

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
American Dental Political Action Cmte.

ADDRESS (number and street) 1111 14th Street NW
Suite 1100
Check if different than previously reported. (ACC) Washington DC 20005

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIP CODE

C00000729 3. IS THIS REPORT X NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
Feb 20 (M2) X May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (M13)
April 15 Quarterly Report(Q1)
July 15 Quarterly Report(Q2)
October 15 Quarterly Report(Q3)
January 31 Quarterly Report(YE)
Election on in the State of
July 31 Mid-Year Report(Non-election Year Only) (MY)
(c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R)
Convention (12C) Special (12S)
(d) 30-Day Post -Election Report for the: General (30G) Runoff (30R) Special (30S)
Election on in the State of
Termination Report (TER) in the State of

5. Covering Period 04 01 2002 through 04 30 2002

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mr. Frank McLaughlin

Signature of Treasurer Electronically Filed by Mr. Frank McLaughlin Date 05 10 2002

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/2001)

Page 2

Write or Type Committee Name
American Dental Political Action Cmte.

Report Covering the Period: From: ^{Mo} 04 ^{Day} 01 ^{Year} 2002 To: ^{Mo} 04 ^{Day} 30 ^{Year} 2002

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 ^{Year} 2002		637207.94
(b) Cash on Hand at Beginning of Reporting Period	798847.44	
(c) Total Receipts (from Line 19)	144658.42	480277.25
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	943505.86	1117485.19
7. Total Disbursements (from Line 30)	69320.35	243299.68
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	874185.51	874185.51
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**

FEC Form 3X (Revised 1/2001)

Page 3

Write or Type Committee Name

American Dental Political Action Cmte.

Report Covering the Period: From: ^W04 ^D01 ^Y2002 To: ^W04 ^D30 ^Y2002

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)	280.00	
(ii) Unitemized	120.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii)	400.00	20040.00
(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 32, page 4)	400.00	20040.00
12. Transfers From Affiliated/Other Party Committees	142983.58	451137.17
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 36, page 4)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	1000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	1274.84	5099.78
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18)	144658.42	480277.25
20. Total Federal Receipts (subtract Line 18 from Line 19)	144658.42	480277.25

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Revised 1/2001)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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.....	197.01	543.59
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	197.01	543.59
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	69123.34	236827.09
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... ▶	0.00	0.00
29. Other Disbursements.....	0.00	5929.00
30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29)..... ▶	69320.35	243299.68
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30)..... ▶	69320.35	243299.68
<hr/>		
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) from Line 11(d), page 3).....	400.00	20040.00
33. Total Contribution Refunds (from Line 28(d)).....	0.00	0.00
34. Net Contributions (other than loans) (subtract Line 33 from Line 32).....	400.00	20040.00
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... ▶	197.01	543.59
36. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
37. Net Operating Expenditures (subtract Line 36 from Line 35)..... ▶	197.01	543.59

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

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

FOR LINE NUMBER:
(check only one)

PAGE 5 / 45

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 Political Action Cmte.

A. Full Name (Last, First, Middle Initial)
American Student Dental A. Date of Receipt
Mailing Address
211 East Chicago Avenue
City State Zip Code
Chicago IL 60611
Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. 100.00
Name of Employer Occupation Check
American Student Dental Association
Receipt For: 2002 Aggregate Year-to-Date ▼
X Primary General 550.00
Other (specify) ▼
Transaction ID: R10516

B. Full Name (Last, First, Middle Initial)
American Student Dental A. Date of Receipt
Mailing Address
211 East Chicago Avenue
City State Zip Code
Chicago IL 60611
Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. 25.00
Name of Employer Occupation Check
American Student Dental Association
Receipt For: 2002 Aggregate Year-to-Date ▼
X Primary General 550.00
Other (specify) ▼
Transaction ID: R10517

C. Full Name (Last, First, Middle Initial)
American Student Dental A. Date of Receipt
Mailing Address
211 East Chicago Avenue
City State Zip Code
Chicago IL 60611
Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. 10.00
Name of Employer Occupation Cash
American Student Dental Association
Receipt For: 2002 Aggregate Year-to-Date ▼
X Primary General 550.00
Other (specify) ▼
Transaction ID: R10518

SUBTOTAL of Receipts This Page (optional) ▶ **135.00**
TOTAL This Period (last page this line number only) ▶

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 6 / 46	
	<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

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NAME OF COMMITTEE (In Full)
American Dental Political Action Cmte.

Full Name (Last, First, Middle Initial)
A. American Student Dental A.

Mailing Address
211 East Chicago Avenue

City State Zip Code
Chicago IL 60611

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 0 2

Amount of Each Receipt this Period
10.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
American Student Dental Association

Check

Receipt For: 2002 Aggregate Year-to-Date ▼
X Primary General 550.00
Other (specify) ▼

Transaction ID: R10519

Full Name (Last, First, Middle Initial)
B. American Student Dental A.

Mailing Address
211 East Chicago Avenue

City State Zip Code
Chicago IL 60611

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 0 2

Amount of Each Receipt this Period
5.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
American Student Dental Association

Check

Receipt For: 2002 Aggregate Year-to-Date ▼
X Primary General 550.00
Other (specify) ▼

Transaction ID: R10543

Full Name (Last, First, Middle Initial)
C. American Student Dental A.

Mailing Address
211 East Chicago Avenue

City State Zip Code
Chicago IL 60611

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 0 2

Amount of Each Receipt this Period
5.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
American Student Dental Association

Check

Receipt For: 2002 Aggregate Year-to-Date ▼
X Primary General 550.00
Other (specify) ▼

Transaction ID: R10544

SUBTOTAL of Receipts This Page (optional) ▶ **20.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 7 / 45	
	<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 Political Action Cmte.

Full Name (Last, First, Middle Initial)
A. American Student Dental A.

Mailing Address
211 East Chicago Avenue

City State Zip Code
Chicago IL 60611

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 0 / 2 0 0 2

Amount of Each Receipt this Period
5.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
American Student Dental Association

Check

Receipt For: 2002 Aggregate Year-to-Date ▼
X Primary General 550.00
Other (specify) ▼

Transaction ID: R10545

Full Name (Last, First, Middle Initial)
B. American Student Dental A.

Mailing Address
211 East Chicago Avenue

City State Zip Code
Chicago IL 60611

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 0 / 2 0 0 2

Amount of Each Receipt this Period
110.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
American Student Dental Association

Check

Receipt For: 2002 Aggregate Year-to-Date ▼
X Primary General 550.00
Other (specify) ▼

Transaction ID: R10546

Full Name (Last, First, Middle Initial)
C. American Student Dental A.

Mailing Address
211 East Chicago Avenue

City State Zip Code
Chicago IL 60611

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 0 / 2 0 0 2

Amount of Each Receipt this Period
5.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
American Student Dental Association

Check

Receipt For: 2002 Aggregate Year-to-Date ▼
X Primary General 550.00
Other (specify) ▼

Transaction ID: R10547

SUBTOTAL of Receipts This Page (optional) ▶ **120.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 8 / 45	
	<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 Political Action Cmte.

Full Name (Last, First, Middle Initial)
A. American Student Dental A.

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 0 2

Mailing Address
211 East Chicago Avenue

City State Zip Code
Chicago IL 60611

Amount of Each Receipt this Period
5.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation Cash
American Student Dental Association

Receipt For: 2002 Aggregate Year-to-Date ▼
X Primary General 550.00
Other (specify) ▼

Transaction ID: R10554

B.

C.

SUBTOTAL of Receipts This Page (optional)	▶	5.00
TOTAL This Period (last page this line number only)	▶	280.00

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

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

FOR LINE NUMBER: PAGE 9 / 45

(check only one)

11a 11b 11c 12 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Dental Political Action Cmte.

