

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

American Dental Association Political Action Committee

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2013"/>		113669.82
(b) Cash on Hand at Beginning of Reporting Period.....	482305.73	
(c) Total Receipts (from Line 19)	52278.83	658374.86
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	534584.56	772044.68
7. Total Disbursements (from Line 31).....	80626.43	318086.55
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	453958.13	453958.13
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

Write or Type Committee Name

American Dental Association Political Action Committee

Report Covering the Period: From: / / To: / /

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).....	26400.00	40000.00
(ii) Unitemized	20226.00	553670.50
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	46626.00	593670.50
(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)	46626.00	593670.50
12. Transfers From Affiliated/Other Party Committees.....	630.64	59608.67
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.....	5000.00	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	22.19	95.69
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 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))..... ▶	52278.83	658374.86
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	52278.83	658374.86

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
21. 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	126.43	1037.24
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	126.43	1037.24
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	80500.00	312500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (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	50.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	100.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	150.00
29. Other Disbursements	0.00	4399.31
30. 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 With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (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)) ..	80626.43	318086.55
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	80626.43	318086.55

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)	46626.00	593670.50
34. Total Contribution Refunds (from Line 28(d))	0.00	150.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	46626.00	593520.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	126.43	1037.24
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	126.43	1037.24

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 37
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 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 Association Political Action Committee

A. Dr Chauncey Cross
Full Name (Last, First, Middle Initial)

Mailing Address 2401 Country Club Dr

City Springfield State IL Zip Code 62704-3215

FEC ID number of contributing federal political committee. **C**

Name of Employer self-employed Occupation dentist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 07 / 2013
Transaction ID : 11647354

Amount of Each Receipt this Period 300.00

B. Dr Kevin T Nelson
Full Name (Last, First, Middle Initial)

Mailing Address 6730 N Chateau Pl

City Peoria State IL Zip Code 61615-2313

FEC ID number of contributing federal political committee. **C**

Name of Employer self-employed Occupation dentist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 08 / 2013
Transaction ID : 11648028

Amount of Each Receipt this Period 500.00

C. Dr Eugene T Giannini
Full Name (Last, First, Middle Initial)

Mailing Address 5104 Rockwood Pkwy NW

City Washington State DC Zip Code 20016-1916

FEC ID number of contributing federal political committee. **C**

Name of Employer self-employed Occupation dentist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 19 / 2013
Transaction ID : 11672766

Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1300.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 37
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Dental Association Political Action Committee

A. Dr Brent L Holman
Full Name (Last, First, Middle Initial)

Mailing Address 75 Prairiewood Dr

City Fargo State ND Zip Code 58103-4651

FEC ID number of contributing federal political committee. **C**

Name of Employer self-employed Occupation dentist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 19 / 2013
Transaction ID : 11672768

Amount of Each Receipt this Period 500.00

B. Dr Richard A Weinman
Full Name (Last, First, Middle Initial)

Mailing Address 175 Inland Ridge Way NE

City Atlanta State GA Zip Code 30342-2068

FEC ID number of contributing federal political committee. **C**

Name of Employer self-employed Occupation dentist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 20 / 2013
Transaction ID : 11672866

Amount of Each Receipt this Period 1000.00

C. Dr Robert L Smith Jr
Full Name (Last, First, Middle Initial)

Mailing Address 111 Banks Cv

City Hernando State MS Zip Code 38632-1616

FEC ID number of contributing federal political committee. **C**

Name of Employer self-employed Occupation dentist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt 05 / 21 / 2013
Transaction ID : 11673353

Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2000.00

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

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

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

FOR LINE NUMBER: PAGE 8 OF 37
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Dental Association Political Action Committee

A. Dr Daniel D Saucy
 Full Name (Last, First, Middle Initial)
 Mailing Address 465 Myers St S
 City Salem State OR Zip Code 97302-4329
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self-employed Occupation dentist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 21 / 2013
Transaction ID : 11673474
 Amount of Each Receipt this Period
 500.00

B. Dr Susan K Zelazo-Smith
 Full Name (Last, First, Middle Initial)
 Mailing Address 1012 Summit St
 City Downers Grove State IL Zip Code 60515-4922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self-employed Occupation dentist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 21 / 2013
Transaction ID : 11673476
 Amount of Each Receipt this Period
 300.00

C. Dr Warren Boswell Branch
 Full Name (Last, First, Middle Initial)
 Mailing Address 3301 Oakwell Court
 City San Antonio State TX Zip Code 78218-3074
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self-employed Occupation dentist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 21 / 2013
Transaction ID : 11673477
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1300.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 37
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
American Dental Association Political Action Committee

