11/10/2009 13:15

Image# 29993314001

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X	For Otl	her Than An Auth	orized Comn	nittee	C	Office Use Only
NAME OF COMMITTEE (in full)		C MAILING LABEL E OR PRINT ₩				
American Dental Asso	ociation Political	Action Committee				
ADDRESS (number and str	eet) <u> </u>	14th Street, NW 1100				
than previously reported. (ACC)	Wash	nington			DC L	20005
2. FEC IDENTIFICATIO	N NUMBER	▼ CIT	Y 🙇		STATE	ZIPCODE 🛕
C00000729			THIS EPORT	NEW (N) OR	X AMEI	NDED
4. TYPE OF REPOR (Choose One) (a) Quarterly Report April 15 Quarterly Re July 15 Quarterly Re October 15 Quarterly Re January 31 Quarterly Re July 31 Mid- Report(Non Year Only) (Termination (TER)	eport(Q1) eport(Q2) eport(Q3) eport(YE) -Year -election (MY)	Due On:	n on General	(12P) (ion (12C)	Aug 20 Sep 20 Oct 20 General (120 Special (120 Runoff (30R	Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE) G) Runoff (12R) G) in the State of
5. Covering Period	0.6	2009	throu	gh 0 6	30	2009
I certify that I have examine Type or Print Name of Trea Signature of Treasurer		Dennis Zent			and complete. Date 1 1	10 2009
NOTE : Submission of fals	se, erroneous, or	incomplete information	may subject the	person signing th	is Report to the pe	enalties of 2 U.S.C 437g.
Use						(Rev. 12/2004)

FE6AN026

A. Form/Schedule : F3XA

Adjusted beginning cash on hand amount.

 $Transaction \ ID: \\$

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) 3 / 42 Write or Type Committee Name American Dental Association Political Action Committee D D [®]D 06 0 1 2009 0.6 3 0 2009 From: Report Covering the Period: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2009° 276141.44 January 1 (b) Cash on Hand at 516729.38 Begining of Reporting Period 16662.56 746675.45 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 533391.94 1022816.89 6(a) and 6(c) for Column B) 699347.28 209922.33 Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 323469.61 323469.61 (subtract Line 7 from Line 6(d)) Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D)

X This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) 4 / 42

Write or Type Committee Name

American Dental Association Political Action Committee

Report Covering the Period:

From:

м м 0 6 01

2009

To:

м м 0 6 ^D 3 0

^Y 2009

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	Contributions (other than loans) From: (a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	3500.00	28000.00
	(ii) Unitemized	11671.00	656643.95
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	15171.00	684643.95
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	15171.00	684643.95
	Transfers From Affiliated/Other Party Committees	1428.45	61399.56
3	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00
1	to Federal candidates and Other Political Committees	0.00	0.00
	Other Federal Receipts (Dividends, Interest, etc.)	63.11	631.94
	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 Transfer (add 18(a) and 18(b)).	0.00	0.00
	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	16662.56	746675.45
	Total Federal Receipts (subtract Line 18(c) from Line 19)	16662.56	746675.45

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)

of Disbursements

5 / 42

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Operating Expenditures: (a) Shared Federal/Non-Federal		
Activity (from Schedule H4)	0.00	0.00
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating	400.00	252.00
Expenditures	422.33	950.28
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	422.33	950.28
2. Transfers to Affiliated/Other Party		
Committees	0.00	0.00
Federal Candidates/Committeesand Other Political Committees	209500.00	697300.00
and Other Political Committees	209300.00	037300.00
(use Schedule E)	0.00	0.00
5. Coordinated Expenditures Made by Party Committees (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:	0.00	0.00
(a) Individuals/Persons Other Than Political Committees	0.00	300.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees		
(such as PACs)	0.00	0.00
(d) Total Contribution Refunds	0.00	300.00
(add Lines 28(a), (b), and (c))	0.00	300.00
). Other Disbursements	0.00	797.00
Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity		
(from Schedule H6)	0.00	0.00
(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	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))	209922.33	699347.28
2. Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	209922.33	699347.28

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) 6 / 42

	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)	15171.00	684643.95
34.	Total Contribution Refunds (from Line 28(d))	0.00	300.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	15171.00	684343.95
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	422.33	950.28
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	422.33	950.28

FE6AN026

SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 42 (check only one) 11a 11b 11c X 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any pe the name and address of any political committee	
American Dental Association Politica	al Action Committee	
Full Name (Last, First, Middle Initial) California Dental PAC		Date of Receipt
Mailing Address PO Box 13749		06 05 7 2009
City Sacramento	State Zip Code CA 95853	Transaction ID: 7910852 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	595.45
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 18349.56	
Full Name (Last, First, Middle Initial) California Dental PAC	_ I	Date of Receipt
Mailing Address PO Box 13749		06 15 2009
City	State Zip Code	Transaction ID: 7931282
Sacramento	CA 95853	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	49.00
Name of Employer	Occupation	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 18398.56	
Full Name (Last, First, Middle Initial)		
Indiana Dental PAC		Date of Receipt
Mailing Address PO Box 2467		06 / 30 / 2009
City Indianapolis	State Zip Code IN 46206	Transaction ID: 8014869 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	49.00
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 9334.00	
SURTOTAL of Receipts This Page (optional)	<u> </u>	693.45

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 42 (check only one) 11a 11b 11c X 12 13 14 15 16 17
Any information copied from such Reports and Stor for commercial purposes, other than using the	tatements may not be sold or used by any p name and address of any political committe	person for the purpose of soliciting contributions ee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Dental Association Political A	Action Committee	
Full Name (Last, First, Middle Initial) North Carolina Dental PAC Mailing Address 1600 Evans Road City	State Zip Code	Date of Receipt M M D D Y Y Y Y Y Y Y Y
Cary FEC ID number of contributing federal political committee. Name of Employer	NC 27513 C Occupation	Amount of Each Receipt this Period 735.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 16513.00	

SUBTOTAL of Receipts This Page (optional)	•	735.00
TOTAL This Period (last page this line number only)	•	1428.45

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 42 (check only one) X 11a
0	ny information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements mane and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American Dental Association Politica	l Action Com	mittee	
	Pull Name (Last, First, Middle Initial) Dr Joseph J Thomas Mailing Address 2275 20th St			Date of Receipt
	Mailing Address 2275 20(f) St			06 15 2009
	City	State	Zip Code	Transaction ID: 7931036
	Vero Beach	FL	32960-3045	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer self-employed	Occupatio dentist	n	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
_	Full Name (Last, First, Middle Initial) Dr F Robert Murphy			Date of Receipt
	Mailing Address 4075 57th St			06 16 2009
	City	State	Zip Code	Transaction ID: 7932124
	Boulder	CO	80301-3021	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer self-employed	Occupatio dentist	n	
	Receipt For:	Aggregate	e Year-to-Date ▼	_
	Primary General Other (specify) ▼		500.00	
	Full Name (Last, First, Middle Initial) Dr William Allen Pfeifer			Date of Receipt
	Mailing Address			0 6 1 6 2 0 0 9
	City	State	Zip Code	Transaction ID: 7932190 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer self-employed	Occupatio dentist	n	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
Γ	SUBTOTAL of Receipts This Page (optional)			1500.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 42 (check only one) X 11a 11b 11c 12 13 14 15 16 11
0	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements mage name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Dental Association Political	Action Com	mittee	
	Full Name (Last, First, Middle Initial) Dr Scarlet Disse-Pfeifer			Date of Receipt
	Mailing Address 6979 S Holly Circle			06 16 2009
	City	State	Zip Code	Transaction ID: 7932191
	Centennial	CO	80112-1577	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer self-employed	Occupatio dentist	n	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
_	Full Name (Last, First, Middle Initial) Dr Brian O Coleman			Date of Receipt
	Mailing Address 8527 Sand Lake Shor	es Dr		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 8014868
	Orlando	FL	32836-6342	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Self-employed	Occupatio Dentist	n	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼		500.00	
_	Full Name (Last, First, Middle Initial) Dr Warren Boswell Branch	<u> </u>		Date of Receipt
	Mailing Address			06 30 7 2009
	City	State	Zip Code	Transaction ID: 8014870 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer self-employed	Occupatio dentist	n	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
Г		1		1250.00

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 11/42 Use separate schedule(s) (check only one) for each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 13 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) Dr Jessica L Robertson Date of Receipt Mailing Address 1110 W Beal Rd 06 30 2009 City State Zip Code Transaction ID: 8014878 Flagstaff ΑZ 86001-1281 Amount of Each Receipt this Period FEC ID number of contributing C 750.00 federal political committee. Name of Employer self-employed Occupation dentist Receipt For: Aggregate Year-to-Date Primary General 750.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)	•	750.00
TOTAL This Period (last page this line number only)	•	3500.00

SCHEDULE A (FEC Form 3X	7		FOR LINE NUMBER: PAGE 12 / 42
ITEMIZED RECEIPTS	,	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 X 17
Any information copied from such Reports and or for commercial purposes, other than using			
NAME OF COMMITTEE (In Full)			
American Dental Association Politic	al Action Com	mittee	
Full Name (Last, First, Middle Initial) Citibank 1			Date of Receipt
Mailing Address 1500 Vermont Ave N	٧w		06 30 2009
City	State	Zip Code	Transaction ID: 8041837
Washington	DC	20005	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		63.11
Name of Employer	Occupatio	n	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 631.94	

SUBTOTAL of Receipts This Page (optional)	•	63.11
TOTAL This Period (last page this line number only)	•	63.11