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

Mailing Address
636 Washington Avenue

City State Zip Code
Montgomery AL 36104

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 0 / 2 0 0 2

Amount of Each Receipt this Period
5000.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Alabama Dental PAC

Check

Receipt For: 2002 Aggregate Year-to-Date ▼
X Primary General 5000.00
Other (specify) ▼

Transaction ID: R10538

Full Name (Last, First, Middle Initial)
B. Arkansas Dental PAC

Mailing Address
2501 Crestwood Drive Suite 205

City State Zip Code
North Little Rock AR 72116

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 0 2

Amount of Each Receipt this Period
2000.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Arkansas Dental PAC

Check

Receipt For: 2002 Aggregate Year-to-Date ▼
X Primary General 11450.00
Other (specify) ▼

Transaction ID: R10510

Full Name (Last, First, Middle Initial)
C. Florida Dental PAC

Mailing Address
1111 E. Tennessee Street Suite 102

City State Zip Code
Tallahassee FL 32308-6914

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 0 / 2 0 0 2

Amount of Each Receipt this Period
425.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Florida Dental PAC

Check

Receipt For: 2002 Aggregate Year-to-Date ▼
X Primary General 13800.00
Other (specify) ▼

Transaction ID: R10539

SUBTOTAL of Receipts This Page (optional) ▶ **7425.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 / 45	
	<input type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input checked="" type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)
American Dental Political Action Cmte.

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

Mailing Address
1345 W. Beretania Street Suite 301
City State Zip Code
Honolulu HI 06814

Date of Receipt
M M / D D / Y Y Y Y
04 / 30 / 2002

Amount of Each Receipt this Period
2440.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Hawaii Dental PAC

Check

Receipt For: 2002 Aggregate Year-to-Date ▼
X Primary General 2440.00
Other (specify) ▼

Transaction ID: R10561

Full Name (Last, First, Middle Initial)
B. Idaho Dental PAC

Mailing Address
1220 West Hays Street
City State Zip Code
Boise ID 83702

Date of Receipt
M M / D D / Y Y Y Y
04 / 30 / 2002

Amount of Each Receipt this Period
7240.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Idaho Dental PAC

Check

Receipt For: 2002 Aggregate Year-to-Date ▼
X Primary General 7240.00
Other (specify) ▼

Transaction ID: R10560

Full Name (Last, First, Middle Initial)
C. Indiana Dental PAC

Mailing Address
PO Box 2467
City State Zip Code
Indianapolis IN 46206

Date of Receipt
M M / D D / Y Y Y Y
04 / 12 / 2002

Amount of Each Receipt this Period
325.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Indiana Dental PAC

Check

Receipt For: 2002 Aggregate Year-to-Date ▼
X Primary General 7550.00
Other (specify) ▼

Transaction ID: R10509

SUBTOTAL of Receipts This Page (optional) ▶ **10005.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 / 45	
	<input type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input checked="" type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)
American Dental Political Action Cmte.

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

Mailing Address
PO Box 2467
City State Zip Code
Indianapolis IN 46206

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 0 2

Amount of Each Receipt this Period
7550.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Indiana Dental PAC

Check

Receipt For: 2002 Aggregate Year-to-Date ▼
X Primary General
Other (specify) ▼

Transaction ID: R10551

Full Name (Last, First, Middle Initial)
B. Iowa Dental PAC

Mailing Address
505 5th Avenue Suite 333
City State Zip Code
Des Moines IA 50309-2379

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 0 2

Amount of Each Receipt this Period
480.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Iowa Dental PAC

Check

Receipt For: 2002 Aggregate Year-to-Date ▼
X Primary General
Other (specify) ▼

Transaction ID: R10524

Full Name (Last, First, Middle Initial)
C. Louisiana Dental PAC

Mailing Address
7833 Office Park Blvd.
City State Zip Code
Baton Rouge LA 70809

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 0 2

Amount of Each Receipt this Period
7510.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Louisiana Dental PAC

Check

Receipt For: 2002 Aggregate Year-to-Date ▼
X Primary General
Other (specify) ▼

Transaction ID: R10522

SUBTOTAL of Receipts This Page (optional) ▶ **8345.00**

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 12 / 45

11a 11b 11c 12 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Dental Political Action Cmte.

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

Mailing Address
7833 Office Park Blvd.

City State Zip Code
Baton Rouge LA 70809

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 0 2

Amount of Each Receipt this Period
1420.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Louisiana Dental PAC

Check

Receipt For: 2002 Aggregate Year-to-Date ▼
X Primary General 11490.00
Other (specify) ▼

Transaction ID: R10528

Full Name (Last, First, Middle Initial)
B. Louisiana Dental PAC

Mailing Address
7833 Office Park Blvd.

City State Zip Code
Baton Rouge LA 70809

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 0 2

Amount of Each Receipt this Period
2180.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Louisiana Dental PAC

Check

Receipt For: 2002 Aggregate Year-to-Date ▼
X Primary General 11490.00
Other (specify) ▼

Transaction ID: R10529

Full Name (Last, First, Middle Initial)
C. Louisiana Dental PAC

Mailing Address
7833 Office Park Blvd.

City State Zip Code
Baton Rouge LA 70809

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 0 2

Amount of Each Receipt this Period
400.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Louisiana Dental PAC

Check

Receipt For: 2002 Aggregate Year-to-Date ▼
X Primary General 11490.00
Other (specify) ▼

Transaction ID: R10563

SUBTOTAL of Receipts This Page (optional) ▶ **3980.00**

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

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

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

FOR LINE NUMBER: PAGE 13 / 45

(check only one)

11a 11b 11c 12 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Dental Political Action Cmte.

Full Name (Last, First, Middle Initial)

A. Maine Dental PAC

Date of Receipt

Mailing Address

N M / D E / Y Y Y Y
0 4 / 3 0 / 2 0 0 2

PO Box 215

City State Zip Code

Manchester ME 04351

Amount of Each Receipt this Period

FEC ID number of contributing federal political committee. 440.00

Name of Employer Occupation
Maine Dental PAC

Check

Receipt For: 2002 Aggregate Year-to-Date ▼

X Primary General 7185.00
Other (specify) ▼

Transaction ID: R10552

Full Name (Last, First, Middle Initial)

B. Maryland Dental PAC

Date of Receipt

Mailing Address

N M / D E / Y Y Y Y
0 4 / 1 9 / 2 0 0 2

6410 Dobbin Road

City State Zip Code

Columbia MD 21045

Amount of Each Receipt this Period

FEC ID number of contributing federal political committee. 3260.00

Name of Employer Occupation
Maryland Dental PAC

Check

Receipt For: 2002 Aggregate Year-to-Date ▼

X Primary General 13503.34
Other (specify) ▼

Transaction ID: R10540

Full Name (Last, First, Middle Initial)

C. Massachusetts Dental PAC

Date of Receipt

Mailing Address

N M / D E / Y Y Y Y
0 4 / 1 9 / 2 0 0 2

83 Speen Street

City State Zip Code

Natick MA 01760

Amount of Each Receipt this Period

FEC ID number of contributing federal political committee. 2260.00

Name of Employer Occupation
Massachusetts Dental PAC

Check

Receipt For: 2002 Aggregate Year-to-Date ▼

X Primary General 18760.00
Other (specify) ▼

Transaction ID: R10535

SUBTOTAL of Receipts This Page (optional) ▶ **5960.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 14 / 45	
	<input type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input checked="" type="checkbox"/> 12 16

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 Political Action Cmte.