A. Dr Gus C Vlahos
 Full Name (Last, First, Middle Initial)
 Mailing Address 4550 Peak Creek Rd
 City Pulaski State VA Zip Code 24301-6962
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self-employed Occupation Dentist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 05 / 21 / 2013
Transaction ID : 11678865
 Amount of Each Receipt this Period
1000.00

B. Mrs. Deborah Vlahos
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 1379
 City Dublin State VA Zip Code 24084-1379
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Dr. Vlahos Family Dentistry Occupation dental hygienist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 05 / 21 / 2013
Transaction ID : 11678866
 Amount of Each Receipt this Period
500.00

C. Dr H Fred Howard
 Full Name (Last, First, Middle Initial)
 Mailing Address 301 E Central Street
 City Harlan State KY Zip Code 40831-2303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self-employed Occupation dentist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 05 / 21 / 2013
Transaction ID : 11678867
 Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 37
<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 Dental Association Political Action Committee

A. Dr Joseph P Crowley
Full Name (Last, First, Middle Initial)
Mailing Address 3796 Lincoln Rd
City Cincinnati State OH Zip Code 45247-6933
FEC ID number of contributing federal political committee. **C**
Name of Employer self-employed Occupation dentist
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1000.00**

Date of Receipt **05 / 21 / 2013**
Transaction ID : 11678868
Amount of Each Receipt this Period **1000.00**

B. Mrs. Pauletta Crowley
Full Name (Last, First, Middle Initial)
Mailing Address 3796 Lincoln Road
City Cincinnati State OH Zip Code 45247-6933
FEC ID number of contributing federal political committee. **C**
Name of Employer Northwest Local School District Occupation administrator
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **500.00**

Date of Receipt **05 / 21 / 2013**
Transaction ID : 11678869
Amount of Each Receipt this Period **500.00**

C. Dr Mark A Vitale
Full Name (Last, First, Middle Initial)
Mailing Address 69 State Route 27
City Edison State NJ Zip Code 08820-3983
FEC ID number of contributing federal political committee. **C**
Name of Employer self-employed Occupation dentist
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1000.00**

Date of Receipt **05 / 21 / 2013**
Transaction ID : 11678870
Amount of Each Receipt this Period **1000.00**

SUBTOTAL of Receipts This Page (optional)..... **2500.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 37
<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 Dental Association Political Action Committee

A. Dr Eric D Hodges
Full Name (Last, First, Middle Initial)

Mailing Address 848 Fairacres Rd

City Omaha	State NE	Zip Code 68132-1837
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FEC ID number of contributing federal political committee. **C**

Name of Employer self-employed	Occupation dentist
-----------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	21	/	2013

Transaction ID : 11678871

Amount of Each Receipt this Period
1000.00

B. Mrs. Lisa R. Hodges
Full Name (Last, First, Middle Initial)

Mailing Address 2410 South 73rd Street

City Omaha	State NE	Zip Code 68124-2395
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FEC ID number of contributing federal political committee. **C**

Name of Employer First National Bank of Omaha	Occupation Manager
--	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	21	/	2013

Transaction ID : 11678872

Amount of Each Receipt this Period
500.00

C. Dr David C Averill
Full Name (Last, First, Middle Initial)

Mailing Address 324 Pearl St

City Burlington	State VT	Zip Code 05401-8531
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FEC ID number of contributing federal political committee. **C**

Name of Employer self-employed	Occupation dentist
-----------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	21	/	2013

Transaction ID : 11678873

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....▶	2000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 37
<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 Dental Association Political Action Committee

A. Dr John L Carter
Full Name (Last, First, Middle Initial)

Mailing Address 555 W Wackerly St Ste 3900

City Midland State MI Zip Code 48640-4714

FEC ID number of contributing federal political committee. **C**

Name of Employer self-employed Occupation dentist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 21 / 2013
Transaction ID : 11678874

Amount of Each Receipt this Period 1000.00

B. Mrs. Silvia Carter
Full Name (Last, First, Middle Initial)

Mailing Address 6116 Pinewood Drive

City Midland State MI Zip Code 48640-1971

FEC ID number of contributing federal political committee. **C**

Name of Employer Dr. John Carter Occupation office manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 21 / 2013
Transaction ID : 11678880

Amount of Each Receipt this Period 500.00

C. Dr Raymond K Martin
Full Name (Last, First, Middle Initial)

Mailing Address 119 Pembroke St Apt 3

City Boston State MA Zip Code 02118-1270

FEC ID number of contributing federal political committee. **C**

Name of Employer self-employed Occupation dentist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 21 / 2013
Transaction ID : 11678881

Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 37
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Dental Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Dr Charles H Norman III		Date of Receipt MM / DD / YYYY 05 / 21 / 2013 Transaction ID : 11678882
Mailing Address 2012 Pembroke Rd		Amount of Each Receipt this Period 1000.00
City Greensboro	State NC	Zip Code 27408-6330
FEC ID number of contributing federal political committee.	C	
Name of Employer self-employed	Occupation dentist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