	CHEDOLL B (I LO I OHII 3X)	Use separate schedule(s	;)		OR LINE I neck only					1 70	àE 1;	3 / 42	
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		À	21b 27	22 28a	X	23 28b		24 28c	2:	9	20
	y Information copied from such Reports and Stater for commercial purposes, other than using the nam NAME OF COMMITTEE (In Full) American Dental Association Political Acti	e and address of any politication											
V	American Denial Association Folitical Acti	on committee											
	Full Name (Last, First, Middle Initial) Lance For Congress Mailing Address PO Box 225					Date		on ID:				ŏ 9 °	
	City Colonia	State Zip Code NJ 07067				Amou	int o	f Each	Disb	ursen	nent th	nis Pe	riod
	Purpose of Disbursement Check sent to Jim Schulz for event 6/12/09 Candidate Name Rep. Leonard Lance	07007	Ca		ory/						1500	.00	
	Office Sought: X House Disburs	ement For: 2010 Primary General Other (specify)	<u> </u>	Тур	e	Checl for ev				Schu	lz		
	Full Name (Last, First, Middle Initial) Tiberi For Congress						of Di	sburs	ement				
	Mailing Address 2021 E Dublin Granville Suite 2000	Road				0 ^M 6	M	[′] C	1	Ľ	ž 0	δ́9ັ	
	City Columbus	State Zip Code OH 43229				Amou	int o	f Each	Disb				riod
	Purpose of Disbursement Check sent to Dr. Dennis Burns Candidate Name Rep. Patrick J. Tiberi		C	01 ateg Typ	ory/	L.	•	•			2000	0.00	
	- <u>-</u>	ement For: 2010 Primary General Other (specify)		71-		Checl Burns		nt to	Dr. E)enni	is		
	Full Name (Last, First, Middle Initial) Latham For Congress						of Di	sburs	ement		•		
	Mailing Address P.O. Box 71					0 ^M 6	M	[′] □ C	1	Y	ž o	ŏ́9Ť	
	City Clarion	State Zip Code IA 50525				Amou	int o	f Each	Disb	ursen	nent th	nis Pe	rioc
	Purpose of Disbursement Check sent to Larry Carl		Г	01	1	L.					1000	.00	_
	Candidate Name Rep. Thomas P. Latham		Ca		ory/								
	<u> </u>	ement For: 2010 Primary General Other (specify)				Checl	k se	nt to	Larry	/ Car	1		
Г	UBTOTAL of Disbursements This Page (optional)										4500	00	_

	CHEDULE B (FEC Form 3X	· Use sepa	arate schedule(s)	_	NUMBER: PAGE 14 / 42
IT	EMIZED DISBURSEMENTS	for each	category of the Summary Page	(check onl	y one) 22 X 23 24 25 28 28b 28c 29 3
	y Information copied from such Reports and for commercial purposes, other than using the			by any person	for the purpose of soliciting contributions
\ \	NAME OF COMMITTEE (In Full)	Te riaine and addre	ss of any political	Committee to so	Silcit Contributions from Such Committee
$\Big angle$	American Dental Association Politica	al Action Comm	ittee		
	Full Name (Last, First, Middle Initial) Ameripac				Transaction ID: 7896440 Date of Disbursement
	Mailing Address 499 South Capitol, Suite 414	SW			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City Washington	State DC	Zip Code 20003		Amount of Each Disbursement this Period
	Purpose of Disbursement Check sent to Frank McLaughlin			011	5000.00
	Candidate Name			Category/ Type	
	Senate President	Primary Other (spe	General ecify) ▼		Check sent to Frank McLau- ghlin
	State: District:				
	Full Name (Last, First, Middle Initial) Mikulski For Senate				Transaction ID: 7896441 Date of Disbursement
	Mailing Address 1629 Thames Stre Suite 400	et			$ \begin{bmatrix} M & M \\ 0 & 6 \end{bmatrix} \begin{bmatrix} D & D \\ 0 & 1 \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y & Y & Y & Y & Y & Y & Y &$
	City Baltimore	State MD	Zip Code 21231		Amount of Each Disbursement this Period
	Purpose of Disbursement Check sent to Campaign per Frank McLaue	ghlin		011	500.00
	Candidate Name Barbara Mikulski			Category/ Type	
	X Senate President	X Primary Other (spe	2010 General		Check sent to Campaign per Frank McLaughlin
	State: MD District: Full Name (Last, First, Middle Initial)				Transaction ID: 7896910
	Michael Burgess For Congress				Date of Disbursement
	Mailing Address PO Box 2334				$ \begin{bmatrix} 0 & 6 & M \\ 0 & 6 & M \end{bmatrix} \begin{bmatrix} 0 & 0 & 0 \\ 0 & 0 & 2 \end{bmatrix} \begin{bmatrix} 0 & 0 & 0 \\ 0 & 0 & 0 \end{bmatrix} \begin{bmatrix} 0 & 0 & 0 \\ 0 & 0 & 0 \end{bmatrix} \begin{bmatrix} 0 & 0 & 0 \\ 0 & 0 & 0 \end{bmatrix} \begin{bmatrix} 0 & 0 & 0 \\ 0 & 0 & 0 \end{bmatrix} $
	City Denton	State TX	Zip Code 76202		Amount of Each Disbursement this Perio
	Purpose of Disbursement Check sent to Dr. John Findley			011	2500.00
	Candidate Name Rep. Michael C. Burgess, M.D.			Category/ Type	
	Office Sought: X House Senate President State: TX District: 26	X Primary Other (spe	2010 General		Check sent to Dr. John Fi- ndley
	State. IA DISTITUT. 20				
_	UBTOTAL of Disbursements This Page (op	otional)			8000.00

HEDULE B (FEC Form 3X)	Use separate schedule(s)		NUMBER: PAGE 15 / 42
EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	y one) 22 X 23 24 25 28a 28b 28c 29
Information copied from such Reports and Stater or commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)	io and address of any pointed	1 0011111111100 10 00	
American Dental Association Political Acti	ion Committee		
Full Name (Last, First, Middle Initial) Arcuri For Congress			Transaction ID: 7896911 Date of Disbursement
Mailing Address P.O. Box 8508			$\begin{bmatrix}\begin{smallmatrix}M\\O&G\end{smallmatrix}\end{bmatrix}^M \begin{bmatrix}\begin{smallmatrix}D\\O&D\end{smallmatrix}\end{bmatrix}^D \begin{bmatrix}\begin{smallmatrix}Y\\O&D\end{smallmatrix}\end{bmatrix}^Y \begin{bmatrix}\begin{smallmatrix}Y\\O&O\end{smallmatrix}\end{bmatrix}^Y \begin{bmatrix}Y\\O&O\end{smallmatrix}\end{bmatrix}^Y$
City Utica	State Zip Code NY 13505		Amount of Each Disbursement this Perio
Purpose of Disbursement Check sent to Dr. Tim Hession for event 5/28/09		011	2000.00
Candidate Name Rep. Michael Arcuri		Category/ Type	
	ement For: 2010 Primary General Other (specify)		Check sent to Dr. Tim Hession for event 5/28/09
Full Name (Last, First, Middle Initial)			Transaction ID: 7900779
Adler For Congress			Date of Disbursement
Mailing Address PO Box 1024			$\begin{bmatrix} \begin{smallmatrix} M & G & M \\ O & G & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ O & G \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ Q & O & O & P \end{bmatrix} $
City Mount Laurel	State Zip Code NJ 08054		Amount of Each Disbursement this Perio
Purpose of Disbursement Check sent to Jim Schulz for delivery by Dr. Mike	Etter	011	2500.00
Candidate Name Mr. John Adler		Category/ Type	
X	ement For: 2010 Primary General Other (specify)		Check sent to Jim Schulz for delivery by Dr. Mike Etter
Full Name (Last, First, Middle Initial) Steve Austria For Congress			Transaction ID: 7901284 Date of Disbursement
Mailing Address 2537 Obetz Dr			$\begin{bmatrix} \begin{smallmatrix} M & G & M \\ O & G \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ O & J \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Q & O & Q \\ Y & Z & O & O & Q \end{bmatrix}$
City Beavercreek	State Zip Code OH 45434		Amount of Each Disbursement this Period
Purpose of Disbursement Check sent to Dave Owsiany for event 6/15/09		011	2500.00
Candidate Name Rep. Steve Austria		Category/ Type	
X	ement For: 2010 Primary General Other (specify)		Check sent to Dave Owsiany for event 6/15/09
State: OH District: 07			
DTOTAL of Disharman and at This Days (11 11 11			7000.00
BTOTAL of Disbursements This Page (optional)		>	700