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

Mailing Address
230 Washington Square, North Suite 208
City State Zip Code
Lansing MI 48933

Date of Receipt
M M / D D / Y Y Y Y
04 / 12 / 2002

Amount of Each Receipt this Period
2288.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Michigan Dental PAC

Check

Receipt For: 2002 Aggregate Year-to-Date ▼
X Primary General 37470.00
Other (specify) ▼

Transaction ID: R10526

Full Name (Last, First, Middle Initial)
B. Michigan Dental PAC

Mailing Address
230 Washington Square, North Suite 208
City State Zip Code
Lansing MI 48933

Date of Receipt
M M / D D / Y Y Y Y
04 / 12 / 2002

Amount of Each Receipt this Period
3380.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Michigan Dental PAC

Check

Receipt For: 2002 Aggregate Year-to-Date ▼
X Primary General 37470.00
Other (specify) ▼

Transaction ID: R10527

Full Name (Last, First, Middle Initial)
C. Nevada Dental PAC

Mailing Address
6889 W. Charleston Blvd. Suite B
City State Zip Code
Las Vegas NV 89117

Date of Receipt
M M / D D / Y Y Y Y
04 / 12 / 2002

Amount of Each Receipt this Period
60.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Nevada Dental PAC

Check

Receipt For: 2002 Aggregate Year-to-Date ▼
X Primary General 5230.00
Other (specify) ▼

Transaction ID: R10508

SUBTOTAL of Receipts This Page (optional) ▶ **5688.00**

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 15 / 45

11a 11b 11c 12 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Dental Political Action Cmte.

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

Mailing Address
6889 W. Charleston Blvd. Suite B
City State Zip Code
Las Vegas NV 89117

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 0 2

Amount of Each Receipt this Period
40.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Nevada Dental PAC Check

Receipt For: 2002 Aggregate Year-to-Date ▼
X Primary General 5230.00
Other (specify) ▼

Transaction ID: R10558

Full Name (Last, First, Middle Initial)
B. Nevada Dental PAC

Mailing Address
6889 W. Charleston Blvd. Suite B
City State Zip Code
Las Vegas NV 89117

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 0 2

Amount of Each Receipt this Period
120.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Nevada Dental PAC Check

Receipt For: 2002 Aggregate Year-to-Date ▼
X Primary General 5230.00
Other (specify) ▼

Transaction ID: R10559

Full Name (Last, First, Middle Initial)
C. New Jersey Dental PAC

Mailing Address
One Dental Plaza
City State Zip Code
North Brunswick NJ 08902-4311

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 0 2

Amount of Each Receipt this Period
18787.52

FEC ID number of contributing federal political committee.

Name of Employer Occupation
New Jersey Dental PAC Check

Receipt For: 2002 Aggregate Year-to-Date ▼
X Primary General 40059.13
Other (specify) ▼

Transaction ID: R10515

SUBTOTAL of Receipts This Page (optional) ▶ **18947.52**

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

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

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

FOR LINE NUMBER: PAGE 16 / 45

(check only one)

11a 11b 11c 12 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Dental Political Action Cmte.

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

Mailing Address
One Dental Plaza
City State Zip Code
North Brunswick NJ 08902-4311

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 0 / 2 0 0 2

Amount of Each Receipt this Period
5238.06

FEC ID number of contributing federal political committee.

Name of Employer Occupation
New Jersey Dental PAC Check

Receipt For: 2002 Aggregate Year-to-Date ▼
X Primary General 40059.13
Other (specify) ▼

Transaction ID: R10541

Full Name (Last, First, Middle Initial)
B. New York State Dental PAC

Mailing Address
121 State Street 4th Floor
City State Zip Code
Albany NY 12207-1622

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 0 / 2 0 0 2

Amount of Each Receipt this Period
34965.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
New York State Dental PAC Check

Receipt For: 2002 Aggregate Year-to-Date ▼
X Primary General 35165.00
Other (specify) ▼

Transaction ID: R10548

Full Name (Last, First, Middle Initial)
C. North Dakota Dental PAC

Mailing Address
PO Box 1332
City State Zip Code
Bismarck ND 58502

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 0 2

Amount of Each Receipt this Period
40.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
North Dakota Dental PAC Check

Receipt For: 2002 Aggregate Year-to-Date ▼
X Primary General 3860.00
Other (specify) ▼

Transaction ID: R10511

SUBTOTAL of Receipts This Page (optional) ▶ **40243.06**

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

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

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

FOR LINE NUMBER: PAGE 17 / 45

(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 Political Action Cmte.

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

Mailing Address
1370 Dublin Road

City State Zip Code
Columbus OH 43215

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 0 2

Amount of Each Receipt this Period
11270.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Ohio Dental PAC

Check

Receipt For: 2002 Aggregate Year-to-Date ▼
X Primary General 11270.00
Other (specify) ▼

Transaction ID: R10513

B. Full Name (Last, First, Middle Initial)
Oklahoma Dental PAC

Mailing Address
629 W. Interstate 44 Svc. Rd.

City State Zip Code
Oklahoma City OK 73118

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 0 2

Amount of Each Receipt this Period
980.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Oklahoma Dental PAC

Check

Receipt For: 2002 Aggregate Year-to-Date ▼
X Primary General 3910.00
Other (specify) ▼

Transaction ID: R10557

C. Full Name (Last, First, Middle Initial)
Pennsylvania Dental PAC

Mailing Address
PO Box 3341

City State Zip Code
Harrisburg PA 17105

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 0 2

Amount of Each Receipt this Period
2200.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Pennsylvania Dental PAC

Check

Receipt For: 2002 Aggregate Year-to-Date ▼
X Primary General 7175.00
Other (specify) ▼

Transaction ID: R10555

SUBTOTAL of Receipts This Page (optional) ▶ **14430.00**

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 18 / 45

11a 11b 11c 12 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Dental Political Action Cmte.

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

Mailing Address
200 Centerville Place

City State Zip Code
Warwick RI 02886

Date of Receipt
M M / D D / Y Y Y Y
04 / 30 / 2002

Amount of Each Receipt this Period
280.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Rhode Island Dental PAC

Check

Receipt For: 2002 Aggregate Year-to-Date ▼
X Primary General 5920.00
Other (specify) ▼

Transaction ID: R10553

Full Name (Last, First, Middle Initial)
B. South Dakota Dental PAC

Mailing Address
PO Box 1184

City State Zip Code
Pierre SD 57501

Date of Receipt
M M / D D / Y Y Y Y
04 / 30 / 2002

Amount of Each Receipt this Period
440.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
South Dakota Dental PAC

Check

Receipt For: 2002 Aggregate Year-to-Date ▼
X Primary General 2920.00
Other (specify) ▼

Transaction ID: R10560

Full Name (Last, First, Middle Initial)
C. Tennessee Dental PAC

Mailing Address
PO Box 120188

City State Zip Code
Nashville TN 37212

Date of Receipt
M M / D D / Y Y Y Y
04 / 12 / 2002

Amount of Each Receipt this Period
2520.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Tennessee Dental PAC

Check

Receipt For: 2002 Aggregate Year-to-Date ▼
X Primary General 25144.00
Other (specify) ▼

Transaction ID: R10525

SUBTOTAL of Receipts This Page (optional) ▶ **3240.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 19 / 45	
	<input type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input checked="" type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)
American Dental Political Action Cmte.

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

Mailing Address
1948 South IH 35 Suite 400
City State Zip Code
Austin TX 78704

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 0 2

Amount of Each Receipt this Period
20250.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Texas Dental PAC

Check

Receipt For: 2002 Aggregate Year-to-Date ▼
X Primary General 52410.00
Other (specify) ▼

Transaction ID: R10562

Full Name (Last, First, Middle Initial)
B. Vermont Dental PAC

Mailing Address
132 Church Street
City State Zip Code
Burlington VT 05401

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 0 2

Amount of Each Receipt this Period
120.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Vermont Dental PAC

Check

Receipt For: 2002 Aggregate Year-to-Date ▼
X Primary General 2460.00
Other (specify) ▼

Transaction ID: R10512

Full Name (Last, First, Middle Initial)
C. Washington Dental PAC

Mailing Address
2033 6th Avenue Suite 333
City State Zip Code
Seattle WA 98121

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 0 2

Amount of Each Receipt this Period
570.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Washington Dental PAC

Check

Receipt For: 2002 Aggregate Year-to-Date ▼
X Primary General 15535.00
Other (specify) ▼

Transaction ID: R10523

SUBTOTAL of Receipts This Page (optional) ▶ **20940.00**

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

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

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

FOR LINE NUMBER: PAGE 20 / 45

(check only one)

11a 11b 11c 12 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Dental Political Action Cmte.

