name (Last, First, Middle Initial): New Jersey Dental PAC
Mailing Address: One Dental Plaza
City: North Brunswick State: NJ Zip Code: 08902-4311
FEC ID number of contributing federal political committee.
Name of Employer: New Jersey Dental PAC
Occupation:
Receipt For: 2002
X Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 16033.55
Date of Receipt: 01 31 2002
Amount of Each Receipt this Period: 15958.55
Check
Transaction ID: R10234

B.
Full Name (Last, First, Middle Initial): Oklahoma Dental PAC
Mailing Address: 629 W. Interstate 44 Svc. Rd.
City: Oklahoma City State: OK Zip Code: 73118
FEC ID number of contributing federal political committee.
Name of Employer: Oklahoma Dental PAC
Occupation:
Receipt For: 2002
X Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 2950.00
Date of Receipt: 01 31 2002
Amount of Each Receipt this Period: 2950.00
Check
Transaction ID: R10225

C.
Full Name (Last, First, Middle Initial): Pennsylvania Dental PAC
Mailing Address: PO Box 3341
City: Harrisburg State: PA Zip Code: 17105
FEC ID number of contributing federal political committee.
Name of Employer: Pennsylvania Dental PAC
Occupation:
Receipt For: 2002
X Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 75.00
Date of Receipt: 01 31 2002
Amount of Each Receipt this Period: 75.00
Check
Transaction ID: R10233

SUBTOTAL of Receipts This Page (optional) ..... ▶ **18983.55**

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: (check only one) PAGE 12 / 16

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
American Dental Political Action Cmte.

A.
Full Name (Last, First, Middle Initial): South Carolina Dental PAC
Mailing Address: 120 Stonemark Lane
City: Columbia State: SC Zip Code: 29210
FEC ID number of contributing federal political committee.
Name of Employer: South Carolina Dental PAC
Occupation:
Receipt For: 2002
X Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 2520.00
Date of Receipt: 01 18 2002
Amount of Each Receipt this Period: 880.00
Check
Transaction ID: R10180

B.
Full Name (Last, First, Middle Initial): South Carolina Dental PAC
Mailing Address: 120 Stonemark Lane
City: Columbia State: SC Zip Code: 29210
FEC ID number of contributing federal political committee.
Name of Employer: South Carolina Dental PAC
Occupation:
Receipt For: 2002
X Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 2520.00
Date of Receipt: 01 18 2002
Amount of Each Receipt this Period: 1640.00
Check
Transaction ID: R10190

C.
Full Name (Last, First, Middle Initial): Texas Dental PAC
Mailing Address: 1946 South IH 35 Suite 400
City: Austin State: TX Zip Code: 78704
FEC ID number of contributing federal political committee.
Name of Employer: Texas Dental PAC
Occupation:
Receipt For: 2002
X Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 360.00
Date of Receipt: 01 18 2002
Amount of Each Receipt this Period: 160.00
Check
Transaction ID: R10192

SUBTOTAL of Receipts This Page (optional) ..... ▶ **2680.00**

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: (check only one) PAGE 13 / 16

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
American Dental Political Action Cmte.

A.
Full Name (Last, First, Middle Initial): Texas Dental PAC
Mailing Address: 1946 South IH 35 Suite 400
City: Austin State: TX Zip Code: 78704
FEC ID number of contributing federal political committee.
Name of Employer: Texas Dental PAC
Occupation:
Receipt For: 2002
X Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 360.00
Date of Receipt: 01 31 2002
Amount of Each Receipt this Period: 200.00
Check
Transaction ID: R10226

B.
Full Name (Last, First, Middle Initial): Vermont Dental PAC
Mailing Address: 132 Church Street
City: Burlington State: VT Zip Code: 05401
FEC ID number of contributing federal political committee.
Name of Employer: Vermont Dental PAC
Occupation:
Receipt For: 2002
X Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 1830.00
Date of Receipt: 01 18 2002
Amount of Each Receipt this Period: 1830.00
Check
Transaction ID: R10191

C.
Full Name (Last, First, Middle Initial): Washington Dental PAC
Mailing Address: 2033 6th Avenue Suite 333
City: Seattle State: WA Zip Code: 98121
FEC ID number of contributing federal political committee.
Name of Employer: Washington Dental PAC
Occupation:
Receipt For: 2002
X Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 5455.00
Date of Receipt: 01 18 2002
Amount of Each Receipt this Period: 5455.00
Check
Transaction ID: R10193

SUBTOTAL of Receipts This Page (optional) ..... ▶ **7485.00**

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: (check only one) PAGE 14 / 16

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
American Dental Political Action Cmte.