SCHEDULE B (FEC Form	n 3X)	Use sepa	arate schedule(s)				NUMBE	R:		PA	AGE	16 / 4	2
ITEMIZED DISBURSEME	INTS	for each	category of the Summary Page			eck only 21b 27	22 28a		23 28b	24 28c		25 29	20
Any Information copied from such Repo													
or for commercial purposes, other than	using the name	e and addre	ss of any political	con	nmitte	ee to so	licit contr	ibutio	ns tro	m such	comm	ittee	
NAME OF COMMITTEE (In Full) American Dental Association	Political Action	on Commi	ttee										
/													
Full Name (Last, First, Middle Initial Sestak for Congress)						Trans Date of		burse		98		
Mailing Address PO Box 16							0 ^M 6	M /	^D 0	9 /	ž	0 ŏ 9	Y
City Media		State PA	Zip Code 19063				Amou	nt of	Each	Disburse			eriod
Purpose of Disbursement Check sent to Dr. Ron Bushick					011			_	-		250	0.00	-
Candidate Name Joseph Sestak					atego Type	,							
Office Sought: X House Senate President		ement For: Primary Other (spe	2010 General				Check hick	k sen	t to I	Dr. Ron	Bus-		
State: PA District: 07			· 										
Full Name (Last, First, Middle Initial Lynn Jenkins For Congress)						Date	of Dis	burse				
Mailing Address P.O. Box 14	41						0 ^M 6	M /	0	9 /	ž	0 ŏ 9	Y
City Topeka		State KS	Zip Code 66601				Amou	nt of	Each	Disburse	ement	this P	eriod
Purpose of Disbursement Check sent to Mr. Kevin Robertson					011		L.		-		200	0.00	
Candidate Name Lynn Jenkins					atego Type	,							
Office Sought: X House Senate President		ement For: Primary Other (spe	2010 General				Check Rober	k sen rtson	t to I	Vr. Kev	in		
State: KS District: 02													
Full Name (Last, First, Middle Initial Re-Elect Mcgovern Committee							Date of	of Dis	burse		201		
Mailing Address PO Box 604	05						0 ^M 6	M /	^D 0	9 /	ž	0 ŏ 9	Y
City Worcester		State MA	Zip Code 01606				Amou	nt of	Each	Disburse	ement	this P	eriod
Purpose of Disbursement Check sent to Dr. Art Eddy				Г	011		L.		-		150	0.00	
Candidate Name Rep. James P. McGovern					atego Type								
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	_	NUMBER: PAGE 17 / 42
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check on 21b 27	ly one) 22 X 23 24 25 26 28a 28b 28c 29 30b
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or for commercial purposes, other than using the name	and address of any political	committee to s	olicit contributions from such committee
NAME OF COMMITTEE (In Full)	n Committee		
American Dental Association Political Actio	n Committee		
Full Name (Last, First, Middle Initial)			Transaction ID: 7923202
Comm. To Re-Elect Nydia Velazquez			Date of Disbursement
Mailing Address 315 Inspiration Lane			$ \begin{array}{c c} & \begin{array}{c c} & \begin{array}{c c} & \begin{array}{c} & \\ & \\ & \end{array} \end{array} $
	State Zip Code		Amount of Each Disbursement this Period
Gaithersburg Purpose of Disbursement	MD 20878		4000.00
Check sent to Dr. Lauro Medrano		011	100000
Candidate Name		Category/	
Nydia Velazquez		Туре	
President	nent For: 2010 Primary General Other (specify)		Check sent to Dr. Lauro Medrano
State: NY District: 12			
Full Name (Last, First, Middle Initial) Braley for Congress			Transaction ID: 7923207 Date of Disbursement
Mailing Address PO Box 390			06 / 09 / 2009
•	State Zip Code A 50704		Amount of Each Disbursement this Period
Purpose of Disbursement Check sent to Campaign for Physicians Breakfast 5		011	1500.00
Candidate Name Rep. Bruce Braley	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Category/ Type	
Office Sought: X House Senate President State: IA District: 01	nent For: 2010 Primary General Other (specify) ▼		Check sent to Campaign for Physicians Breakfast 5/06- /09
Full Name (Last, First, Middle Initial)			Transaction ID: 7923208
Mike Thompson For Congress			Date of Disbursement
Mailing Address 5429 Madison Avenue			$\begin{array}{c c} \begin{array}{c c} \begin{array}{c c} \\ \end{array} & \begin{array}{c cc \\ \end{array} & \begin{array}{$
•	State Zip Code		Amount of Each Disbursement this Period
Sacramento (Purpose of Disbursement	CA 95841		1000.00
Check sent to Dr. Jim Wood for event 6/20/09		011	
Candidate Name Mr. C Michael Thompson		Category/ Type	
	nent For: 2010 Primary General Other (specify) ▼		Check sent to Dr. Jim Wood for event 6/20/09
SUBTOTAL of Disbursements This Page (optional)		>	6500.00
TOTAL This Period (last page this line number only) .			

Any Information copied from such Reports and Statements may not be solid or used by any person for the purpose of soliciting contributions from such committee to solicit contributions from such committee for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee for	CHEDULE B (FEC FOIIII	✓ Use separa	ate schedule(s)		E NUMBER: PAGE 18/42
NAME OF COMMITTEE (In Full) NAME OF COMMITTEE (In Full) NAME OF COMMITTEE (In Full) Name (Last, First, Middle Initial) Mikulski For Senate Mailing Address 1629 Thames Street Suite 400 City State Zip Code MD 21231 Purpose of Disbursement Otheck sent to Campaign with permission from state for event 4/22/09 Candidate Name Barbara Mikulski Office Sought: House Other (specify) For ID Name (Last, First, Middle Initial) Office Sought: President State: MD District: Mailing Address P.O. Box 270 City State WI 54936 Purpose of Disbursement Other (specify) For ID Name (Last, First, Middle Initial) City Senate President State: WI District: Other (specify) For ID Name (Last, First, Middle Initial) City Senate President State: WI District: Other (specify) For ID Name (Last, First, Middle Initial) City State: WI District: Other (specify) Office Sought: A House President State: WI District: Other (specify) Final Name (Last, First, Middle Initial) City Senate President State: WI District: Other (specify) Final Name (Last, First, Middle Initial) City State: WI District: Other (specify) Check sent to Dr. Mark Huberty for event 4/22/09 Check sent to Dr. Mark Huberty for event 6/27/09 Candidate Name President State: WI District: Other (specify) City State: WI District: Other (specify) City State Ny 10301 Purpose of Disbursement City State Ny 10301 Purpose of Disbursement Check sent to Dr. Mark Huberty for event 6/27/09 Check sent to Dr. Mark Huberty for event 6/27/09 Check sent to Dr. Mark Huberty for event 6/27/09 Check sent to Dr. Mark Huberty for event 6/27/09 Check sent to Dr. Mark Huberty for event 6/27/09 Check sent to Dr. Steve Gounardes Candidate Name Rep. Thomas (Disbursement For: 2010 Check sent to Dr. Steve Gounardes Candidate Name President Ny 10301 Purpose of Disbursement Other (specify) Check sent to Dr. Steve Gounardes Check sent to Dr. Steve Gounardes Candidate Name President Ny 10301 Purpose of Disbursement Other (specify) Check sent to Dr. Steve Gounardes		Detailed Su	ımmary Page	21b 27	22 X 23 24 25 28a 28b 28c 29
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Full Name (Last, First, Middle Initial)			T .: ID 700040
Kildee For Congress			Transaction ID: 7923212 Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
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City Flint	State Zip Code MI 48501	_	Amount of Each Disbursement this Period
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Candidate Name Dale Kildee		Category/ Type	
Senate President	ursement For: 2010 X Primary General Other (specify)	•	Check sent to Kris Nichol- off
State: MI District: 05 Full Name (Last, First, Middle Initial)			Transaction ID: 7000010
Friends Of Blanche Lincoln			Transaction ID: 7923213 Date of Disbursement
Mailing Address PO Box 3197			$\begin{array}{c c} \begin{array}{c c} M & M \\ \hline \end{array} & \begin{array}{c c} D & D \\ \hline \end{array} & \begin{array}{c c} D & D \\ \hline \end{array} & \begin{array}{c c} Y & Y & Y & Y & Y & Y & Y & Y & Y & Y $
City Little Rock	State Zip Code AR 72203		Amount of Each Disbursement this Period
Purpose of Disbursement Check sent to Dr. Gene Jines		011	4000.00
Candidate Name Sen. Blanche Lambert Lincoln		Category/ Type	
Office Sought: House X Senate President State: AR District:	ursement For: 2010 X Primary General Other (specify)		Check sent to Dr. Gene Jines
Full Name (Last, First, Middle Initial) Duncan D. Hunter for Congress			Transaction ID: 7923214 Date of Disbursement
Mailing Address PO Box 3917			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City La Mesa	State Zip Code CA 91944		Amount of Each Disbursement this Peri
Purpose of Disbursement Check sent to Dr. Doug Cassat		011	2000.00
Candidate Name Rep. Duncan D. Hunter		Category/ Type	
Senate President	ursement For: 2010 X Primary General Other (specify)	•	Check sent to Dr. Doug Cassat
State: CA District: 52			
	nal)		8500.00

