

**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 84 OF 238
	<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	<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 Michael J Hoffmann**  
Full Name (Last, First, Middle Initial)

Mailing Address 600 N Taylor Ave

City Kirkwood State MO Zip Code 63122-2942

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 11 / 19 / 2015  
**Transaction ID : AAA5C3B2CA4E4470F8F9**

Amount of Each Receipt this Period 1000.00

**B. Dr Charles W Hoffman**  
Full Name (Last, First, Middle Initial)

Mailing Address 237 Golfview Dr

City Tequesta State FL Zip Code 33469-1922

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 ▼ 250.00

Date of Receipt 11 / 08 / 2015  
**Transaction ID : AE82FF78289554D469B0**

Amount of Each Receipt this Period 250.00

**C. Dr Steven C Hollar**  
Full Name (Last, First, Middle Initial)

Mailing Address 1632 S Woodfield Trl

City Warsaw State IN Zip Code 46580-5819

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 ▼ 375.00

Date of Receipt 11 / 06 / 2015  
**Transaction ID : A3E5621EC79804A2FBF6**

Amount of Each Receipt this Period 375.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1625.00

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