Full Name (Last, First, Middle Initial)

A. Washington Dental PAC

Mailing Address

2033 6th Avenue

Suite 333

City

Seattle

State

WA

Zip Code

08121

Date of Receipt

N M / D E / Y Y Y Y
0 4 / 3 0 / 2 0 0 2

Amount of Each Receipt this Period

480.00

FEC ID number of contributing
federal political committee.

Name of Employer
Washington Dental PAC

Occupation

Check

Receipt For:

2002

Aggregate Year-to-Date ▼

Primary

General

Other (specify) ▼

15535.00

Transaction ID: R10564

Full Name (Last, First, Middle Initial)

B. West Virginia Dental PAC

Mailing Address

2003 Quarrier Street

City

Charleston

State

WV

Zip Code

25311

Date of Receipt

N M / D E / Y Y Y Y
0 4 / 3 0 / 2 0 0 2

Amount of Each Receipt this Period

2350.00

FEC ID number of contributing
federal political committee.

Name of Employer
West Virginia Dental PAC

Occupation

Check

Receipt For:

2002

Aggregate Year-to-Date ▼

Primary

General

Other (specify) ▼

2350.00

Transaction ID: R10568

Full Name (Last, First, Middle Initial)

C. Wisconsin Dental PAC

Mailing Address

111 E. Wisconsin Avenue, #1300

City

Milwaukee

State

WI

Zip Code

53202-4811

Date of Receipt

N M / D E / Y Y Y Y
0 4 / 0 2 / 2 0 0 2

Amount of Each Receipt this Period

100.00

FEC ID number of contributing
federal political committee.

Name of Employer
Wisconsin Dental PAC

Occupation

Credit Card

Receipt For:

2002

Aggregate Year-to-Date ▼

Primary

General

Other (specify) ▼

7950.00

Transaction ID: R10409

SUBTOTAL of Receipts This Page (optional) ▶ **2930.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 21 / 45	
	<input type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input checked="" type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)
American Dental Political Action Cmte.

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

Mailing Address
111 E. Wisconsin Avenue, #1300

City State Zip Code
Milwaukee WI 53202-4811

Date of Receipt
M M / D D / Y Y Y Y
04 / 02 / 2002

Amount of Each Receipt this Period
100.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation Credit Card
Wisconsin Dental PAC

Receipt For: 2002 Aggregate Year-to-Date ▼
X Primary General 7950.00
Other (specify) ▼

Transaction ID: R10410

Full Name (Last, First, Middle Initial)
B. Wisconsin Dental PAC

Mailing Address
111 E. Wisconsin Avenue, #1300

City State Zip Code
Milwaukee WI 53202-4811

Date of Receipt
M M / D D / Y Y Y Y
04 / 02 / 2002

Amount of Each Receipt this Period
25.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation Credit Card
Wisconsin Dental PAC

Receipt For: 2002 Aggregate Year-to-Date ▼
X Primary General 7950.00
Other (specify) ▼

Transaction ID: R10411

Full Name (Last, First, Middle Initial)
C. Wisconsin Dental PAC

Mailing Address
111 E. Wisconsin Avenue, #1300

City State Zip Code
Milwaukee WI 53202-4811

Date of Receipt
M M / D D / Y Y Y Y
04 / 02 / 2002

Amount of Each Receipt this Period
100.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation Credit Card
Wisconsin Dental PAC

Receipt For: 2002 Aggregate Year-to-Date ▼
X Primary General 7950.00
Other (specify) ▼

Transaction ID: R10412

SUBTOTAL of Receipts This Page (optional) ▶ **225.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 / 45	
	<input type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input checked="" type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)
American Dental Political Action Cmte.

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

Mailing Address
111 E. Wisconsin Avenue, #1300

City State Zip Code
Milwaukee WI 53202-4811

Date of Receipt
M M / D D / Y Y Y Y
04 / 02 / 2002

Amount of Each Receipt this Period
100.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation Credit Card
Wisconsin Dental PAC

Receipt For: 2002 Aggregate Year-to-Date ▼
X Primary General 7950.00
Other (specify) ▼

Transaction ID: R10492

Full Name (Last, First, Middle Initial)
B. Wisconsin Dental PAC

Mailing Address
111 E. Wisconsin Avenue, #1300

City State Zip Code
Milwaukee WI 53202-4811

Date of Receipt
M M / D D / Y Y Y Y
04 / 12 / 2002

Amount of Each Receipt this Period
300.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation Credit Card
Wisconsin Dental PAC

Receipt For: 2002 Aggregate Year-to-Date ▼
X Primary General 7950.00
Other (specify) ▼

Transaction ID: R10514

Full Name (Last, First, Middle Initial)
C. Wisconsin Dental PAC

Mailing Address
111 E. Wisconsin Avenue, #1300

City State Zip Code
Milwaukee WI 53202-4811

Date of Receipt
M M / D D / Y Y Y Y
04 / 19 / 2002

Amount of Each Receipt this Period
25.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation Check
Wisconsin Dental PAC

Receipt For: 2002 Aggregate Year-to-Date ▼
X Primary General 7950.00
Other (specify) ▼

Transaction ID: R10536

SUBTOTAL of Receipts This Page (optional) ▶ **425.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 23 / 45
	<input type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input checked="" type="checkbox"/> 12 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 Political Action Cmte.

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

Date of Receipt
M M / D D / Y Y Y Y
04 / 10 / 2002

Mailing Address
111 E. Wisconsin Avenue, #1300

City State Zip Code
Milwaukee WI 53202-4811

Amount of Each Receipt this Period
200.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation Check
Wisconsin Dental PAC

Receipt For: 2002 Aggregate Year-to-Date ▼
X Primary General 7950.00
Other (specify) ▼

Transaction ID: R10537

B.

C.

SUBTOTAL of Receipts This Page (optional)	▶	200.00
TOTAL This Period (last page this line number only)	▶	142983.58

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 24 / 45
	<input type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16	<input checked="" 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 Political Action Cmte.

Full Name (Last, First, Middle Initial)
A. Citibank 1

Mailing Address
1500 Vermont Ave Nw

City State Zip Code
Washington DC 20005

Date of Receipt
M M / D D / Y Y Y Y
04 / 30 / 2002

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Citibank Hard Dollar Account

Check

Amount of Each Receipt this Period
1274.84

Receipt For: 2002 Aggregate Year-to-Date ▼
X Primary General 5089.78
Other (specify) ▼

Transaction ID: R10578

B.

C.

SUBTOTAL of Receipts This Page (optional)	▶	1274.84
TOTAL This Period (last page this line number only)	▶	1274.84

**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)

PAGE 25 / 45

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

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 Political Action Cmte.

Full Name (Last, First, Middle Initial) A. Citibank Hard Dollar Account		Date of Disbursement 04 / 30 / 2002	
Mailing Address 1500 Vermont Ave Nw City Washington State DC Zip Code 20005		Amount of Each Disbursement this Period 197.01	
Purpose of Disbursement Bank Charges Candidate Name		Category/ Type Bank Charges	
Office Sought: House Senate President State: District:	Disbursement For: 2002 Primary General X Other (specify) ▼ Other	Transaction ID: D6248	

B.

C.