Full Name (Last, First, Middle Initial) B. Ms. Sharon Norman		Date of Receipt MM / DD / YYYY 05 / 21 / 2013 Transaction ID : 11678883
Mailing Address 2012 Pembroke Road		Amount of Each Receipt this Period 500.00
City Greensboro	State NC	Zip Code 27408-6330
FEC ID number of contributing federal political committee.	C	
Name of Employer self-employed	Occupation homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Dr Deborah Weisfuse		Date of Receipt MM / DD / YYYY 05 / 21 / 2013 Transaction ID : 11678885
Mailing Address 45 E End Ave		Amount of Each Receipt this Period 300.00
City New York	State NY	Zip Code 10028-7953
FEC ID number of contributing federal political committee.	C	
Name of Employer self-employed	Occupation dentist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	1800.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 37
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Dental Association Political Action Committee

A. Dr Jeffrey Langdon Parrish
Full Name (Last, First, Middle Initial)

Mailing Address 14120 W Snoqualmie Valley Rd NE

City Duvall	State WA	Zip Code 98019-9103
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FEC ID number of contributing federal political committee. **C**

Name of Employer self-employed	Occupation retired
-----------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	21	/	2013

Transaction ID : 11678886

Amount of Each Receipt this Period
500.00

B. Dr Kevin A. Miltko
Full Name (Last, First, Middle Initial)

Mailing Address 444 Benton Ave

City Missoula	State MT	Zip Code 59801-8636
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer self-employed	Occupation dentist
-----------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	21	/	2013

Transaction ID : 11678889

Amount of Each Receipt this Period
500.00

C. Dr Ali Behnia
Full Name (Last, First, Middle Initial)

Mailing Address 10308 Potomac Corner Dr

City Rockville	State MD	Zip Code 20850-3949
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer self-employed	Occupation dentist
-----------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	21	/	2013

Transaction ID : 11678892

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 15 OF 37
(check only one)
 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 Association Political Action Committee

A. Dr Larry W Osborne
 Full Name (Last, First, Middle Initial)
 Mailing Address 710 Stevens Creek Blvd
 City State Zip Code
 Forsyth IL 62535-9741
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 self-employed dentist
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 21 / 2013
Transaction ID : 11678893
 Amount of Each Receipt this Period
 500.00

B. Dr Edmund D Effort
 Full Name (Last, First, Middle Initial)
 Mailing Address 1139 Mellon St
 City State Zip Code
 Pittsburgh PA 15206-1525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 self-employed dentist
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 21 / 2013
Transaction ID : 11678894
 Amount of Each Receipt this Period
 500.00

C. Dr William H Bragdon
 Full Name (Last, First, Middle Initial)
 Mailing Address 2 Sugarberry Ct
 City State Zip Code
 Greenville SC 29615-4405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 self-employed dentist
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 21 / 2013
Transaction ID : 11678895
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1500.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 16 OF 37
(check only one)
 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 Association Political Action Committee

A. Dr Richard B Kahn
 Full Name (Last, First, Middle Initial)
 Mailing Address 165 Hardenburg Ln
 City East Brunswick State NJ Zip Code 08816-2455
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self-employed Occupation dentist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 21 / 2013
Transaction ID : 11678896
 Amount of Each Receipt this Period
 500.00

B. Dr David M White
 Full Name (Last, First, Middle Initial)
 Mailing Address 11245 Torino Way
 City Reno State NV Zip Code 89521-4238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self-employed Occupation dentist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 21 / 2013
Transaction ID : 11678900
 Amount of Each Receipt this Period
 500.00

C. Dr Lindsay Smith
 Full Name (Last, First, Middle Initial)
 Mailing Address 8713 S Pittsburg Ave
 City Tulsa State OK Zip Code 74137-2677
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self-employed Occupation dentist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 21 / 2013
Transaction ID : 11678905
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1500.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 37
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 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 Association Political Action Committee

A. Dr Bryon E Roshong
Full Name (Last, First, Middle Initial)

Mailing Address 50 Thompson St

City Dumont State NJ Zip Code 07628-3024

FEC ID number of contributing federal political committee. **C**

Name of Employer self-employed Occupation dentist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
05 / 21 / 2013
Transaction ID : 11678907

Amount of Each Receipt this Period
500.00

B. Dr Richard D Riva
Full Name (Last, First, Middle Initial)

Mailing Address 393 Wyoming Ave

City Millburn State NJ Zip Code 07041-2135

FEC ID number of contributing federal political committee. **C**

Name of Employer self-employed Occupation dentist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
05 / 21 / 2013
Transaction ID : 11678952