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American Dental Association Political A	ction Committee	
Full Name (Last, First, Middle Initial) 2009 Senator's Classic Committee		Transaction ID: 7925269 Date of Disbursement
Mailing Address 228 S. Washington St Suite 115		06 7 11 7 2009
City Alexandria	State Zip Code VA 22314	Amount of Each Disbursement this Peri
Purpose of Disbursement Check delivered by Michael Graham and Dr. Re Candidate Name		20 09
		egory/ ype
Senate President	Primary General Other (specify) ▼	Check delivered by Michael Graham and Dr. Roger Trif- tshauser at event June 12- 14, 2009
State: District: Full Name (Last, First, Middle Initial) Judy Chu For Congress		Transaction ID: 7925270 Date of Disbursement
Mailing Address 777 S Figueroa Street	Suite 4050	0 6 M / D 1 1 Y 2 0 0 9 Y
City Los Angeles	State Zip Code CA 90017	Amount of Each Disbursement this Peri
Purpose of Disbursement Check sent to Dr. Don Hugh		5000.00
Candidate Name Judy Chu	Ty	egory/ ype
Office Sought: X House Senate President State: CA District: 32	rsement For: 2009 Primary X General Other (specify)	Check sent to Dr. Don Hugh
Full Name (Last, First, Middle Initial) Pallone For Congress		Transaction ID: 7925271 Date of Disbursement
Mailing Address PO Box 3176		066 / 011 / 42009
City Long Branch	State Zip Code NJ 07740	Amount of Each Disbursement this Peri
Purpose of Disbursement Check sent to Jim Schulz Candidate Name		5000.00
Rep. Frank Pallone, Jr.		egory/ ype
Senate President	X Primary General Other (specify) ▼	Check sent to Jim Schulz
State: NJ District: 06		
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<u>Г</u> А.	Full Name (Last, First, Middle Initial) Pallone For Congress					ion ID: 7			
	Mailing Address PO Box 3176				0 6 M	1 1 1	/ Y 2	0 0 9	Y
	City Long Branch	State Zip Code NJ 07740			Amount o	f Each Dis			
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	City Livonia	State Zip Code MI 48153			Amount o	f Each Dis			
	Purpose of Disbursement Check sent to Kris Nicholoff Candidate Name		01 Cate				10	00.00	
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		Primary General Other (specify) ▼			Check se	ent to Kris	s inicnoi-		
C.	Full Name (Last, First, Middle Initial) Friends Of Jim Clyburn				Date of D	ion ID: 7	ent		
	Mailing Address PO Box 12567				06	16	/ v ž	0 Ď 9	Y
	City Columbia	State Zip Code SC 29211			Amount o	f Each Dis			
	Purpose of Disbursement Check sent to Campaign for event hosted by Jenr Candidate Name	nifer Fisher 6/15/09	01		L		25	00.00	
	Rep. James E. Clyburn		Cate Ty						
	Senate X President	ement For: 2010 Primary General Other (specify)			Check se event ho Fisher 6/	ent to Car sted by J 15/09	mpaign f ennifer	or	
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NAME OF COMMITTEE (In Full) American Dental Association Political Act	,,		
Full Name (Last, First, Middle Initial)			Transaction ID: 7941726
Friends Of Phil Hare			Date of Disbursement
Mailing Address 313 17th Street P.O. Box 4183			06 16 2009
City Rock Island	State Zip Code IL 61202		Amount of Each Disbursement this Period
Purpose of Disbursement Check sent to Campaign for event 5/19/09ok'd	by IL Dental	011	2500.00
Candidate Name Rep. Phil Hare		Category/ Type	
Senate 2	ement For: 2010 Primary General Other (specify)		Check sent to Campaign for event 5/19/09ok'd by IL Dental
State: IL District: 17			
Full Name (Last, First, Middle Initial) Doyle for Congress			Transaction ID: 7941727 Date of Disbursement
Mailing Address 2227 Hampton Street			$\begin{bmatrix} \begin{smallmatrix} M \\ O & G \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D \\ D & I & G \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y \\ D & I & G \end{smallmatrix} \end{bmatrix} $
City Pittsburgh	State Zip Code PA 15218		Amount of Each Disbursement this Period
Purpose of Disbursement Check sent to Dr. Edmund Effort for event 6/24/0	9	011	2500.00
Candidate Name Michael Doyle		Category/ Type	
	ement For: 2010 Primary General Other (specify)	.,,,,,	Check sent to Dr. Edmund Effort for event 6/24/09
Full Name (Last, First, Middle Initial) Rob Wittman for Congress			Transaction ID: 7941728 Date of Disbursement
Mailing Address 14877 Kings Highway PO Box 999			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & G \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & G \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ Z & O & O & Y \end{bmatrix} $
City Montross	State Zip Code VA 22520		Amount of Each Disbursement this Period
Purpose of Disbursement Check sent to Dr. Scott Berman		011	1500.00
Candidate Name Rob Wittman		Category/ Type	
	ement For: 2010 (Primary General Other (specify)		Check sent to Dr. Scott Berman
State: VA District: 01	- (-1:)/ V		
			6500.00

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`	NAME OF COM American Den	MITTEE (In Full) tal Association Polit	tical Action	n Comm	ittee									
	Full Name (Last, Massa For Co	First, Middle Initial)									ID: 794	1729		
i	Mailing Address	60 East Market	Street Suit	te 244					0 ^M 6	M /	16	Y	Ý 0 Ŏ 9	9 ^Y
	City Corning			tate NY	Zip Code 14830				Amou	int of Ea	ich Disbu		-	
	Purpose of Disbu	ırsement ımpaign per Dr. Mark F	eldman			Г	011		<u> </u>	-		15	500.00)
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	Office Sought:	X House Senate President		nent For: Primary Other (sp	2010 General ecify) ▼				Chec Dr. M	k sent ark Fe	to Camı Idman	oaign	oer	
ı	,	District: 29 First, Middle Initial)							Trans	action	ID : 794	1730		
	Minnick For Co	ongress								of Disbu	rsement	Y	γ · γ ·	Υ
Ī	Mailing Address	8150 W Emeral	d Street S	uite 170					0 ^M 6		16		ž o ŏ s	9
	City Boise			tate D	Zip Code 83704				Amou	int of Ea	ch Disbu	rsemei	nt this I	Peri
	Purpose of Disbu	rsement . Quinn Dufurrena for e	event 6/20/0	9		Г	011		L.			20	00.00	Ò
	Candidate Name Rep. Walter M	innick					atego Type	•						
	Office Sought: State: ID	X House Senate President District: 01		nent For: Primary Other (sp	2010 General ecify)				Chec Dufur 09	k sent rena fo	to Dr. Q or event	uinn 6/20/-		
	Full Name (Last, Kurt Schrader	First, Middle Initial) For Congress									ID: 794 Irsement	1731		
Ī	Mailing Address	2525 N Baker D	r						0 ^M 6	M /	16	Y	ž o ŏ s	9 ^Y
	City Canby			tate DR	Zip Code 97013				Amou	ınt of Ea	ch Disbu			
(ırsement ımpaign per Mr. Bill Zep	ор				011					20	00.00)
	Candidate Name Rep. Kurt Sch	ader					atego Type							
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;	State: OR	District: 05												
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L	Full Name (Last, First, Middle Initial)				Transa	ction ID:	79617	10	
	Nelson for U.S. Senate				Date of	Disburser		žoŏs	Y
	Mailing Address PO Box 8666				0 6				
	City Omaha	State Zip Code NE 68108			Amount	of Each [Disburse	ment this I	-
	Purpose of Disbursement Check sent to Dr. Ed Vigna for event 6/3/09 Candidate Name			011				2500.00	
	Ben Nelson	sement For: 2010		ategory/ Type					
		C Primary Gen Other (specify) ▼			Check for ever	sent to D nt 6/3/09	r. Ed V	igna	
	Full Name (Last, First, Middle Initial)					ction ID:		57	
	Majority Committee PAC Mailing Address P.O. BOX 10134				Date of 0 6	Disburser 1	nent 7	ž 0 0 9) ^Y
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	Senate President State: District: Full Name (Last, First, Middle Initial) Committee to Reelect Ed Towns Mailing Address 2232 Rayburn House O City Washington Purpose of Disbursement	Primary Gen Other (specify) ▼ ffice Building State Zip Code	Ca	011 ategory/	Transa Date of 0 6	ction ID: Disburser	79858 ment	98 ^Y 0 0 9 ment this I	Period
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NAME OF COMMITTEE (In Full) American Dental Association Political A	ction Committee		
Full Name (Last, First, Middle Initial) Friends Of Carolyn Mccarthy			Transaction ID: 7987592 Date of Disbursement
Mailing Address 151 Linden Road			06 18 7 2009
City Mineola	State Zip Code NY 11501		Amount of Each Disbursement this Perio
Purpose of Disbursement Check delivered by Kathleen Ford		011	1000.00
Candidate Name Rep. Carolyn McCarthy		Category/ Type	
Senate President	rsement For: 2010 X Primary General Other (specify) ▼		Check delivered by Kathle- en Ford
State: NY District: 04 Full Name (Last, First, Middle Initial)			Transaction ID: 7987593
Tim Murphy For Congress			Date of Disbursement
Mailing Address PO Box 24551			06 18 7 2009
City Pttsburgh	State Zip Code PA 15234		Amount of Each Disbursement this Perio
Purpose of Disbursement Check sent to Dr. Jay Wells		011	5000.00
Candidate Name Rep. Tim F. Murphy		Category/ Type	
Office Sought: X House Senate President State: PA District: 18	rrsement For: 2010 X Primary General Other (specify) ▼		Check sent to Dr. Jay Wells
Full Name (Last, First, Middle Initial) Leadership for America's Future			Transaction ID: 7987594 Date of Disbursement
Mailing Address 228 S. Washington S Suite 115			06 18 7 2009
City Alexandria	State Zip Code VA 22314		Amount of Each Disbursement this Perio
Purpose of Disbursement Check delivered by Kathleen Ford		011	2500.00
Candidate Name Leadership for America's Future		Category/ Type	
Office Sought: Senate President State: Disb	orsement For: Primary General Other (specify) ▼		Check delivered by Kathle- en Ford

