Image# 201507309000452763 PAGE 1 / 7

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

Check if different than previously reported. (ACC) 2. FEC IDENTIFICATION NUMBER C C C00569525 3. IS THIS REPORT (N) OR AMENDED AMENDED (A) AUg 20 (M8) Nov 20 (M11) Nov		or Other Than An Auth	iorized Committee	Office Use Only
ADDRESS (number and street) Check if different than previously reported. (ACC) Reston C C C00569625 3. IS THIS REPORT (N) OR AMENDED (ACC) (C C00569625 (B) Monthly Report (N) OR		TYPE OR PRINT ▼		12FE4M5
ADDRESS (number and street) Check if different than proviously reported. (ACC) Reston C C C005e9525 3. IS THIS NEW (N) OR (A) 4. TYPE OF REPORT (Choose One) (a) Quarterly Report (C1) Quarterly Report (C1) Quarterly Report (C2) Cotober 15 Quarterly Report (C2) Quarterly Report (C3) January 31 Year-End Report (Non-election Year Cnly) (MY) PRE-Election C Report for the: C Covering Period O1 O1 C Cotify A STATE A ZIP CODE A AMENDED AME 20 (M8) Nov 20 (M1) Primary 20 (M6) Sep 20 (M9) Dec 20 (M12) Primary (12P) General (12G) Runoff (12R) PRE-Election C Convention (12C) Special (12S) Covering Period O1 O1 O1 O1 O1 O1 O1 O1 O1 O	Association of Dental S	Support Organizations	S PAC	
ADDRESS (number and street) Check if different than proviously reported. (ACC) Reston C C C005e9525 3. IS THIS NEW (N) OR (A) 4. TYPE OF REPORT (Choose One) (a) Quarterly Report (C1) Quarterly Report (C1) Quarterly Report (C2) Cotober 15 Quarterly Report (C2) Quarterly Report (C3) January 31 Year-End Report (Non-election Year Cnly) (MY) PRE-Election C Report for the: C Covering Period O1 O1 C Cotify A STATE A ZIP CODE A AMENDED AME 20 (M8) Nov 20 (M1) Primary 20 (M6) Sep 20 (M9) Dec 20 (M12) Primary (12P) General (12G) Runoff (12R) PRE-Election C Convention (12C) Special (12S) Covering Period O1 O1 O1 O1 O1 O1 O1 O1 O1 O				
than previously reported. (ACC) 2. FEC IDENTIFICATION NUMBER C C00569525 3. IS THIS REPORT (N) OR AMENDED (A) 4. TYPE OF REPORT (Choose One) (a) Quarterly Report (Construction of the section of t	ADDRESS (number and street)	1950 Roland Clarke Place St	te 300	
than previously reported. (ACC) 2. FEC IDENTIFICATION NUMBER C C00569525 3. IS THIS REPORT (N) OR AMENDED (A) 4. TYPE OF REPORT (Choose One) (a) Quarterly Report (Construction of the section of t	Check if different			
A. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) Quarterly Report (Q2) Quarterly Report (Q3) January 31 Year-End Report (YE) X July 31 Mid-Vear Report (Non-election Year Only) (MY) Report Termination Report (YE) Report Termination Report (PTR) Fig. 20 General (12C) General (12C) Report for the: Convention (12C) Special (12S) Cotober 15 Quarterly Report (Q3) January 31 Year-End Report (YE) X July 31 Mid-Vear Report (Non-election Year Only) (MY) Report for the: Election on Election on Report for the: Election on Elec	than previously	Reston		VA 20191 –
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) Quarterly Report (Q3) January 31 Year-End Report (YE) X July 31 Mid-Year Report (Non-election Report (TER) Termination Report (TER) Covering Period General (30G) General (30G) General (30G) General (30G) Report Tallman (Electronically Filed) Date (A) May 20 (M5) Aug 20 (M8) Nor 20 (M11) Aug 20 (M8) Aug 20 (M8) Nor 20 (M11) Aug 20 (M8) Aug 20 (Mg) Aug 20 (Mg	2. FEC IDENTIFICATION NU	MBER ▼ CIT	Y ▲	STATE ▲ ZIP CODE ▲
(Choose One) (a) Cuarterly Reports: April 15 Cuarterly Report (Q1) July 15 Cuarterly Report (Q2) Cotober 15 Cuarterly Report (YE) X July 31 Mid-Year Report (NY)	C C00569525		-	
(a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (Ye) X July 31 Mid-Year Report (Non-Election Report for the: Convention (12P) PRE-Election Report for the: Convention (12C) Special (12S) Election on Electio		Report Due On:		Year Only)
April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) April 16 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) April 16 Quarterly Report (Q3) January 31 Year-End Report (YE) April 17 Report (Non-election Report (TER) Which is the State of General (12G) Report (12R) PRE-Election Report for the: Convention (12C) Special (12S) Covering (30-B) Flection on General (30G) Runoff (30R) Special (30S) Report (Non-election Report (TER) Flection on Flection on Flectronically Filed Filed Off 12 Day Primary (12P) General (12G) Runoff (12R) Runoff (12R) Runoff (12R) Runoff (12R) Flection Report (Non-election on the State of the S	(a) Quarterly Reports:			(Non-Election Year Only)
July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) POST-Election Report for the: Convention (12C) Special (12S) Financy (12P) Report (12C) Special (12S) Financy (12P)			20 (M4) Jul 20 (M7	
October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER) Date M M M / D D / YYYYY in the State of Special (12S) Report (Non-election Year Only) (MY) POST-Election Report for the: Election on M M M / D D / YYYYYY in the State of Special (30S) Runoff (30R) Special (30S) Report for the: Election on Felocition Report for the: Convention (12C) Special (12S) In the State of Special (30S) Runoff (30R) Special (30S) Runoff (30R) Special (30S) Felocition Report for the: Election on Election on Election on Election on In the State of State of	July 15	(C) 12-Day	Primary (12P)	General (12G) Runoff (12R)
January 31 Year-End Report (YE) X July 31 Mid-Year Report (Non-election Year Only) (MY) POST-Election Report for the: Termination Report (TER)	October 15	Report for the:	Convention (12C)	Special (12S)
July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER) Special (30G) Report for the: Election on Election on Election on Fermination Report Fermination Re	January 31			III UIC
Termination Report (TER) Election on Election on Election on Election on In the State of State of Covering Period O1	July 31 Mid-Year Report (Non-election	(d) 30-Day POST-Election	General (30G)	Runoff (30R) Special (30S
5. Covering Period 01 01 2015 through 06 30 2015 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 Vincent Tallman Signature of Treasurer Vincent Tallman [Electronically Filed] Date 07 30 2015 NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.		·	n on	
Type or Print Name of Treasurer Vincent Tallman Signature of Treasurer Vincent Tallman [Electronically Filed] Date 07 30 2015 NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.				
Signature of Treasurer Vincent Tallman [Electronically Filed] Date O7 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	I certify that I have examined thi	s Report and to the best of	my knowledge and belief it is	true, correct and complete.
Signature of Treasurer Vincent Tallman [Electronically Filed] Date 07 30 2015 NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.	Type or Print Name of Treasurer	Vincent Tallman		
04:	Signature of Treasurer Vince	nt Tallman	[Electronically Filed]	
Office FORM 3Y	NOTE: Submission of false, errone	ous, or incomplete information	may subject the person signing	g this Report to the penalties of 2 U.S.C. §437g.
Use Only	Use			FEC FORM 3X Rev. 12/2004