Amount of Each Receipt this Period
1000.00

C. Mrs. Sharon Riva
Full Name (Last, First, Middle Initial)

Mailing Address 393 Wyoming Avenue

City Millburn State NJ Zip Code 07041-2135

FEC ID number of contributing federal political committee. **C**

Name of Employer Dr. Richard Riva Occupation office business manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
05 / 21 / 2013
Transaction ID : 11678953

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2000.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 OF 37
(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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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 Association Political Action Committee

A. Dr Gordon R Isbell III
Full Name (Last, First, Middle Initial)
Mailing Address 317 Lake Wood Dr
City Gadsden State AL Zip Code 35901-5343
FEC ID number of contributing federal political committee. **C**
Name of Employer self-employed Occupation dentist
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1000.00

Date of Receipt
MM / DD / YYYY
05 / 21 / 2013
Transaction ID : 11678956
Amount of Each Receipt this Period
1000.00

B. Dr Henry W Fields Jr
Full Name (Last, First, Middle Initial)
Mailing Address 4066 Fenwick Rd
City Columbus State OH Zip Code 43220-4870
FEC ID number of contributing federal political committee. **C**
Name of Employer self-employed Occupation Dental School Faculty
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1000.00

Date of Receipt
MM / DD / YYYY
05 / 21 / 2013
Transaction ID : 11678957
Amount of Each Receipt this Period
1000.00

C. Dr Loren J Feldner
Full Name (Last, First, Middle Initial)
Mailing Address 13009 S 83rd Ct
City Palos Park State IL Zip Code 60464-2144
FEC ID number of contributing federal political committee. **C**
Name of Employer self-employed Occupation dentist
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1000.00

Date of Receipt
MM / DD / YYYY
05 / 21 / 2013
Transaction ID : 11678958
Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 3000.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 37
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 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 Association Political Action Committee

A. Dr Jay C Adkins
 Full Name (Last, First, Middle Initial)
 Mailing Address 5301 50th Street, #100
 City Lubbock State TX Zip Code 79414-5834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self-employed Occupation dentist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 21 / 2013
Transaction ID : 11678959
 Amount of Each Receipt this Period
 500.00

B. Dr David Eichler
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 Eagle Ridge Rd
 City Fairbanks State AK Zip Code 99712-1225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self-employed Occupation dentist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 21 / 2013
Transaction ID : 11679125
 Amount of Each Receipt this Period
 500.00

C.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	26400.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 20 OF 37	
(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 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 Association Political Action Committee

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

Mailing Address PO Box 13749

City	State	Zip Code
Sacramento	CA	95853

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10526.67

Date of Receipt

M M	/	D D	/	Y Y Y Y
05	/	30	/	2013

Transaction ID : 11687001

Amount of Each Receipt this Period
630.64

Full Name (Last, First, Middle Initial)
B.

Mailing Address

City	State	Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
	/		/	

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)
C.

Mailing Address

City	State	Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
	/		/	

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	630.64
TOTAL This Period (last page this line number only).....▶	630.64

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 21 OF 37
<input 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 checked="" type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Dental Association Political Action Committee

A. Scott Brown For Us Senate Committee Inc
 Full Name (Last, First, Middle Initial)
 Mailing Address 337 Summer Street
 City Boston State MA Zip Code 02210
 FEC ID number of contributing federal political committee. **C** C00467233
 Name of Employer Occupation
 Receipt For: 2012
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 21 / 2013
Transaction ID : 11673478
 Amount of Each Receipt this Period
 5000.00

B.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

C.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	5000.00

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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 Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Citibank 1

Mailing Address 1500 Vermont Ave Nw

City Washington State DC Zip Code 20005

Purpose of Disbursement
service charges (PayPal-\$90.01)

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	1		2	0	1	3

Transaction ID : 11724836

Amount of Each Disbursement this Period

1	2	4	8
---	---	---	---

service charges (PayPal-\$90.01)

Full Name (Last, First, Middle Initial)

B. Citibank 1

Mailing Address 1500 Vermont Ave Nw

City Washington State DC Zip Code 20005

Purpose of Disbursement
PayPal fees

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	1		2	0	1	3

Transaction ID : 11724846

Amount of Each Disbursement this Period

1	5
---	---

PayPal fees

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

--	--	--	--

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

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

1	2	6	4
---	---	---	---

1	2	6	4
---	---	---	---

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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 Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Committee For C.W. Bill Young

Mailing Address PO Box 47025

City State Zip Code
St. Petersburg FL 33743

Purpose of Disbursement
Contributions to Federal Candidates

Candidate Name
C.W. Young

Office Sought: House
 Senate
 President
State: FL District: 10

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 01 / 2013

Transaction ID : 11637903

Amount of Each Disbursement this Period

4000.00

Contributions to Federal Candidates

Full Name (Last, First, Middle Initial)