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for each category of the Detailed Summary Page	
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	
NAME OF COMMITTEE (In Full) American Dental Association Political Action Committee	,
American Dental Association Political Action Committee	
Full Name (Last, First, Middle Initial) Donald A. Manzullo For Congress Mailing Address PO Box 7783 Transaction ID: 7987601 Date of Disbursement M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	Y
Mailing Address PO Box 7783	9
City State Zip Code Amount of Each Disbursement this Rockford IL 61126	Period
Purpose of Disbursement Check sent to Dr. Perry Tuneberg On Higher Name On The Company of the Management of the Company of t	00
Candidate Name Rep. Donald A. Manzullo Category/ Type	
Office Sought: X House Senate President Disbursement For: 2010 X Primary General Other (specify) Other (specify) Tuneberg	
State: IL District: 16 Full Name (Last, First, Middle Initial) Transaction ID: 7987602	
Friends Of Bill Posey Date of Disbursement	
Mailing Address 1824 South Fiske Boulevard	9
City State Zip Code Amount of Each Disbursement this Rockledge FL 32955	Period
Purpose of Disbursement Check sent to Dr. Jerry Bird 2000.0	00
Candidate Name Mr. Bill Posey Category/ Type	
Office Sought: X House Senate President Disbursement For: 2010 X Primary General Other (specify) ▼ Check sent to Dr. Jerry Bird	
State: FL District: 15 Full Name (Last, First, Middle Initial) Transaction ID: 7987603	
Marcia Fudge For Congress Date of Disbursement	
Mailing Address 3729 Silsby Rd	9 ^Y
City State Zip Code Amount of Each Disbursement this	Period
University Heights OH 44118 Purpose of Disbursement 2500.0	00
University Heights OH 44118	00
University Heights OH 44118 Purpose of Disbursement Check sent to Dr. Roderick Adams Candidate Name University Heights OH 44118 2500.0	00
University Heights Purpose of Disbursement Check sent to Dr. Roderick Adams Candidate Name Marcia Fudge Office Sought: X House Senate President Disbursement For: Z 2010 X Primary General Other (specify) Check sent to Dr. Roderick Adams Check sent to Dr. Roderick Adams	

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NAME OF COMMITTEE (In Full)		oo or arry pormour		_			1001111		10110 11	-					
American Dental Association Political Action	on Commi	ttee													
Full Name (Last, First, Middle Initial) Come Back PAC									i on ID isburs		79876 nent	04			
Mailing Address PO Box 2485							0 ^M 6	М	/ D	1 8	3 / Y	ž	o ŏ	9 ^Y	
City Springfield	State VA	Zip Code 22152					Amou	int o	f Each	n D	isburse	-	-		t
Purpose of Disbursement Check sent to Dr. Jay Wells				_)11		<u></u>					25	00.00)	
Candidate Name Come Back PAC					egory/ ype										
Senate President	ement For: Primary Other (spe	General cify) ▼					Checl Is	k se	ent to	Dı	r. Jay \	Vel	-		
State: District: Full Name (Last, First, Middle Initial)							Trans	acti	ion ID):	79876	06			
Andre Carson For Congress								of D	isburs			Y	Y	Υ	
Mailing Address One North Capitol Street	#211						0 6		L	1 8	3	2	o ŏ s	9	
•	State IN	Zip Code 46204					Amou	int o	f Each	ı D	isburse	men	t this	Period	t
Purpose of Disbursement Check sent to Mr. Ed Popcheff			Г	()11		L.					25	00.00)	
Candidate Name Andre Carson					egory/ ype										
Senate X President	ement For: Primary Other (spe	2010 General					Checl heff	k se	ent to	М	lr. Ed F	opo)-		
State: IN District: 07 Full Name (Last, First, Middle Initial)							T		ID		70000	71			
Bilirakis for Congress							Date	of D	isburs	em				V	
Mailing Address 610 S Boulevard							0 ^M 6	М	/ D	2 2		Ž	o ŏ	9	
	State FL	Zip Code 33606					Amou	int o	f Each	n D	isburse	men	t this	Period	z z
Purpose of Disbursement Check sent to Dr. Dan Bertoch				()11							25	00.00)	
Candidate Name Gus Bilirakis					egory/ ype										
Senate X President	ement For: Primary Other (spe	2010 General					Checl toch	K SE	ent to	Dı	r. Dan	Ber	-		
State: FL District: 09							_			_					_
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	/ Information copied from such Reports and Staten or commercial purposes, other than using the nam			
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) American Dental Association Political Acti			
	Full Name (Last, First, Middle Initial) Majority Initiative to Keep Electing Republi	cans		Transaction ID: 7989873 Date of Disbursement
	Mailing Address PO Box 65796			$ \begin{bmatrix} M & 6 & M \\ 0 & 6 & M \end{bmatrix} / \begin{bmatrix} D & 2 & D \\ 2 & D \end{bmatrix} / \begin{bmatrix} Y & Y & 0 & 0 & 9 & Y \\ Y & 2 & 0 & 0 & 9 & Y \end{bmatrix} $
	City Washington	State Zip Code DC 20035		Amount of Each Disbursement this Perio
	Purpose of Disbursement Check sent to Kris Nicholoff Candidate Name		011 Category/	5000.00
	Office Sought: House Senate President State: District:	ement For: Primary General Other (specify) \(\psi\)	Туре	Check sent to Kris Nichol- off
	Full Name (Last, First, Middle Initial) John Tierney For Congress			Transaction ID: 7990535 Date of Disbursement
	Mailing Address 49 Federal Street			$\begin{bmatrix} 0.6 & M & 7 & D & D & 7 & Y & Y & Y & Y & Y & Y & Y & Y & Y$
	City Salem	State Zip Code MA 01970		Amount of Each Disbursement this Perio
	Purpose of Disbursement Check sent to Dr. David Becker Candidate Name John Tierney		011 Category/ Type	2000.00
	Office Sought: X House Disburse	ement For: 2010 Primary General Other (specify)	Гуре	Check sent to Dr. David Becker
	Full Name (Last, First, Middle Initial) Chris Lee For Congress			Transaction ID: 7990536 Date of Disbursement
	Mailing Address PO Box 15395			$\begin{bmatrix} 0 & 0 & 0 & 0 \\ 0 & 0 & 0 & 0 \end{bmatrix} \begin{bmatrix} 0 & 0 & 0 & 0 \\ 0 & 0 & 0 & 0 \end{bmatrix} \begin{bmatrix} 0 & 0 & 0 & 0 \\ 0 & 0 & 0 & 0 \end{bmatrix}$
	City Rochester	State Zip Code NY 14615		Amount of Each Disbursement this Perio
	Purpose of Disbursement Check sent to Campaign per Dr. Roger Triftshaus	er	011	1000.00
	Candidate Name Rep. Christopher Lee		Category/ Type	
	Senate X President	ement For: 2010 Primary General Other (specify)		Check sent to Campaign per Dr. Roger Triftshauser
_	State: NY District: 26			8000.00

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American Dental Association Political Action	on Commit	ttee										
Full Name (Last, First, Middle Initial) Citizens For Tom Petri							ction ID Disburs	-		7		
Mailing Address P.O. Box 270						06	/ D	23	Y	žoŏ	9 ^Y	
,	State	Zip Code			А	moun	t of Each	n Disbi	ursem	ent this	Perio	od
Fond Du Lac Purpose of Disbursement	WI	54936			- [1000.0	0	
Check sent to Dr. Paul Gruber Candidate Name			01 Cate									
Rep. Thomas E. Petri			Тур	e e								
, <u>, , , , , , , , , , , , , , , , , , </u>	ement For: Primary Other (spec	2010 General cify) ▼				neck er	sent to	Dr. F	aul (Gr-		
Full Name (Last, First, Middle Initial)					Tı	ransa	ction ID	: 79	9053	8		
Blumenauer For Congress					D		Disburs		t v	V	· V	
Mailing Address 830 Ne Holladay Suite 10)5					06	/ D2	23	Y	žoŏ	9 ັ	
	State OR	Zip Code 97232			А	moun	t of Each	Disb	ursem	ent this	Perio	od
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Candidate Name Rep. Earl Blumenauer			Categ									
Senate X President	ement For: Primary Other (spec	2010 General cify)			Cł Br	neck ett H	sent to amilton	Cam I	paigr	n per		
State: OR District: 03 Full Name (Last, First, Middle Initial)					+_							
Blumenauer For Congress					D	ate of	ction ID Disburs	ement			Y	
Mailing Address 830 Ne Holladay Suite 10)5					М 6 ^М		23	L	žoŏ	9	
	State OR	Zip Code 97232			A	moun	t of Each	n Disbi	ursem	ent this	Perio	od .
Purpose of Disbursement Check sent to Campaign per Brett Hamilton		3,202	01	1	[1000.0	0	
Candidate Name Rep. Earl Blumenauer			Categ	jory/								
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IT	EMIZED DISBURSEMENTS	Detailed Summary Page 2	7 28a 28b 28c 29
	ny Information copied from such Reports and State for commercial purposes, other than using the nan NAME OF COMMITTEE (In Full) American Dental Association Political Act	e and address of any political committee	
L	Full Name (Last, First, Middle Initial) Peters For Congress		Transaction ID: 7990544 Date of Disbursement M 6 D 2 3 Z 2 0 0 9
	Mailing Address PO Box 226	7.0	
	City Bloomfield Hills	State Zip Code MI 48303	Amount of Each Disbursement this Period
	Purpose of Disbursement Check sent to Campaign per Kris Nicholoff Candidate Name Mr. Gary Peters	011 Category Type	1000.00
	Office Sought: X House Disburs	ement For: 2010 Primary General Other (specify)	Check sent to Campaign per Kris Nicholoff
	Full Name (Last, First, Middle Initial) Texans For Senator John Cornyn Inc		Transaction ID: 7990545 Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 6850 Austin Centre Blvd Suite 180		
	City Austin	State Zip Code TX 78731	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement Check sent to Dr. Warren Branch Candidate Name Sen. John Cornyn	011 Category Type	
	Office Sought: House Disburs	ement For: 2010 Primary General Other (specify)	Check sent to Dr. Warren Branch
	Full Name (Last, First, Middle Initial) Scalise For Congress		Transaction ID: 7990546 Date of Disbursement
	Mailing Address 3100 Ridgelake Suite 309		0 6 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
	City Metairie	State Zip Code LA 70002	Amount of Each Disbursement this Period
	Purpose of Disbursement Check sent to Campaign for event 4/22/09 attended	ed by Kathleen Ford 011	1000.00
	Candidate Name Steve Scalise	Category Type	y/
		ement For: 2010 Primary General	Check sent to Campaign for event 4/22/09 attended by Kathleen Ford
	President State: LA District: 01	Other (specify) ▼	Talliosii i ora

