

**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 40  
(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**

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

Mailing Address 50 Thompson St

City State Zip Code  
 Dumont NJ 07628-3024

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  
 05 / 07 / 2012  
**Transaction ID : 10805760**

Amount of Each Receipt this Period  
 500.00

Full Name (Last, First, Middle Initial)  
**B. Dr William Lee Beasley**

Mailing Address 5308 Wisteria Dr

City State Zip Code  
 Oklahoma City OK 73142-1818

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 ▼  
 750.00

Date of Receipt  
 05 / 07 / 2012  
**Transaction ID : 10805771**

Amount of Each Receipt this Period  
 750.00

Full Name (Last, First, Middle Initial)  
**C. Dr Curtis R Johnson**

Mailing Address 140 Juniper St

City State Zip Code  
 Scotland SD 57059-2115

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  
 05 / 07 / 2012  
**Transaction ID : 10805775**

Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1750.00

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