SUBTOTAL of Disbursements This Page (optional)	▶	197.01
TOTAL This Period (last page this line number only)	▶	197.01

**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)

PAGE 28 / 45

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

Full Name (Last, First, Middle Initial) A. Friends of Congressman Tim Holden		Date of Disbursement 04 / 02 / 2002	
Mailing Address		Amount of Each Disbursement this Period 1000.00	
City	State	Zip Code	Contribution: Tim Holden (PA-B-D)
Purpose of Disbursement Contribution: Tim Holden (PA-B-D)		Category/ Type	
Candidate Name Tim Holden (PA-B-D)			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Transaction ID: D8126
State: PA District: 8			

Full Name (Last, First, Middle Initial) B. Cubin for Congress, Inc.		Date of Disbursement 04 / 02 / 2002	
Mailing Address		Amount of Each Disbursement this Period 1000.00	
City	State	Zip Code	Contribution: Barbara Cubin in (WY-R)
Purpose of Disbursement Contribution: Barbara Cubin (WY-R)		Category/ Type	
Candidate Name Barbara Cubin (WY-R)			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Transaction ID: D8127
State: WY District:			

Full Name (Last, First, Middle Initial) C. The Billy Tauzin Committee		Date of Disbursement 04 / 03 / 2002	
Mailing Address 550 South Van		Amount of Each Disbursement this Period 2500.00	
City Houma	State LA	Zip Code 70361	Contribution: Billy J. Tauzin (LA-3-R)
Purpose of Disbursement Contribution: Billy J. Tauzin (LA-3-R)		Category/ Type	
Candidate Name Billy J. Tauzin (LA-3-R)			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼		Transaction ID: D8128
State: LA District: 3			

SUBTOTAL of Disbursements This Page (optional) ▶	4500.00
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)

PAGE 27 / 45

<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				

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NAME OF COMMITTEE (In Full)
American Dental Political Action Cmte.

Full Name (Last, First, Middle Initial) A. Delahunt For Congress Comm		Date of Disbursement 04 / 04 / 2002	
Mailing Address 500 Victory Road City Quincy State MA Zip Code 02171		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Contribution: William D. Delahunt (MA-10)		Contribution: William D. Delahunt (MA-10-D)	
Candidate Name William D. Delahunt (MA-10-D)			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: D8131	
State: MA District: 10			

Full Name (Last, First, Middle Initial) B. Committee For John P. Murtha		Date of Disbursement 04 / 04 / 2002	
Mailing Address City State Zip Code PA		Amount of Each Disbursement this Period 4000.00	
Purpose of Disbursement Contribution: John P. Murtha (PA-12-D)		Contribution: John P. Murtha (PA-12-D)	
Candidate Name John P. Murtha (PA-12-D)			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: D8132	
State: PA District: 12			

Full Name (Last, First, Middle Initial) C. Talent For Senate		Date of Disbursement 04 / 09 / 2002	
Mailing Address 507 Capitol Court, NE #10D City Washington State DC Zip Code 20002		Amount of Each Disbursement this Period 2500.00	
Purpose of Disbursement Contribution: James Talent (MO-R)		Contribution: James Talent (MO-R)	
Candidate Name James Talent (MO-R)			
Office Sought: House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: D8133	
State: MO District:			

SUBTOTAL of Disbursements This Page (optional) ▶	7500.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 28 / 45

<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				

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NAME OF COMMITTEE (In Full)
American Dental Political Action Cmte.

Full Name (Last, First, Middle Initial) A. Joe Wilson For Congress Committee		Date of Disbursement 04 / 09 / 2002	
Mailing Address		Amount of Each Disbursement this Period 1000.00	
City	State SC	Zip Code	Contribution: Joe Wilson (SC-2-R)
Purpose of Disbursement Contribution: Joe Wilson (SC-2-R)		Category/ Type	
Candidate Name Joe Wilson (SC-2-R)		Disbursement For: 2002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary General Other (specify) ▼		Transaction ID: D8134
State: SC District: 2			

Full Name (Last, First, Middle Initial) B. Tom Young For Congress Campaign		Date of Disbursement 04 / 09 / 2002	
Mailing Address PO Box 1001		Amount of Each Disbursement this Period 5000.00	
City	State AL	Zip Code 36633	Contribution: Tom Young (AL-1-R)
Purpose of Disbursement Contribution: Tom Young (AL-1-R)		Category/ Type	
Candidate Name Tom Young (AL-1-R)		Disbursement For: 2002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary General Other (specify) ▼		Transaction ID: D8137
State: AL District: 1			

Full Name (Last, First, Middle Initial) C. Joe Hoeffel For Congress Comm.		Date of Disbursement 04 / 09 / 2002	
Mailing Address 24 West Airy Street		Amount of Each Disbursement this Period 1000.00	
City	State PA	Zip Code 19401	Contribution: Joseph M. Hoeffel (PA-13-D)
Purpose of Disbursement Contribution: Joseph M. Hoeffel (PA-13-D)		Category/ Type	
Candidate Name Joseph M. Hoeffel (PA-13-D)		Disbursement For: 2002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary General Other (specify) ▼		Transaction ID: D8138
State: PA District: 13			

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)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 29 / 45

<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				

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NAME OF COMMITTEE (In Full)
American Dental Political Action Cmte.

Full Name (Last, First, Middle Initial) A. Hobson For Congress Committee		Date of Disbursement 04 / 09 / 2002	
Mailing Address 82 Wc. Columbia City Springfield		State OH	Zip Code 45503
Purpose of Disbursement Contribution: David L. Hobson (OH-7-R)		Amount of Each Disbursement this Period 1000.00	
Candidate Name David L. Hobson (OH-7-R)		Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		Contribution: David L. Hobson (OH-7-R)
State: OH District: 7	Transaction ID: D8140		

Full Name (Last, First, Middle Initial) B. Capitol Hill Club		Date of Disbursement 04 / 09 / 2002	
Mailing Address 300 First St., SE City Washington		State DC	Zip Code 20003
Purpose of Disbursement Contribution: John Sullivan (OK-1-R)		Amount of Each Disbursement this Period 500.00	
Candidate Name John Sullivan (OK-1-R)		Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 Primary <input checked="" type="checkbox"/> General Other (specify) ▼		Contribution: John Sullivan (OK-1-R)
State: OK District: 1	Transaction ID: D8153		

Full Name (Last, First, Middle Initial) C. Jean Camahan For Missouri Cmte.		Date of Disbursement 04 / 09 / 2002	
Mailing Address PO Box 820 City Rolla		State MO	Zip Code 65402
Purpose of Disbursement Contribution: Jean Camahan (MO-D)		Amount of Each Disbursement this Period 2500.00	
Candidate Name Jean Camahan (MO-D)		Category/ Type	
Office Sought: House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		Contribution: Jean Camahan (MO-D)
State: MO District:	Transaction ID: D8155		

SUBTOTAL of Disbursements This Page (optional) ▶	4000.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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PAGE 30 / 45

<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

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NAME OF COMMITTEE (In Full)
American Dental Political Action Cmte.

Full Name (Last, First, Middle Initial) A. Jean Carnahan For Missouri Cmte.		Date of Disbursement 04 / 09 / 2002	
Mailing Address PO Box 920 City: Rolla State: MO Zip Code: 65402		Amount of Each Disbursement this Period -5000.00	
Purpose of Disbursement Returned Check #7089 dated 3/28/2002 for		Returned Check #7089 dated 3/28/2002 for Jean Carnahan (MO-D).	
Candidate Name Jean Carnahan (MO-D)			
Office Sought: House <input checked="" type="checkbox"/> Senate President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: D8156	
State: MO District:	Category/ Type		

Full Name (Last, First, Middle Initial) B. Friends Of Jerry Kleczka		Date of Disbursement 04 / 10 / 2002	
Mailing Address 3268 South 9th Street City: Milwaukee State: WI Zip Code: 53215		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Contribution: Jerry D. Kleczka (WI-4-D)		Contribution: Jerry D. Kleczka (WI-4-D)	
Candidate Name Jerry D. Kleczka (WI-4-D)			
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: D8157	
State: WI District: 4	Category/ Type		

Full Name (Last, First, Middle Initial) C. Burr For Congress		Date of Disbursement 04 / 10 / 2002	
Mailing Address PO Box 592B City: Winston-Salem State: NC Zip Code: 27113		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Contribution: Richard Burr (NC-5-R)		Contribution: Richard Burr (NC-5-R)	
Candidate Name Richard Burr (NC-5-R)			
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: D8158	
State: NC District: 6	Category/ Type		

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 31 / 45

<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				

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NAME OF COMMITTEE (In Full)
American Dental Political Action Cmte.