5	CHEDULE B (FEC Form	y use	separate schedule		-	E NUMBER: PAGE 32 / 42
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						n for the purpose of soliciting contributions solicit contributions from such committee
\ \	NAME OF COMMITTEE (In Full)	ing the name and a	duress of arry poin	icai con	iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	Solicit Contributions from Such Committee
\rangle	American Dental Association Po	litical Action Co	mmittee			
	Full Name (Last, First, Middle Initial) Committee To Elect Alan Grays	on				Transaction ID: 7990547 Date of Disbursement
	Mailing Address 8419 Oak Parl	k Road				$\begin{array}{c c} & \begin{array}{ccccccccccccccccccccccccccccccccccc$
	City Orlando	State FL	Zip Code 32819			Amount of Each Disbursement this Pe
	Purpose of Disbursement Check sent to Dr. Anthony Wong				011	2500.00
	Candidate Name Rep. Alan Grayson				ategory/ Type	
	Office Sought: X House Senate President	Disbursement F X Prima Other		ral		Check sent to Dr. Anthony Wong
	State: FL District: 08 Full Name (Last, First, Middle Initial)					
	Lee Terry For Congress					Transaction ID: 7990548 Date of Disbursement
	Mailing Address P.O. Box 5400	98				$\begin{array}{c c} & \begin{array}{ccccccccccccccccccccccccccccccccccc$
	City Omaha	State NE	Zip Code 68154			Amount of Each Disbursement this Pe
	Purpose of Disbursement Check sent to Campaign per Dr. Ed V	igna			011	2500.00
	Candidate Name Rep. Lee Terry	.ga			ategory/ Type	
	Office Sought: X House Senate President	Disbursement F X Prima Other		ral		Check sent to Campaign per Dr. Ed Vigna
	State: NE District: 02 Full Name (Last, First, Middle Initial)					- u - 7000550
	Russ Carnahan for Congress					Transaction ID: 7990552 Date of Disbursement
	Mailing Address 7370 Manches Ste 20					06 M / 23 / Y 2009
	City St Louis	State MO	Zip Code 63143			Amount of Each Disbursement this Pe
	Purpose of Disbursement Check sent to Dr. Bob Butler				011	5000.00
	Candidate Name Russ Carnahan				ategory/ Type	
	Office Sought: X House Senate President	Disbursement F X Prima Other		al		Check sent to Dr. Bob But- ler
	State: MO District: 03					

IT	CHEDULE B (FEC Form 3	² Use sepa	arate schedule(s)	-	NUMBER: PAGE 33 / 42
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	y Information copied from such Reports at or commercial purposes, other than using			d by any person t	for the purpose of soliciting contributions
\	NAME OF COMMITTEE (In Full)	The name and address	55 Of arry political	Committee to so	Total Committee
\rangle	American Dental Association Politi	cal Action Commi	ittee		
	Full Name (Last, First, Middle Initial) Martin Heinrich For Congress				Transaction ID: 8006087 Date of Disbursement
	Mailing Address 2118 Central Ave	enue Se			$\begin{bmatrix} \begin{smallmatrix} M & G & M \\ O & G & M \end{smallmatrix} & \begin{smallmatrix} D & D & D \\ D & C & G & M \end{smallmatrix} & \begin{smallmatrix} C & Y & Y & Y & Y & Y \\ D & C & G & G & G & G \end{bmatrix}$
	City Albuquerque	State NM	Zip Code 87106		Amount of Each Disbursement this Period
	Purpose of Disbursement Check sent to Mark Moores			011	1500.00
	Candidate Name Mr. Martin Heinrich			Category/ Type	
	Office Sought: X House Senate President	Disbursement For: X Primary Other (spe	2010 General		Check sent to Mark Moores
	State: NM District: 01				
	Full Name (Last, First, Middle Initial) Quigley For Congress				Transaction ID: 8006088 Date of Disbursement
	Mailing Address 1244 West Eddy	St			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & G \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & G \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ D & D & G \end{smallmatrix} \end{bmatrix} $
	City Chicago	State IL	Zip Code 60657		Amount of Each Disbursement this Period
	Purpose of Disbursement Check sent to Dr. Mary Hayes			011	2500.00
	Candidate Name Mike Quigley			Category/ Type	
	Office Sought: X House Senate President	Disbursement For: X Primary Other (spe	2010 General		Check sent to Dr. Mary Hayes
	State: IL District: 05				
	Full Name (Last, First, Middle Initial) Adler For Congress				Transaction ID: 8006094 Date of Disbursement
	Full Name (Last, First, Middle Initial)				
	Full Name (Last, First, Middle Initial) Adler For Congress	State NJ	Zip Code 08054		Date of Disbursement O 6
	Full Name (Last, First, Middle Initial) Adler For Congress Mailing Address PO Box 1024 City Mount Laurel Purpose of Disbursement Check sent to Jim Schulz			011	Date of Disbursement O 6
	Full Name (Last, First, Middle Initial) Adler For Congress Mailing Address PO Box 1024 City Mount Laurel Purpose of Disbursement Check sent to Jim Schulz Candidate Name Mr. John Adler	NJ	08054	011 Category/ Type	Date of Disbursement O 6
	Full Name (Last, First, Middle Initial) Adler For Congress Mailing Address PO Box 1024 City Mount Laurel Purpose of Disbursement Check sent to Jim Schulz Candidate Name		2010 General	Category/	Date of Disbursement M 6 M / 2 4 / Y Y Y O 9 Amount of Each Disbursement this Period

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	y Information copied from such Reports and Stater for commercial purposes, other than using the nam NAME OF COMMITTEE (In Full)	e and address of any politica										5
/	American Dental Association Political Acti	on Committee										
	Full Name (Last, First, Middle Initial) Boyd For Congress Mailing Address P.O. Box 15703						of D	isburs			ž o ŏ s) Y
	City Tallahassee	State Zip Code FL 32317				Amou	int o	f Each	Disbu	-	nt this F	-
	Purpose of Disbursement Check sent to Dr. Jay Walton Candidate Name Rep. Allen Boyd				jory/		•			2	000.00)
	Office Sought: X House Disburs	ement For: 2010 Primary General Other (specify)		Тур	ie .	Check ton	k se	ent to	Dr. Ja	ay Wa	al-	
	Full Name (Last, First, Middle Initial) Badger PAC					Date of		on ID:	ement		ž 0 ŏ 9	Y
	Mailing Address 1831 Bay Street, SE					0 6		2	2 4		2009)
	City Washington Purpose of Disbursement	State Zip Code DC 20003				Amou	int o	f Each	Disbu		nt this F	
	Check sent to Dr. Tim Durtsche Candidate Name Badger PAC			01 ateg	jory/			•		•		
	Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify) ▼				Check tsche	k se	ent to	Dr. Ti	im Du	ır-	
	Full Name (Last, First, Middle Initial) Frank Lucas For Congress Comm.					Date		on ID:	ement			V/
	Mailing Address PO Box 1726					0 ^M 6	IVI	/ L 2	24	Ľ.	ž 0 ŏ s)
	City Oklahoma City	State Zip Code OK 73101				Amou	int o	f Each	Disbu	irseme	nt this F	Perio
	Purpose of Disbursement Check sent to Dr. Kurt Gibson			01				•		1	000.00)
	Candidate Name Frank Lucas			ateg Typ	ory/ e							
		ement For: 2010 Primary General Other (specify)	•			Check bson	k se	ent to	Dr. K	urt Gi	-	
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IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page			21b 27	22 28a	X	23 28b	$\mathbf{\Box}$	24 28c		25 29	2 3
	y Information copied from such Reports and Stater for commercial purposes, other than using the nam NAME OF COMMITTEE (In Full) American Dental Association Political Acti	e and address of any politica											
V	American Dental Association Folitical Acti	on committee											
	Full Name (Last, First, Middle Initial) Walter Jones for Congress Committee Mailing Address PO Box 99667							sburs				0 ŏ 9	Y
	City Raleigh	State Zip Code NC 27624				Amou	int o	f Each	Disb	urser	nent	this P	eriod
	Purpose of Disbursement Check sent to Dr. Bert Warren Candidate Name	110 2/024	1 —	01°							100	00.00	
		ement For: 2010 Primary General Other (specify)		Тур	-	Check rren	k se	nt to	Dr. E	Bert \	Wa-		
	Full Name (Last, First, Middle Initial) Moving America Forward PAC Mailing Address 500 Red Sail Way							sburs				0 ŏ 9	Y
	City Satellite Beach Purpose of Disbursement	State Zip Code FL 32937				Amou	int o	f Each	ı Disb	urser		this P	eriod
	Check sent to Dr. Jay Walton Candidate Name Moving America Forward PAC		Ca	01 ateg Typ	ory/								
	Office Sought: House Disburs	ement For: Primary General Other (specify) ▼	•			Check ton	k se	nt to	Dr. J	Jay V	Val-		
	Full Name (Last, First, Middle Initial) Kosmas For Congress					Trans Date	of Di	sburs	emen				
	Mailing Address PO Box 1547					0 ^M 6	М		25	/ L	ž	0 ŏ 9	Y
	City New Smyrna Beach	State Zip Code FL 32170				Amou	int o	f Each	Disb	urser	ment	this P	eriod
	Purpose of Disbursement Check sent to Campaign			01	1		_				200	00.00	
	Candidate Name Rep. Suzanne Kosmas		Ca	- 1	ory/								
	X X	ement For: 2010 Primary General Other (specify)				Check	k se	nt to	Cam	ıpaig	jn		