B. Nita Lowey For Congress

Mailing Address PO Box 271

City State Zip Code
White Plains NY 10605

Purpose of Disbursement
Void - check not cleared within 90 days

Candidate Name
Rep. Nita M. Lowey

Office Sought: House
 Senate
 President
State: NY District: 17

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 09 / 2013

Transaction ID : 11648411

Amount of Each Disbursement this Period

-2500.00

Void - check not cleared within 90 days

Full Name (Last, First, Middle Initial)

C. Bishop For Congress

Mailing Address PO Box 909

City State Zip Code
Columbus GA 31902

Purpose of Disbursement
Contributions to Federal Candidates

Candidate Name
Sanford Bishop

Office Sought: House
 Senate
 President
State: GA District: 02

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2013

Transaction ID : 11656179

Amount of Each Disbursement this Period

1000.00

Contributions to Federal Candidates

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

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

2500.00

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Dental Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Capito For West Virginia

Mailing Address PO Box 11519

City Charleston State WV Zip Code 25339

Purpose of Disbursement
Contributions to Federal Candidates

Candidate Name
Shelley Capito

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: WV District:

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2013

Transaction ID : 11656180

Amount of Each Disbursement this Period

2500.00

Contributions to Federal Candidates

Full Name (Last, First, Middle Initial)

B. Denny Heck For Congress

Mailing Address PO Box 235

City Olympia State WA Zip Code 98507

Purpose of Disbursement
Contributions to Federal Candidates

Candidate Name
Dennis Heck

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: WA District: 10

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2013

Transaction ID : 11656188

Amount of Each Disbursement this Period

2000.00

Contributions to Federal Candidates

Full Name (Last, First, Middle Initial)

C. Hoyer For Congress

Mailing Address 700 13th Street, Nw
Suite 600

City Washington State DC Zip Code 20005

Purpose of Disbursement
Contributions to Federal Candidates

Candidate Name
Rep. Steny H. Hoyer

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: MD District: 05

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2013

Transaction ID : 11656189

Amount of Each Disbursement this Period

2500.00

Contributions to Federal Candidates

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

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

7000.00

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Dental Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. People For Derek Kilmer

Mailing Address PO Box 1574

City Gig Harbor State WA Zip Code 98335

Purpose of Disbursement
Contributions to Federal Candidates

Candidate Name
Derek Kilmer

Office Sought: House
 Senate
 President
State: WA District: 06

Disbursement For: 2014
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 10 / 2013

Transaction ID : 11656190

Amount of Each Disbursement this Period

2000.00

Contributions to Federal Candidates

Full Name (Last, First, Middle Initial)

B. Nita Lowey For Congress

Mailing Address PO Box 271

City White Plains State NY Zip Code 10605

Purpose of Disbursement
Contributions to Federal Candidates

Candidate Name
Rep. Nita M. Lowey

Office Sought: House
 Senate
 President
State: NY District: 17

Disbursement For: 2014
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 10 / 2013

Transaction ID : 11656191

Amount of Each Disbursement this Period

2500.00

Contributions to Federal Candidates

Full Name (Last, First, Middle Initial)

C. Kevin Mccarthy For Congress

Mailing Address PO Box 12667

City Bakersfield State CA Zip Code 93389

Purpose of Disbursement
Contributions to Federal Candidates

Candidate Name
Rep. Kevin McCarthy

Office Sought: House
 Senate
 President
State: CA District: 23

Disbursement For: 2014
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 10 / 2013

Transaction ID : 11656193

Amount of Each Disbursement this Period

2500.00

Contributions to Federal Candidates

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

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

7000.00

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Dental Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Moran For Congress

Mailing Address 311 North Washington Street
Suite 200I

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Contributions to Federal Candidates

Candidate Name

Rep. James P. Moran

Office Sought: House
 Senate
 President
State: VA District: 08

Disbursement For: 2014
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 10 / 2013

Transaction ID : 11656194

Amount of Each Disbursement this Period

1000.00

Contributions to Federal Candidates

Full Name (Last, First, Middle Initial)

B. PAC to the Future

Mailing Address PMB 3230
268 Bush Street

City San Francisco State CA Zip Code 94104

Purpose of Disbursement
Contributions to Federal PACS

Candidate Name

PAC to the Future

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 10 / 2013

Transaction ID : 11656195

Amount of Each Disbursement this Period

2500.00

Contributions to Federal PACS

Full Name (Last, First, Middle Initial)

C. Roskam for Congress Committee

Mailing Address 141 Shelley Lane

City Wheaton State IL Zip Code 60187

Purpose of Disbursement
Contributions to Federal Candidates

Candidate Name

Peter Roskam

Office Sought: House
 Senate
 President
State: IL District: 06

Disbursement For: 2014
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 10 / 2013