Full Name (Last, First, Middle Initial) A. Whiskey Creek Golf Club		Date of Disbursement 04 / 10 / 2002
Mailing Address		Amount of Each Disbursement this Period 1080.00
City Ijamsville	State MD	Zip Code
Purpose of Disbursement Contribution: James Allen Nussle (IA-2-R)		Category/ Type Contribution: James Allen Nussle (IA-2-R)
Candidate Name James Allen Nussle (IA-2-R)		
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	
State: IA	District: 2	Transaction ID: D8160

Full Name (Last, First, Middle Initial) B. Serrano for Congress		Date of Disbursement 04 / 15 / 2002
Mailing Address 275 Madison Avenue		Amount of Each Disbursement this Period -1000.00
City New York	State NY	Zip Code 10018
Purpose of Disbursement Returned Check #7063 dated 3/26/2002 for		Category/ Type Returned Check #7063 dated 3/26/2002 for Jose E. Ser- rano (NY-16-D).
Candidate Name Jose E. Serrano (NY-16-D)		
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	
State: NY	District: 16	Transaction ID: D8161

Full Name (Last, First, Middle Initial) C. Jackson Lee For Congress Comm.		Date of Disbursement 04 / 17 / 2002
Mailing Address 4412 Alameda		Amount of Each Disbursement this Period 1000.00
City Houston	State TX	Zip Code 77044
Purpose of Disbursement Contribution: Sheila Jackson Lee (TX-18-		Category/ Type Contribution: Sheila Jack- son Lee (TX-18-D)
Candidate Name Sheila Jackson Lee (TX-18-D)		
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	
State: TX	District: 18	Transaction ID: D8162

SUBTOTAL of Disbursements This Page (optional)	1080.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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FOR LINE NUMBER:
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PAGE 32 / 45

<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				

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NAME OF COMMITTEE (In Full)
American Dental Political Action Cmte.

Full Name (Last, First, Middle Initial) A. Capuano For Congress		Date of Disbursement 04 / 17 / 2002	
Mailing Address 219 Elm Street City State Zip Code Somerville MA 02144		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Contribution: Michael E. Capuano (MA-B-D)		Contribution: Michael E. Capuano (MA-B-D)	
Candidate Name Michael E. Capuano (MA-B-D)			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: D8163	
State: MA District: 8	Category/Type		

Full Name (Last, First, Middle Initial) B. Hutchinson for Senate		Date of Disbursement 04 / 17 / 2002	
Mailing Address PO Box 998 City State Zip Code Rogers AR 72757		Amount of Each Disbursement this Period 1500.00	
Purpose of Disbursement Contribution: Tim Hutchinson (AR-R)		Contribution: Tim Hutchinson (AR-R)	
Candidate Name Tim Hutchinson (AR-R)			
Office Sought: House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: D8164	
State: AR District: 0	Category/Type		

Full Name (Last, First, Middle Initial) C. Reyes Campaign		Date of Disbursement 04 / 17 / 2002	
Mailing Address 505 E. Rio Grande City State Zip Code El Paso TX 79902		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Contribution: Silvestre Reyes (TX-16-D)		Contribution: Silvestre Reyes (TX-16-D)	
Candidate Name Silvestre Reyes (TX-16-D)			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: D8165	
State: TX District: 16	Category/Type		

SUBTOTAL of Disbursements This Page (optional) ▶	3500.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

FOR LINE NUMBER:
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PAGE 33 / 45

<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				

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NAME OF COMMITTEE (In Full)
American Dental Political Action Cmte.

Full Name (Last, First, Middle Initial) A. Friends of Cliff Stearns		Date of Disbursement 04 / 17 / 2002
Mailing Address		Amount of Each Disbursement this Period 1000.00
City	State Zip Code	
Purpose of Disbursement Contribution: Cliff Stearns (FL-6-R)		Contribution: Cliff Stearns (FL-6-R)
Candidate Name Cliff Stearns (FL-6-R)		
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: D6166
State: FL District: 8	Category/Type	

Full Name (Last, First, Middle Initial) B. Citizens for Tom Petri		Date of Disbursement 04 / 17 / 2002
Mailing Address PO Box 270		Amount of Each Disbursement this Period -1000.00
City	State Zip Code	
Fond du Lac WI 54936		Returned Check #7041 dated 3/26/2002 for Thomas E. Petri (WI-6-R).
Purpose of Disbursement Returned Check #7041 dated 3/26/2002 for		
Candidate Name Thomas E. Petri (WI-6-R)		Transaction ID: D6166
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	
State: WI District: 6	Category/Type	

Full Name (Last, First, Middle Initial) C. Nathan Deal for Congress		Date of Disbursement 04 / 17 / 2002
Mailing Address PO Box 802		Amount of Each Disbursement this Period -1000.00
City	State Zip Code	
Gainesville GA 30503		Returned Check #7067 dated 3/26/2002 for Nathan Deal (GA-9-R).
Purpose of Disbursement Returned Check #7067 dated 3/26/2002 for		
Candidate Name Nathan Deal (GA-9-R)		Transaction ID: D6172
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	
State: GA District: 9	Category/Type	

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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FOR LINE NUMBER:
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PAGE 34 / 45

<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

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NAME OF COMMITTEE (In Full)
American Dental Political Action Cmte.

Full Name (Last, First, Middle Initial) A. Au Bon Pain		Date of Disbursement 04 / 19 / 2002
Mailing Address		Amount of Each Disbursement this Period 193.18
City Washington	State DC	Zip Code 20005
Purpose of Disbursement Event for Mike Chema on 3/25/02		Category/ Type Event for Mike Chema on 3/25/02
Candidate Name Mike Chema (NH-1-R)		
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	
State: NH District: 1	Transaction ID: D6174	

Full Name (Last, First, Middle Initial) B. Au Bon Pain		Date of Disbursement 04 / 19 / 2002
Mailing Address		Amount of Each Disbursement this Period 193.18
City Washington	State DC	Zip Code 20005
Purpose of Disbursement Event for Mike Chema on 3/25/02		Category/ Type [MEMO ITEM] Event for Mike Chema on 3/25/02
Candidate Name Mike Chema (NH-1-R)		
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	
State: NH District: 1	Transaction ID: D6175	

Full Name (Last, First, Middle Initial) C. Au Bon Pain		Date of Disbursement 04 / 19 / 2002
Mailing Address		Amount of Each Disbursement this Period 127.92
City Washington	State DC	Zip Code 20005
Purpose of Disbursement Event for Clay Shaw on 3/21/02		Category/ Type Event for Clay Shaw on 3/ 21/02
Candidate Name Clay Shaw, Jr. (FL-22-R)		
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	
State: FL District: 22	Transaction ID: D6178	

SUBTOTAL of Disbursements This Page (optional)	321.10
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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FOR LINE NUMBER:
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PAGE 35 / 45

<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
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NAME OF COMMITTEE (In Full)
American Dental Political Action Cmte.