A.
Full Name (Last, First, Middle Initial)
Wisconsin Dental PAC

Mailing Address
111 E. Wisconsin Avenue, #1300

City: Milwaukee
State: WI
Zip Code: 53202-4811

FEC ID number of contributing federal political committee.

Name of Employer: Wisconsin Dental PAC
Occupation:

Receipt For: 2002
X Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼ 50.00

Date of Receipt: 01 18 2002

Amount of Each Receipt this Period: 50.00

Check

Transaction ID: R10198

B.

C.

SUBTOTAL of Receipts This Page (optional) ..... ▶ **50.00**

TOTAL This Period (last page this line number only) ..... ▶ **71405.55**

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25
☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)
American Dental Political Action Cmte.

A.
Full Name (Last, First, Middle Initial)
Sue Myrick

Mailing Address
PO Box 37091
City: Charlotte State: NC Zip Code: 28237

Purpose of Disbursement
Contribution: Sue Wilkins Myrick (NC-9-R

Candidate Name
Sue Wilkins Myrick (NC-9-R)

Office Sought: X House / Senate / President
State: NC District: 9

Disbursement For: 2002
X Primary / General / Other (specify)

Category/Type

Date of Disbursement: 01 17 2002

Amount of Each Disbursement this Period: 1000.00

Contribution: Sue Wilkins Myrick (NC-9-R)

Transaction ID: D5883

B.
Full Name (Last, First, Middle Initial)
Kenny Hulshof for Congress

Mailing Address
P.O. Box 1621
City: Columbia State: MO Zip Code: 65205

Purpose of Disbursement
Contribution: Kenny Hulshof (MO-9-R)

Candidate Name
Kenny Hulshof (MO-9-R)

Office Sought: X House / Senate / President
State: MO District: 9

Disbursement For: 2002
X Primary / General / Other (specify)

Category/Type

Date of Disbursement: 01 17 2002

Amount of Each Disbursement this Period: 1000.00

Contribution: Kenny Hulshof (MO-9-R)

Transaction ID: D5884

C.
Full Name (Last, First, Middle Initial)
John Sullivan for Congress

Mailing Address
6130 S. Maplewood Suite B
City: Tulsa State: OK Zip Code: 74136

Purpose of Disbursement
Contribution: John Sullivan (OK-1-R)

Candidate Name
John Sullivan (OK-1-R)

Office Sought: X House / Senate / President
State: OK District: 1

Disbursement For: 2002
X Primary / General / Other (specify)

Category/Type

Date of Disbursement: 01 02 2002

Amount of Each Disbursement this Period: 5000.00

Contribution: John Sullivan (OK-1-R)

Transaction ID: D5894

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **7000.00**

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

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25
☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)
American Dental Political Action Cmte.

A.
Full Name (Last, First, Middle Initial)
Tom Davis For Congress

Mailing Address
6429 Downing Court
City: Annandale State: VA Zip Code: 22003

Purpose of Disbursement
Contribution: Thomas M. Davis, III (VA-1

Candidate Name
Thomas M. Davis, III (VA-11-R)

Office Sought: X House / Senate / President
State: VA District: 11

Disbursement For: 2002
X Primary / General / Other (specify)

Category/Type

Date of Disbursement: 01 30 2002

Amount of Each Disbursement this Period: 1000.00

Contribution: Thomas M. Davis, III (VA-11-R)

Transaction ID: D5903

B.
Full Name (Last, First, Middle Initial)
Friends Of Connie Morella

Mailing Address
7315 Wisconsin Avenue Suite 450 West
City: Bethesda State: MD Zip Code: 20814

Purpose of Disbursement
Contribution: Constance A. Morella (MD-8

Candidate Name
Constance A. Morella (MD-8-R)

Office Sought: X House / Senate / President
State: MD District: 8

Disbursement For: 2002
X Primary / General / Other (specify)

Category/Type

Date of Disbursement: 01 30 2002

Amount of Each Disbursement this Period: 1000.00

Contribution: Constance A. Morella (MD-8-R)

Transaction ID: D5904

C.
Full Name (Last, First, Middle Initial)
Boozman For Congress

Mailing Address

City State Zip Code

Purpose of Disbursement
Contribution: John Boozman (AR-3-R)

Candidate Name
John Boozman (AR-3-R)

Office Sought: X House / Senate / President
State: AR District: 3

Disbursement For: 2002
Primary / X General / Other (specify)

Category/Type

Date of Disbursement: 01 07 2002

Amount of Each Disbursement this Period: 3000.00

Contribution: John Boozman (AR-3-R)

Transaction ID: D5911

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **5000.00**

TOTAL This Period (last page this line number only) ..... ▶ **12000.00**