Transaction ID : 11656196

Amount of Each Disbursement this Period

1000.00

Contributions to Federal Candidates

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

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

4500.00

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Dental Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Raul Ruiz For Congress

Mailing Address PO Box 6116

City La Quinta State CA Zip Code 92248

Purpose of Disbursement
Contributions to Federal Candidates

Candidate Name

Rep. Raul Ruiz MD

Office Sought: House
 Senate
 President

State: CA District: 36

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	0		2	0	1	3

Transaction ID : 11656197

Amount of Each Disbursement this Period

1	5	0	0	.	0	0
---	---	---	---	---	---	---

Contributions to Federal Candidates

Full Name (Last, First, Middle Initial)

B. Defend America PAC

Mailing Address P.O. Box 2626

City Tuscaloosa State AL Zip Code 35403

Purpose of Disbursement
Contributions to Federal PACS

Candidate Name

Defend America PAC

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	0		2	0	1	3

Transaction ID : 11656198

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

Contributions to Federal PACS

Full Name (Last, First, Middle Initial)

C. Congressman Waxman Campaign Committee

Mailing Address 6380 Wilshire Blvd., #1612

City Los Angeles State CA Zip Code 90048

Purpose of Disbursement
Contributions to Federal Candidates

Candidate Name

Rep. Henry A. Waxman

Office Sought: House
 Senate
 President

State: CA District: 33

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	0		2	0	1	3

Transaction ID : 11656199

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

Contributions to Federal Candidates

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

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

6	5	0	0	.	0	0
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6	5	0	0	.	0	0
---	---	---	---	---	---	---

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Dental Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Steve Chabot For Congress

Mailing Address 3030 Harrison Ave.

City Cincinnati State OH Zip Code 45211

Purpose of Disbursement
Contributions to Federal Candidates (201)

011

Candidate Name

Rep. Steve Chabot

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: OH District: 01

Date of Disbursement

MM / DD / YYYY
05 / 23 / 2013

Transaction ID : 11686036

Amount of Each Disbursement this Period

2000.00

Contributions to Federal Candidates (201)

Full Name (Last, First, Middle Initial)

B. Friends Of Rosa DeLauro

Mailing Address 12 Trumbull Street

City New Haven State CT Zip Code 06511

Purpose of Disbursement
Contributions to Federal Candidates Funds Reported On <Enter Report Name Here>

011

Candidate Name

Rep. Rosa L. DeLauro

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: CT District: 03

Date of Disbursement

MM / DD / YYYY
04 / 26 / 2013

Transaction ID : 11686909

Amount of Each Disbursement this Period

2000.00

[MEMO ITEM]

Contributions to Federal Candidates Funds Reported On <Enter Report Name Here>

Full Name (Last, First, Middle Initial)

C. Friends Of Rosa DeLauro

Mailing Address 12 Trumbull Street

City New Haven State CT Zip Code 06511

Purpose of Disbursement
Contributions to Federal Candidates Re-designated funds for trans. dated 4/26/2013

011

Candidate Name

Rep. Rosa L. DeLauro

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼
2014 Convention Elec

State: CT District: 03

Date of Disbursement

MM / DD / YYYY
05 / 29 / 2013

Transaction ID : 11686910

Amount of Each Disbursement this Period

2000.00

[MEMO ITEM]

Contributions to Federal Candidates Re-designated funds for trans. dated 4/26/2013

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

2000.00

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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Dental Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Alexander for Senate

Mailing Address PO Box 121919

City Nashville State TN Zip Code 37212

Purpose of Disbursement
Contributions to Federal Candidates

011

Candidate Name

Lamar Alexander

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: TN District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	9		2	0	1	3

Transaction ID : 11686911

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0

Contributions to Federal Candidates

Full Name (Last, First, Middle Initial)

B. Citizens For Cochran

Mailing Address 228 S. Washington Street
Suite B-20

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Contributions to Federal Candidates

011

Candidate Name

Thad Cochran

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MS District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	9		2	0	1	3

Transaction ID : 11686912

Amount of Each Disbursement this Period

1	5	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0

Contributions to Federal Candidates

Full Name (Last, First, Middle Initial)

C. Collins For Senator

Mailing Address PO Box 1096

City Bangor State ME Zip Code 04402

Purpose of Disbursement
Contributions to Federal Candidates

011

Candidate Name

Sen. Susan M. Collins

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: ME District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	9		2	0	1	3

Transaction ID : 11686913

Amount of Each Disbursement this Period

1	5	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0

Contributions to Federal Candidates

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

5	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0

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

5	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Dental Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dirigo PAC

Mailing Address PO Box 1355

City Alexandria State VA Zip Code 22313

Purpose of Disbursement
Contributions to Federal PACS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 29 / 2013