Full Name (Last, First, Middle Initial) A. Au Bon Pain		Date of Disbursement 04 / 19 / 2002	
Mailing Address City Washington State DC Zip Code 20005		Amount of Each Disbursement this Period 127.92	
Purpose of Disbursement Event for Clay Shaw on 3/21/02		[MEMO ITEM] Event for Clay Shaw on 3/21/02	
Candidate Name Clay Shaw, Jr. (FL-22-R)			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: D6179	
State: FL District: 22	Category/ Type		

Full Name (Last, First, Middle Initial) B. Citizens for Tom Petri		Date of Disbursement 04 / 19 / 2002	
Mailing Address PO Box 270 City Fond Du Lac State WI Zip Code 54935		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Contribution: Thomas E. Petri (WI-6-R)		Contribution: Thomas E. Petri (WI-6-R)	
Candidate Name Thomas E. Petri (WI-6-R)			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: D6180	
State: WI District: 6	Category/ Type		

Full Name (Last, First, Middle Initial) C. Boyd for Congress		Date of Disbursement 04 / 19 / 2002	
Mailing Address PO Box 15703 City Tallahassee State FL Zip Code 32317		Amount of Each Disbursement this Period 1500.00	
Purpose of Disbursement Contribution: Allen Boyd (FL-2-D)		Contribution: Allen Boyd (FL-2-D)	
Candidate Name Allen Boyd (FL-2-D)			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: D6181	
State: FL District: 2	Category/ Type		

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 38 / 45

<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				

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NAME OF COMMITTEE (In Full)
American Dental Political Action Cmte.

Full Name (Last, First, Middle Initial) A. Texans For Henry Bonilla		Date of Disbursement 04 / 19 / 2002	
Mailing Address 4451 Brookfield Corporate Dr. Ste. 200 City State Zip Code Chantilly VA 20151		Amount of Each Disbursement this Period 2500.00	
Purpose of Disbursement Contribution: Henry Bonilla (TX-23-R)		Category/ Type Contribution: Henry Bonilla (TX-23-R)	
Candidate Name Henry Bonilla (TX-23-R)			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: D61B2	
State: TX District: 23			

Full Name (Last, First, Middle Initial) B. Heather Wilson For Congress		Date of Disbursement 04 / 19 / 2002	
Mailing Address PO Box 14070 City State Zip Code Albuquerque NM 87191		Amount of Each Disbursement this Period 4000.00	
Purpose of Disbursement Contribution: Heather Wilson (NM-1-R)		Category/ Type Contribution: Heather Wilson (NM-1-R)	
Candidate Name Heather Wilson (NM-1-R)			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: D61B3	
State: NM District: 1			

Full Name (Last, First, Middle Initial) C. Hoosiers Supporting Buyer for Congress		Date of Disbursement 04 / 19 / 2002	
Mailing Address 200 North Main St. PO Box 712 City State Zip Code Monticello IN 47960		Amount of Each Disbursement this Period 1613.68	
Purpose of Disbursement Contribution: Steve Buyer (IN-5-R)		Category/ Type Contribution: Steve Buyer (IN-5-R)	
Candidate Name Steve Buyer (IN-5-R)			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: D61B6	
State: IN District: 6			

SUBTOTAL of Disbursements This Page (optional) ▶	8113.68
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)

PAGE 38 / 45

<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				

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NAME OF COMMITTEE (In Full)
American Dental Political Action Cmte.

Full Name (Last, First, Middle Initial) A. Reynolds for Congress		Date of Disbursement 04 / 22 / 2002	
Mailing Address PO Box 479 City Victor State NY Zip Code 14564		Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement Contribution: Thomas M. Reynolds (NY-27- Candidate Name Thomas M. Reynolds (NY-27-R)		Category/ Type Contribution: Thomas M. Reynolds (NY-27-R)	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 27	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		Transaction ID: D8184

Full Name (Last, First, Middle Initial) B. Ballenger for Congress		Date of Disbursement 04 / 22 / 2002	
Mailing Address PO Box 2552 City Hickory State NC Zip Code 28603		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Contribution: Cass Ballenger (NC-10-R) Candidate Name Cass Ballenger (NC-10-R)		Category/ Type Contribution: Cass Ballen- ger (NC-10-R)	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 10	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		Transaction ID: D8186

Full Name (Last, First, Middle Initial) C. Karen McCarthy For Congress		Date of Disbursement 04 / 22 / 2002	
Mailing Address 1111 Valentine Road City Kansas City State MO Zip Code 64111		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Contribution: Karen McCarthy (MO-5-D) Candidate Name Karen McCarthy (MO-5-D)		Category/ Type Contribution: Karen McCart- thy (MO-5-D)	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 5	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		Transaction ID: D8187

SUBTOTAL of Disbursements This Page (optional)	4000.00
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)

PAGE 39 / 45

<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				

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NAME OF COMMITTEE (In Full)
American Dental Political Action Cmte.

Full Name (Last, First, Middle Initial) A. Jerry Lewis for Congress Committee		Date of Disbursement 04 / 22 / 2002	
Mailing Address PO Box 247 City Redlands State CA Zip Code 92373		Amount of Each Disbursement this Period 5000.00	
Purpose of Disbursement Contribution: Jerry Lewis (CA-40-R)		Contribution: Jerry Lewis (CA-40-R)	
Candidate Name Jerry Lewis (CA-40-R)			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: D6160	
State: CA District: 40	Category/Type		

Full Name (Last, First, Middle Initial) B. Buck McKeon For Congress		Date of Disbursement 04 / 22 / 2002	
Mailing Address 24285 San Fernando Road City Santa Clarita State CA Zip Code 91321		Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement Contribution: Howard P. McKeon (CA-25-R)		Contribution: Howard P. McKeon (CA-25-R)	
Candidate Name Howard P. McKeon (CA-25-R)			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: D6200	
State: CA District: 25	Category/Type		

Full Name (Last, First, Middle Initial) C. Committee To Re-Elect J.D. Hayworth		Date of Disbursement 04 / 22 / 2002	
Mailing Address PO Box 14273 City Mesa State AZ Zip Code 85267		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Contribution: J.D. Hayworth (AZ-6-R)		Contribution: J.D. Hayworth (AZ-6-R)	
Candidate Name J.D. Hayworth (AZ-6-R)			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: D6201	
State: AZ District: 6	Category/Type		

SUBTOTAL of Disbursements This Page (optional) ▶	6500.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 40 / 45

<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				

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NAME OF COMMITTEE (In Full)
American Dental Political Action Cmte.

Full Name (Last, First, Middle Initial) A. Caucus Room		Date of Disbursement 04 / 24 / 2002
Mailing Address 401 8th Street, NW City: Washington State: DC Zip Code: 20001		Amount of Each Disbursement this Period 1108.56
Purpose of Disbursement Contribution: J.C. Watts, Jr. (OK-4-R)		Contribution: J.C. Watts, Jr. (OK-4-R)
Candidate Name J.C. Watts, Jr. (OK-4-R) Category/Type		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: D62D6
State: OK District: 4		

Full Name (Last, First, Middle Initial) B. Volunteers for Shimkus		Date of Disbursement 04 / 24 / 2002
Mailing Address PO Box 645B City: Springfield State: IL Zip Code: 62706		Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement Contribution: John M. Shimkus (IL-20-R)		Contribution: John M. Shimkus (IL-20-R)
Candidate Name John M. Shimkus (IL-20-R) Category/Type		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: D62D6
State: IL District: 20		

Full Name (Last, First, Middle Initial) C. Upton For All Of Us		Date of Disbursement 04 / 26 / 2002
Mailing Address PO Box 490 City: St. Joseph State: MI Zip Code: 49085		Amount of Each Disbursement this Period 3500.00
Purpose of Disbursement Contribution: Fred S. Upton (MI-6-R)		Contribution: Fred S. Upton (MI-6-R)
Candidate Name Fred S. Upton (MI-6-R) Category/Type		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: D8212
State: MI District: 8		

SUBTOTAL of Disbursements This Page (optional)	5608.56
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 41 / 45

<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				

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NAME OF COMMITTEE (In Full)
American Dental Political Action Cmte.