	FEC Form 3X (Rev. 02/2003)	SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS	Page 2
W	rite or Type Committee Name		. 450 =
Δ	Association of Dental Support Orga	anizations PAC	
Re	eport Covering the Period: From: 0'	1 01 2015 To:	06 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2015		990.00
	(b) Cash on Hand at Beginning of Reporting Period	990.00	
	(c) Total Receipts (from Line 19)	5040.00	5040.00
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	6030.00	6030.00
7.	Total Disbursements (from Line 31)	5050.00	5050.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	980.00	980.00
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 multical	ndidate committee. (see FEC FORM 1M)	
	F	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. 06/2004)

Write or Type Committee Name

Association	of Dental	Support	Organizations	PAC

R	eport Covering the Period: From: 01	01 2015 To:	06 30 7 2015		
	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)	5000.00	5000.00		
	(ii) Unitemized(iii) TOTAL (add	, 0.00	0.00		
	Lines 11(a)(i) and (ii)	5000.00	5000.00		
	(b) Political Party Committees	0.00	0.00		
	(such as PACs)(d) Total Contributions (add Lines	0.00	0.00		
10	11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) Transfers From Affiliated/Other	5000.00	5000.00		
12.	Party Committees	0.00	0.00		
13.	All Loans Received	0.00	0.00		
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00		
16.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	40.00	40.00		
	to Federal Candidates and Other Political Committees	0.00	0.00		
	Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00		
	(a) Non-Federal Account (from Schedule H3)	0.00	0.00		
	(b) Levin Funds (from Schedule H5)	0.00	0.00		
	(c) Total Transfers (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))▶	5040.00	5040.00		
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	5040.00	5040.00		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
	Operating Expenditures: (a) Allocated 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	50.00	50.00		
	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	50.00	50.00		
2.	Transfers to Affiliated/Other Party	30.00			
	Committees	0.00	0.00		
	Contributions to Federal Candidates/Committees and Other Political Committees	5000.00	5000.00		
	Independent Expenditures	0.00	0.00		
5.	(use Schedule E) Coordinated Party Expenditures	0.00	0.00		
	(2 U.S.C. §441a(d)) use Schedule F)	0.00	0.00		
6.	Loan Repayments Made	0.00	0.00		
7.	Loans Made	0.00	0.00		
	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		0.00		
	(such as PACs)	0.00	0.00		
	(d) Total Contribution Refunds				
	(add Lines 28(a), (b), and (c))▶	0.00	0.00		
9.	Other Disbursements	0.00	0.00		
	Federal Election Activity (2 U.S.C. §431(20)) (a) Allocated 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	0.00			
	With Federal Funds	0.00	0.00		
	(c) Total Federal Election Activity (add	0.00	0.00		
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00		
1.	Total Disbursements (add Lines 21(c), 22,				
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	5050.00	5050.00		
	Total Federal Disbursements				
	(subtract Line 21(a)(ii) and Line 30(a)(ii)	5050.00	5050.00		
	from Line 31)	5050.00	3030.00		