Transaction ID : 11686914

Amount of Each Disbursement this Period

2500.00

Contributions to Federal PACS

Full Name (Last, First, Middle Initial)

B. Enzi For U.S. Senate Committee

Mailing Address PO Box 2775

City Cody State WY Zip Code 82414

Purpose of Disbursement
Contributions to Federal Candidates

Candidate Name

Michael Enzi

Office Sought: House Senate President
State: WY District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 29 / 2013

Transaction ID : 11686915

Amount of Each Disbursement this Period

1500.00

Contributions to Federal Candidates

Full Name (Last, First, Middle Initial)

C. To Organize a Majority PAC

Mailing Address PO Box 752

City Des Moines State IA Zip Code 50303

Purpose of Disbursement
Contributions to Federal PACS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 29 / 2013

Transaction ID : 11686916

Amount of Each Disbursement this Period

5000.00

Contributions to Federal PACS

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

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

9000.00

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Dental Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mike Honda For Congress

Mailing Address C/O Contribution Solutions, Llc
123 E. San Carlos St., #531

City San Jose State CA Zip Code 95112

Purpose of Disbursement
Contributions to Federal Candidates

011

Candidate Name

Rep. Mike M. Honda

Category/
Type

Office Sought: House
 Senate
 President
State: CA District: 17

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2013

Transaction ID : 11686917

Amount of Each Disbursement this Period

2000.00

Contributions to Federal Candidates

Full Name (Last, First, Middle Initial)

B. Huffman For Congress 2014

Mailing Address P.O. Box 151563

City San Rafael State CA Zip Code 94915

Purpose of Disbursement
Contributions to Federal Candidates

011

Candidate Name

Rep. Jared Huffman

Category/
Type

Office Sought: House
 Senate
 President
State: CA District: 02

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2013

Transaction ID : 11686920

Amount of Each Disbursement this Period

1000.00

Contributions to Federal Candidates

Full Name (Last, First, Middle Initial)

C. Lincoln PAC

Mailing Address 3701 Connecticut Ave., NW #404

City Washington State DC Zip Code 20008

Purpose of Disbursement
Contributions to Federal PACS

011

Candidate Name

Lincoln PAC

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2013

Transaction ID : 11686921

Amount of Each Disbursement this Period

2500.00

Contributions to Federal PACS

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

5500.00

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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Dental Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. John Lewis For Congress

Mailing Address P.O. Box 2323

City Atlanta State GA Zip Code 30301

Purpose of Disbursement
Contributions to Federal Candidates

011

Category/
Type

Candidate Name

Rep. John Lewis

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: GA District: 05

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	9		2	0	1	3

Transaction ID : 11686922

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Contributions to Federal Candidates

Full Name (Last, First, Middle Initial)

B. Committee For Mitch McConnell

Mailing Address 361-A Russell Senate Office Buildi

City Washington State DC Zip Code 20510

Purpose of Disbursement
Contributions to Federal Candidates

011

Category/
Type

Candidate Name

Mitch McConnell

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: KY District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	9		2	0	1	3

Transaction ID : 11686923

Amount of Each Disbursement this Period

1	5	0	0	0	0	0	0	0	0

Contributions to Federal Candidates

Full Name (Last, First, Middle Initial)

C. New Millennium PAC

Mailing Address PO Box 32248

City Newark State NJ Zip Code 07100206

Purpose of Disbursement
Contributions to Federal PACS

011

Category/
Type

Candidate Name

New Millennium PAC

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	9		2	0	1	3

Transaction ID : 11686924

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0

Contributions to Federal PACS

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

5	0	0	0	0	0	0	0	0	0

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

5	0	0	0	0	0	0	0	0	0

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Dental Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Candice Miller For Congress

Mailing Address PO Box 182152

City State Zip Code
Shelby Township MI 48318

Purpose of Disbursement
Contributions to Federal Candidates

011

Candidate Name
Rep. Candice S. Miller

Category/
Type

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: MI District: 10

Date of Disbursement

MM / DD / YYYY
05 / 29 / 2013

Transaction ID : 11686925

Amount of Each Disbursement this Period

2500.00

Contributions to Federal Candidates

Full Name (Last, First, Middle Initial)

B. Jim Risch For U S Senate Committee

Mailing Address 407 W Jefferson Street

City State Zip Code
Boise ID 83702

Purpose of Disbursement
Contributions to Federal Candidates

011

Candidate Name
Sen. James E. Risch

Category/
Type

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: ID District:

Date of Disbursement

MM / DD / YYYY
05 / 29 / 2013

Transaction ID : 11686926

Amount of Each Disbursement this Period

2000.00

Contributions to Federal Candidates

Full Name (Last, First, Middle Initial)

C. Pat Roberts For Us Senate Inc

Mailing Address PO Box 433

City State Zip Code
Great Bend KS 67530

Purpose of Disbursement
Contributions to Federal Candidates

011

Candidate Name
Sen. Pat Roberts

Category/
Type

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: KS District:

Date of Disbursement

MM / DD / YYYY
05 / 29 / 2013

Transaction ID : 11686927

Amount of Each Disbursement this Period

2500.00

Contributions to Federal Candidates

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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Dental Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ryan For Congress, Inc.