	CHEDULE B (FEC FO EMIZED DISBURSEN	_	for each	parate schedule(s) category of the	FOR LINE (check only	NUMBER: PAGE 36 / 42 y one) 22 x 23 24 25
_				Summary Page	27	28a 28b 28c 29
						for the purpose of soliciting contributions licit contributions from such committee
\rangle	NAME OF COMMITTEE (In Ful American Dental Association		on Comm	ittee		
	Full Name (Last, First, Middle In Bachmann for Congress	itial)				Transaction ID: 8009008 Date of Disbursement
	Mailing Address PO Box 4	9756				$ \begin{bmatrix} M & M \\ 0 & 6 \end{bmatrix} \begin{bmatrix} D & 2 & 5 \end{bmatrix} \begin{bmatrix} Y & 2 & 0 & 0 & 9 \end{bmatrix} $
	City Blaine		State MN	Zip Code 55449		Amount of Each Disbursement this Period
	Purpose of Disbursement Check sent to Dr. Kathleen McC	ann			011	1500.00
	Candidate Name Michele Bachmann				Category/ Type	
	Office Sought: X House Senate Presiden	Х	ement For: Primary Other (sp	2010 General ecify)		Check sent to Dr. Kathleen McCann
	State: MN District: 06 Full Name (Last, First, Middle In	itial)				Transaction ID: 8009009
	Joe Wilson For Congress C	Committee				Date of Disbursement
	Mailing Address Post Office	e Box 2145				$\begin{bmatrix} \begin{smallmatrix} M & G & M \\ O & G & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & D \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ D & O & O & Y \end{bmatrix} $
	City West Columbia		State SC	Zip Code 29171		Amount of Each Disbursement this Perio
	Purpose of Disbursement Check sent to Campaign				011	1000.00
	Candidate Name Rep. Joe Wilson				Category/ Type	
	Office Sought: X House Senate President State: SC District: 02	X	ement For: Primary Other (sp	2010 General ecify) ▼		Check sent to Campaign
_	Full Name (Last, First, Middle In Senate Conservatives Fund					Transaction ID: 8011217 Date of Disbursement
	Mailing Address 228 S Wa Suite 115	shington St.				$\begin{bmatrix} \begin{smallmatrix} M & G & M \\ O & G & M \end{smallmatrix} & \begin{bmatrix} \begin{smallmatrix} D & D \\ D & G & G \end{bmatrix} & \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ D & Q & Q & Q \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y & Y & Y \\ D & Q & Q & Q & Q \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y & Y & Y \\ Q & Q & Q & Q & Q \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y & Y & Y \\ Q & Q & Q & Q & Q \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y & Y & Y \\ Q & Q & Q & Q & Q \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y & Y \\ Q & Q & Q & Q & Q \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y & Y \\ Q & Q & Q & Q \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y & Y \\ Q & Q & Q & Q \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y & Y \\ Q & Q & Q & Q \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y & Y \\ Q & Q & Q & Q \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ Q & Q & Q & Q \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ Q & Q & Q \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ Q & Q & Q \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ Q & Q & Q \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ Q & Q & Q \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ Q & Q \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ Q & Q \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ Q & Q \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ Q & Y \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ Q & Y \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ Q & Y \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ Q & Y \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ Y & Y \end{bmatrix} & \mathbf{Y} & Y \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ Y & Y \end{bmatrix} & \mathbf{Y} & Y \end{bmatrix} & \mathbf{Y} & Y \end{bmatrix} & \mathbf{Y} & Y & Y \end{bmatrix} & \mathbf{Y} & Y & Y & Y \end{bmatrix} & \mathbf{Y} & Y & Y \end{bmatrix} & \mathbf{Y} & Y & Y & Y \end{bmatrix} & \mathbf{Y} & Y & Y & Y \end{bmatrix} & \mathbf{Y} & Y & Y & Y \end{bmatrix} & \mathbf{Y} & Y & Y & Y \end{bmatrix} & \mathbf{Y} & Y & Y & Y \end{bmatrix} & \mathbf{Y} & Y & Y & Y & Y & Y \end{bmatrix} & \mathbf{Y} & Y & Y & Y & Y & Y & Y \end{bmatrix} & \mathbf{Y} & Y & Y & Y & Y & Y & Y & Y \end{pmatrix} & \mathbf{Y} & Y & Y & Y & Y & Y & Y & Y \end{pmatrix} \end{pmatrix} & \mathbf{Y} & Y & Y & Y & Y & Y & Y $
	City Alexandria		State VA	Zip Code 22314		Amount of Each Disbursement this Perio
	Purpose of Disbursement Check sent to PAC for event 5/2	0/09		-	011	2000.00
	Candidate Name Senate Conservatives Fund				Category/ Type	
	Office Sought: House Senate President		ement For: Primary Other (sp	General ecify)		Check sent to PAC for event 5/20/09
	State: District:					
						4500.00

IT		Use se	eparate schedule(s)	FOR LINE					
	EMIZED DISBURSEMEN	ITS for each	ch category of the ed Summary Page	(check onl)	y one) 22 X 23 24 25 282 282 29 3				
					for the purpose of soliciting contributions solicit contributions from such committee				
\	NAME OF COMMITTEE (In Full)	ing the name and add	1033 of arry politica		ment contributions from such committee				
\rangle	American Dental Association Po	litical Action Com	mittee						
	Full Name (Last, First, Middle Initial) Mccotter Congressional Committee				Transaction ID: 8011218 Date of Disbursement				
	Mailing Address P.O. Box 530788				$\begin{bmatrix} \begin{smallmatrix} M & G & M \\ O & G & M \end{smallmatrix} & \begin{smallmatrix} D & D & G \\ D & G & G & G \end{smallmatrix} & \begin{smallmatrix} Y & Y & Y & Y & Y \\ Q & O & O & G & G \end{bmatrix}$				
	City Livonia	State MI	Zip Code 48153		Amount of Each Disbursement this Period				
	Purpose of Disbursement Check sent to Kris Nicholoff			011	3000.00				
	Candidate Name Rep. Thaddeus G. McCotter			Category/ Type					
	Office Sought: X House Senate President	Disbursement For X Primary Other (s	: 2010 General pecify) ▼		Check sent to Kris Nichol- off				
_	State: MI District: 11								
	Full Name (Last, First, Middle Initial) Committee to Reelect Ed Towns				Transaction ID: 8011219 Date of Disbursement				
	Mailing Address 2232 Rayburn House Office Building				$ \begin{bmatrix} M & M \\ 0 & 6 \end{bmatrix} \begin{bmatrix} D & D & D \\ 0 & 2 & 6 \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y & Y & Y & Y & Y & Y & Y &$				
	City	State	Zip Code		Amount of Each Disbursement this Period				
	Washington	DC	20515						
	Purpose of Disbursement			011	3000.00				
				011 Category/ Type	3000.00				
	Purpose of Disbursement Check sent to Campaign, meeting with Candidate Name	Disbursement For	gust :2010	Category/	Check sent to Campaign, meeting with ATL will occur in August				
	Purpose of Disbursement Check sent to Campaign, meeting with Candidate Name Edolphus Towns Office Sought: X House Senate President State: NY District: 10	Disbursement For	gust : 2010 X General	Category/	Check sent to Campaign, meeting with ATL will occ-				
	Purpose of Disbursement Check sent to Campaign, meeting with Candidate Name Edolphus Towns Office Sought: X House Senate President	Disbursement For Primary Other (s	gust : 2010 X General	Category/	Check sent to Campaign, meeting with ATL will occur in August Transaction ID: 8011220 Date of Disbursement				
	Purpose of Disbursement Check sent to Campaign, meeting with Candidate Name Edolphus Towns Office Sought: X House Senate President State: NY District: 10 Full Name (Last, First, Middle Initial)	Disbursement For Primary Other (s	gust : 2010 X General	Category/	Check sent to Campaign, meeting with ATL will occur in August Transaction ID: 8011220				
	Purpose of Disbursement Check sent to Campaign, meeting with Candidate Name Edolphus Towns Office Sought: X House Senate President State: NY District: 10 Full Name (Last, First, Middle Initial) Mike Ross For Congress Comm Mailing Address PO Box 360 City Prescott	Disbursement For Primary Other (s	gust : 2010 X General	Category/	Check sent to Campaign, meeting with ATL will occur in August Transaction ID: 8011220 Date of Disbursement Moment				
	Purpose of Disbursement Check sent to Campaign, meeting with Candidate Name Edolphus Towns Office Sought: X House Senate President State: NY District: 10 Full Name (Last, First, Middle Initial) Mike Ross For Congress Comm Mailing Address PO Box 360 City Prescott Purpose of Disbursement Check sent to Campaign, meeting with	Disbursement For Primary Other (s	gust : 2010 X General specify) Zip Code 71857	Category/ Type	Check sent to Campaign, meeting with ATL will occur in August Transaction ID: 8011220 Date of Disbursement M M M D D D C Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
	Purpose of Disbursement Check sent to Campaign, meeting with Candidate Name Edolphus Towns Office Sought: X House Senate President State: NY District: 10 Full Name (Last, First, Middle Initial) Mike Ross For Congress Comm Mailing Address PO Box 360 City Prescott Purpose of Disbursement	Disbursement For Primary Other (s	gust : 2010 X General specify) Zip Code 71857	Category/ Type	Check sent to Campaign, meeting with ATL will occur in August Transaction ID: 8011220 Date of Disbursement Mod Mod Page 10 P				
	Purpose of Disbursement Check sent to Campaign, meeting with Candidate Name Edolphus Towns Office Sought: X House Senate President State: NY District: 10 Full Name (Last, First, Middle Initial) Mike Ross For Congress Comm Mailing Address PO Box 360 City Prescott Purpose of Disbursement Check sent to Campaign, meeting with Candidate Name Rep. Michael A. Ross Office Sought: X House Senate President	Disbursement For Other (some AR AR Disbursement For Primary Other for ATL will occur in Augusta Disbursement For Primary Primary	gust : 2010 X General specify) ▼ Zip Code 71857 gust : 2010	Category/ Type 011 Category/	Check sent to Campaign, meeting with ATL will occur in August Transaction ID: 8011220 Date of Disbursement Mod Mod Page 10 P				
	Purpose of Disbursement Check sent to Campaign, meeting with Candidate Name Edolphus Towns Office Sought: X House Senate President State: NY District: 10 Full Name (Last, First, Middle Initial) Mike Ross For Congress Comm Mailing Address PO Box 360 City Prescott Purpose of Disbursement Check sent to Campaign, meeting with Candidate Name Rep. Michael A. Ross Office Sought: X House Senate	Disbursement For Other (some AR AR Disbursement For Primary Other for ATL will occur in Augusta Disbursement For Primary Primary	gust : 2010 X General specify) ▼ Zip Code 71857 gust : 2010 X General	Category/ Type 011 Category/	Check sent to Campaign, meeting with ATL will occur in August Transaction ID: 8011220 Date of Disbursement M M M / D B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE						
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one) 22 X 23 28a 28b	24 25 26 28c 29 30b				
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam								
NAME OF COMMITTEE (In Full)	e and address of any political col	illillillee to son	cit contributions in	on such committee				
American Dental Association Political Activ	on Committee							
Full Name (Last, First, Middle Initial) Conaway For Congress			Transaction ID: Date of Disburse					
Mailing Address PO Box 51272			06 2	6 2009				
City Midland	State Zip Code TX 79710		Amount of Each	Disbursement this Period				
Purpose of Disbursement Check sent to Dr. Tommy Russell		011		2500.00				
Candidate Name Rep. Michael K. Conaway		Category/ Type						
	ment For: 2010 Primary General Other (specify)		Check sent to I Russell	Dr. Tommy				
Full Name (Last, First, Middle Initial) Scott Murphy For Congress	Full Name (Last, First, Middle Initial)							
Mailing Address 615 Glen Street			06 2	9 7 2009				
City Glens Falls	State Zip Code alls NY 12801			Amount of Each Disbursement this Period				
Purpose of Disbursement Check sent to Campaign		011	2000.00					
Candidate Name Rep. Scott Murphy		Category/ Type						
, <u>, , , , , , , , , , , , , , , , , , </u>	ment For: 2010 Primary General Other (specify)		Check sent to	Campaign				
Full Name (Last, First, Middle Initial) Adam Smith For Congress			Transaction ID: Date of Disburse					
Mailing Address PO Box 23626			06 4 2	9 7 2009				
City Federal Way	State Zip Code WA 98093		Amount of Each	Disbursement this Period				
Purpose of Disbursement Check sent to Dr. Doug Walsh for event 7/1/09	Check sent to Dr. Doug Walsh for event 7/1/09 011			5000.00				
Candidate Name Adam Smith		Category/ Type						
A THE	ment For: 2010 Primary General Other (specify)		Check sent to lish for event 7/	Dr. Doug Wa- 1/09				
SUBTOTAL of Disbursements This Page (optional)		<u> </u>		9500.00				
TOTAL This Period (last page this line number only)								