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
3. Total Contributions (other than loans) (from Line 11(d), page 3)	5000.00	5000.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5000.00	5000.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	50.00	50.00
7. Offsets to Operating Expenditures (from Line 15, page 3)	40.00	40.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	10.00	10.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:			PAGE	6	OF	7		
(che	eck only	on	ıe)					
×	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.

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) Association of Dental Support	: Organizations PAC			
Full Name (Last, First, Middle Initial) Michael Bileca		Date of Receipt		
Mailing Address 6720 SW 145 ST	Mailing Address 6720 SW 145 ST			
City	State Zip Code FL 33156	02 10 2015 Transaction ID : A2015-288110		
Miami FEC ID number of contributing		Amount of Each Receipt this Period		
federal political committee.	C	5000.00		
Name of Employer	Occupation			
Towncare Dental Partnership	Founding Partner			
Receipt For: Primary General	Aggregate Year-to-Date ▼			
Other (specify)	5000.00			
Full Name (Last, First, Middle Initial) 3.		Date of Receipt		
Mailing Address	M M / D D / Y Y Y Y			
City	ty State Zip Code			
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period		
Name of Employer	Occupation			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼			
Full Name (Last, First, Middle Initial)		Date of Receipt		
Mailing Address		M = M / D = D / Y = Y = Y		
City	State Zip Code	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С			
Name of Employer Occupation				
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼			
SUBTOTAL of Receipts This Page (optional)	•	5000.00		
TOTAL This Period (last page this line numb	er only)	5000.00		

SCHEDULE B (FEC Form 3X)		FOR LINE I	NUMBER:	PAGE 7 OF 7		
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only		24 25 26		
	Detailed Summary Page	27	28a 28b	28c 29 30		
Any information copied from such Reports and Statem						
or for commercial purposes, other than using the nam	e and address of any politica	ai committee to	solicit contributions from	n such committee.		
NAME OF COMMITTEE (In Full)	prizations DAC					
Association of Dental Support Orga						
Full Name (Last, First, Middle Initial)	O la -		Date of Disbursemen	+		
A. Leadership Matters for America PA	C Inc.		Date of Disbursemen	(
Mailing Address 33 Market Street LL			02 11	2015		
,	State Zip Code		Transaction ID : B5	45063		
Morristown Purpose of Disbursement	NJ 07960					
Contribution		011	Amount of Each Disb	oursement this Period		
Candidate Name		Category/		5000.00		
Office Sought: House Disbursem	nent For: 2015	Туре	7	, , ,		
	Primary General					
	Other (specify)					
State: District: Full Name (Last, First, Middle Initial)	Not Applicable					
B.			Date of Disbursemen	t		
			M = M / D = D	/		
Mailing Address	Mailing Address					
City	City State Zip Code					
Purpose of Disbursement			Amount of Each Disbursement this Period			
Candidate Name		Catagory	Amount of Lacif Dist	Jarochient uno Feliou		
		Category/ Type		,		
Office Sought: House Disbursem						
	Primary General Other (specify) ▼					
State: District:	onior (opoony) ▼					
Full Name (Last, First, Middle Initial)			Date of Disbursemen			
C.						
Mailing Address	Mailing Address					
City	City State Zip Code					
Purpose of Disbursement	Purpose of Disbursement					
	. diposo di Biobulotitotti					
Candidate Name		Category/ Type				
Office Sought: House Disbursem	nent For:	туре	7	7		
Senate	Primary General					
	Other (specify) ▼					
State: District:						
SUBTOTAL of Disbursements This Page (optional)				5000.00		
COLUMN CONTRACTOR CONT			7			
TOTAL This Period (last page this line number only).				5000.00		