Full Name (Last, First, Middle Initial) A. Point O Woods Golf and Country Club		Date of Disbursement 04 / 26 / 2002	
Mailing Address 1516 Roslyn Road City: Benton Harbor State: MI Zip Code: 49022		Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement Contribution: Fred S. Upton (MI-6-R)		Contribution: Fred S. Upton (MI-6-R)	
Candidate Name Fred S. Upton (MI-6-R)			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: D6213	
State: MI District: 8	Category/Type		

Full Name (Last, First, Middle Initial) B. Chris Chocola For Congress, Inc.		Date of Disbursement 04 / 26 / 2002	
Mailing Address PO Box 8728 City: South Bend State: IN Zip Code: 46608		Amount of Each Disbursement this Period 2500.00	
Purpose of Disbursement Contribution: Chris Chocola (IN-2-R)		Contribution: Chris Chocola (IN-2-R)	
Candidate Name Chris Chocola (IN-2-R)			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: D6214	
State: IN District: 2	Category/Type		

Full Name (Last, First, Middle Initial) C. Mike Pence Committee		Date of Disbursement 04 / 26 / 2002	
Mailing Address PO Box 408 City: Anderson State: IN Zip Code: 46015		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Contribution: Mike Pence (IN-2-R)		Contribution: Mike Pence (IN-2-R)	
Candidate Name Mike Pence (IN-2-R)			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: D6215	
State: IN District: 2	Category/Type		

SUBTOTAL of Disbursements This Page (optional)	4000.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 42 / 45

<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				

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NAME OF COMMITTEE (In Full)
American Dental Political Action Cmte.

Full Name (Last, First, Middle Initial) A. Hall For Congress		Date of Disbursement 04 / 29 / 2002	
Mailing Address PO Box 711 City State Zip Code Rockwall TX 75087		Amount of Each Disbursement this Period -1000.00	
Purpose of Disbursement Returned Check #7089 dated 3/28/2002 for		Returned Check #7089 dated 3/28/2002 for Ralph M. Ha- ll (TX-4-D).	
Candidate Name Ralph M. Hall (TX-4-D)		Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: D6218	
State: TX District: 4			

Full Name (Last, First, Middle Initial) B. Menendez for Congress, Inc.		Date of Disbursement 04 / 30 / 2002	
Mailing Address City State Zip Code		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Contribution: Robert Menendez (NJ-13-D)		Contribution: Robert Mene- ndez (NJ-13-D)	
Candidate Name Robert Menendez (NJ-13-D)		Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: D6220	
State: NJ District: 13			

Full Name (Last, First, Middle Initial) C. Friends of Sherwood Boehlert Cmte.		Date of Disbursement 04 / 30 / 2002	
Mailing Address PO Box 819 City State Zip Code New Hartford NY 13413		Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement Contribution: Sherwood L. Boehlert (NY-2)		Contribution: Sherwood L. Boehlert (NY-23-R)	
Candidate Name Sherwood L. Boehlert (NY-23-R)		Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: D6221	
State: NY District: 23			

SUBTOTAL of Disbursements This Page (optional) ▶	500.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 43 / 45

<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				

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NAME OF COMMITTEE (In Full)
American Dental Political Action Cmte.

Full Name (Last, First, Middle Initial) A. Friends of Sherrod Brown		Date of Disbursement 04 / 30 / 2002
Mailing Address		Amount of Each Disbursement this Period 1000.00
City	State Zip Code	
Purpose of Disbursement Contribution: Sherrod Brown (OH-13-D)		Contribution: Sherrod Brown (OH-13-D)
Candidate Name Sherrod Brown (OH-13-D)		
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: D6222
State: OH District: 13		

Full Name (Last, First, Middle Initial) B. Jim Ramstad Volunteer Comm.		Date of Disbursement 04 / 30 / 2002
Mailing Address		Amount of Each Disbursement this Period 1000.00
City	State Zip Code	
Purpose of Disbursement Contribution: Jim Ramstad (MN-3-R)		Contribution: Jim Ramstad (MN-3-R)
Candidate Name Jim Ramstad (MN-3-R)		
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: D6223
State: MN District: 3		

Full Name (Last, First, Middle Initial) C. Senator John Warner Cmte		Date of Disbursement 04 / 30 / 2002
Mailing Address		Amount of Each Disbursement this Period 1000.00
City	State Zip Code	
Purpose of Disbursement Contribution: John W. Warner (VA-R)		Contribution: John W. Warner (VA-R)
Candidate Name John W. Warner (VA-R)		
Office Sought: House <input checked="" type="checkbox"/> Senate President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: D6224
State: VA District:		

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 44 / 45

<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				

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NAME OF COMMITTEE (In Full)
American Dental Political Action Cmte.

Full Name (Last, First, Middle Initial) A. Hoyer For Congress		Date of Disbursement 04 / 30 / 2002	
Mailing Address 7605 Malcolm Road Suite 102 City State Zip Code Clinton MD 20735		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Contribution: Steny H. Hoyer (MD-5-D)		Contribution: Steny H. Hoyer (MD-5-D)	
Candidate Name Steny H. Hoyer (MD-5-D)			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Transaction ID: D6225	
State: MD District: 5			

Full Name (Last, First, Middle Initial) B. Tim Murphy For Congress		Date of Disbursement 04 / 30 / 2002	
Mailing Address PO Box 11721 City State Zip Code Pittsburg PA 15228		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Contribution: Tim Murphy (PA-18-R)		Contribution: Tim Murphy (PA-18-R)	
Candidate Name Tim Murphy (PA-18-R)			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Transaction ID: D6226	
State: PA District: 18			

Full Name (Last, First, Middle Initial) C. Burr For Congress		Date of Disbursement 04 / 30 / 2002	
Mailing Address PO Box 5828 City State Zip Code Winston-Salem NC 27113		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Contribution: Richard Burr (NC-5-R)		Contribution: Richard Burr (NC-5-R)	
Candidate Name Richard Burr (NC-5-R)			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Transaction ID: D6227	
State: NC District: 6			

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 45 / 45

<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				

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NAME OF COMMITTEE (In Full)
American Dental Political Action Cmte.

<p>Full Name (Last, First, Middle Initial) A. Hall For Congress</p> <p>Mailing Address PO Box 711 City State Zip Code Rockwall TX 75087</p> <p>Purpose of Disbursement Contribution: Ralph M. Hall (TX-4-D)</p> <p>Candidate Name Ralph M. Hall (TX-4-D)</p> <p>Office Sought: <input checked="" type="checkbox"/> House Senate President</p> <p>State: TX District: 4</p>		<p>Date of Disbursement 04 / 30 / 2002</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Contribution: Ralph M. Hall (TX-4-D)</p> <p>Transaction ID: D6228</p>
<p>Disbursement For: 2002 Primary <input checked="" type="checkbox"/> General Other (specify) ▼</p>		<p>Category/ Type</p>

<p>Full Name (Last, First, Middle Initial) B. Alexa for Congress</p> <p>Mailing Address 337 Deerfield Road City State Zip Code Valparaiso IN 46383</p> <p>Purpose of Disbursement Contribution: Bill Alexa (IN-2-D)</p> <p>Candidate Name Bill Alexa (IN-2-D)</p> <p>Office Sought: <input checked="" type="checkbox"/> House Senate President</p> <p>State: IN District: 2</p>		<p>Date of Disbursement 04 / 30 / 2002</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Contribution: Bill Alexa (IN-2-D)</p> <p>Transaction ID: D6230</p>
<p>Disbursement For: 2002 Primary <input checked="" type="checkbox"/> General Other (specify) ▼</p>		<p>Category/ Type</p>

C.

SUBTOTAL of Disbursements This Page (optional)	2000.00
TOTAL This Period (last page this line number only)	69123.34