Mailing Address PO Box 1488

City State Zip Code
Janesville WI 53547

Purpose of Disbursement
Contributions to Federal Candidates

011

Candidate Name

Rep. Paul D. Ryan

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: WI District: 01

Date of Disbursement

MM / DD / YYYY
05 / 29 / 2013

Transaction ID : 11686928

Amount of Each Disbursement this Period

1500.00

Contributions to Federal Candidates

Full Name (Last, First, Middle Initial)

B. Tim Scott For Senate

Mailing Address 1405 Ashley River Road

City State Zip Code
Charleston SC 29407

Purpose of Disbursement
Contributions to Federal Candidates

011

Candidate Name

Sen. Tim Scott

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: SC District:

Date of Disbursement

MM / DD / YYYY
05 / 29 / 2013

Transaction ID : 11686929

Amount of Each Disbursement this Period

2000.00

Contributions to Federal Candidates

Full Name (Last, First, Middle Initial)

C. Tomorrow is Meaningful PAC

Mailing Address 209 Pennsylvania Ave, Ste 2109

City State Zip Code
Washington DC 20003

Purpose of Disbursement
Contributions to Federal PACS

011

Candidate Name

Tomorrow is Meaningful PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 29 / 2013

Transaction ID : 11686931

Amount of Each Disbursement this Period

2000.00

Contributions to Federal PACS

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

5500.00

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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Dental Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Friends Of Sessions Senate Committee Inc

Mailing Address P O Box 4278

City Montgomery State AL Zip Code 36103

Purpose of Disbursement
Contributions to Federal Candidates

011

Category/
Type

Candidate Name

Sen. Jeff Sessions

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: AL District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	9		2	0	1	3

Transaction ID : 11686932

Amount of Each Disbursement this Period

1	5	0	0	0	0
---	---	---	---	---	---

Contributions to Federal Candidates

Full Name (Last, First, Middle Initial)

B. Tiberi For Congress

Mailing Address 2931 E Dublin Granville Road
Suite 190

City Columbus State OH Zip Code 43231

Purpose of Disbursement
Contributions to Federal Candidates

011

Category/
Type

Candidate Name

Rep. Pat J. Tiberi

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: OH District: 12

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	9		2	0	1	3

Transaction ID : 11686933

Amount of Each Disbursement this Period

1	0	0	0	0	0
---	---	---	---	---	---

Contributions to Federal Candidates

Full Name (Last, First, Middle Initial)

C. John Tierney For Congress

Mailing Address 49 Federal Street

City Salem State MA Zip Code 01970

Purpose of Disbursement
Contributions to Federal Candidates

011

Category/
Type

Candidate Name

John Tierney

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MA District: 06

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	9		2	0	1	3

Transaction ID : 11686934

Amount of Each Disbursement this Period

1	0	0	0	0	0
---	---	---	---	---	---

Contributions to Federal Candidates

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

3	5	0	0	0	0
---	---	---	---	---	---

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

3	5	0	0	0	0
---	---	---	---	---	---

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Dental Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mike Thompson For Congress

Mailing Address 5429 Madison Avenue

City Sacramento State CA Zip Code 95841

Purpose of Disbursement
Contributions to Federal Candidates

011

Candidate Name
Rep. Mike Thompson

Category/
Type

Office Sought: House
 Senate
 President
State: CA District: 05

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2013

Transaction ID : 11686935

Amount of Each Disbursement this Period

1000.00

Contributions to Federal Candidates

Full Name (Last, First, Middle Initial)

B. Ann Wagner For Congress

Mailing Address PO Box 50

City Ballwin State MO Zip Code 63022

Purpose of Disbursement
Contributions to Federal Candidates

011

Candidate Name
Ann Wagner

Category/
Type

Office Sought: House
 Senate
 President
State: MO District: 02

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2013

Transaction ID : 11686936

Amount of Each Disbursement this Period

2500.00

Contributions to Federal Candidates

Full Name (Last, First, Middle Initial)

C. COATS PAC

Mailing Address PO BOX 34303

City Indianapolis State IN Zip Code 46234

Purpose of Disbursement
Contributions to Federal PACS

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2013

Transaction ID : 11686947

Amount of Each Disbursement this Period

2000.00

Contributions to Federal PACS

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

5500.00

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