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IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22) 28a	23 28b	24 28c		25 29	26 30
	ny Information copied from such Reports and Stater for commercial purposes, other than using the name NAME OF COMMITTEE (In Full)	e and address of any political com							
V	American Dental Association Political Act	on Committee							
	Full Name (Last, First, Middle Initial) Citizens For Altmire Mailing Address PO Box 1776			Transac Date of I		ement		0 ŏ 9	Y
	City Freedom	State Zip Code PA 15042		Amount	of Each	Disburs	ement	this P	eriod
	Purpose of Disbursement Check sent to Campaign for event 6/3/09 Candidate Name	Ca	011 tegory/		-		150	00.00	
	X	ement For: 2010 Primary General Other (specify)	^Т уре	Check s event 6/	ent to (3/09	Campa	ign fo	or	
	Full Name (Last, First, Middle Initial) Griffith For Congress Mailing Address PO Box 2619			Transac Date of I	Disburse			0 ŏ 9	Y
	City Huntsville Purpose of Disbursement Check sent to Campaign for event 4/2/09	State Zip Code AL 35804		Amount	of Each	Disburs		this P	eriod
	Candidate Name R Parker Griffith	011 tegory/ Type							
		ement For: 2010 Primary General Other (specify)		Check sent to Campaign for event 4/2/09					
	Full Name (Last, First, Middle Initial) Graves For Congress				Transaction ID: 8011700 Date of Disbursement O 6 Y 2 9 Y 2 0 0 9				
	Mailing Address 2345 Grand Suite 2400								Y
	City Kansas City	State Zip Code MO 64108		Amount	of Each	Disburs	ement	this P	eriod
	Purpose of Disbursement Check sent to Aaron Washburn		011	1000.00				-	
	Candidate Name Rep. Samuel B. Graves, Jr.								
		ement For: 2010 Primary General Other (specify)		Check sent to Aaron Washb urn				ıb-	
Г	'						-	00.00	

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	y Information copied from such Reports and Staten for commercial purposes, other than using the nam							5
Ν	NAME OF COMMITTEE (In Full)							
V	American Dental Association Political Acti	on Committee						
	Full Name (Last, First, Middle Initial) Lincoln Diaz-Balart for Congress Cmte.				t ion ID: (ent	1	
	Mailing Address 2801 Ponce De Leon Blv Ste. 1000	06	29	/ Y	ž 0 ŏ 9) Y		
	City Coral Gables	State Zip Code FL 33134		Amount o	of Each Di	sbursem	ent this F	Period
	Purpose of Disbursement			L			1000.00)
	Check sent to Ms. Amber Burton Candidate Name Lincoln Diaz-Balart	Ca	011 Itegory/					
	Office Sought: X House Disburse	ment For: 2010 Primary General Other (specify)	Гуре	Check se Burton	ent to Ms	s. Ambe	er	
_	Full Name (Last, First, Middle Initial)		Tuesees	ian ID.	001170	<u> </u>		
	Kagen 4 Congress			Transaction ID: 8011702 Date of Disbursement				
	Mailing Address 100 West Lawrence St				$\begin{bmatrix} 0 & 6 & M \\ 0 & 6 & M \end{bmatrix} / \begin{bmatrix} D & 2 & 9 \\ 2 & 9 & 9 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y & Y & Y & Y & Y & Y & Y$			
	City Appleton	State Zip Code WI 54911		Amount	of Each Di			
	Purpose of Disbursement Check sent to Campaign per Mara Brooks at WI Dental			L			1500.00	,
	Candidate Name Steven Kagen	011 itegory/ Γype						
	9 17	ment For: 2010 Primary General Other (specify)		Check sent to Campaign per Mara Brooks at WI Dental				
	Full Name (Last, First, Middle Initial) Mikulski For Senate			Transaction ID: 8014814 Date of Disbursement				
	Mailing Address 1629 Thames Street Suite 400		06	[′] 30	/ Y	ž 0 ŏ 9) Y	
	City State Zip Code Baltimore MD 21231			Amount o	of Each Di	sbursem	ent this F	Period
	Purpose of Disbursement Check sent to Campaign		011	1000.00)	
	Candidate Name Barbara Mikulski		tegory/ Γype	Check sent to Campaign				
	X Senate X President	ment For: 2010 Primary General Other (specify)						
Г	State: MD District:						• • •	
							500.00	

,	for ear Details	•	(check only 21b 27 27 1by any person f	E NUMBER: PAGE 41 / 42 ly one) 22
NAME OF COMMITTEE (In American Dental Associa	Full) ation Political Action Com	mittee		
Full Name (Last, First, Middle Fund for the Majority Mailing Address 1212 S	VICTORY BLVD			Transaction ID: 8014815 Date of Disbursement
City Burbank Purpose of Disbursement Check sent to PAC per Pam Candidate Name	State CA Woudstra	Zip Code 91502	011 Category/ Type	Amount of Each Disbursement this Period 1000.00
Office Sought: House Senat President: District:	e Primary			Check sent to PAC per Pam Woudstra

SUBTOTAL of Disbursements This Page (optional)	•	1000.00
TOTAL This Period (last page this line number only)		209500.00

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	CHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check onl	NUMBER:	PAGE 42/42				
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b 27	22 23 28b 28b	24 28c	25 29	26 30b		
	y Information copied from such Reports and Staten for commercial purposes, other than using the nam								
$\overline{\ \ }$	NAME OF COMMITTEE (In Full)	on Committee							
<u>/</u>	American Dental Association Political Action	on Committee							
	Full Name (Last, First, Middle Initial)			Transaction ID: 8	041838				
	Citibank 1			Date of Disburseme	nt				
	Mailing Address 1500 Vermont Ave Nw			06 / 30	/ Y Y 2	009			
	City Washington	State Zip Code DC 20005		Amount of Each Dis	bursemen	t this Pe	riod		
	Purpose of Disbursement bank fees		001		4	22.33			
	Candidate Name		Category/ Type						
	Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼		bank fees					
	State: District:	· · · · · · · · · · · · · · · · · · ·							

SUBTOTAL of Disbursements This Page (optional)	•	422.33
TOTAL This Period (last page this line number only)	•	422.33