



FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

RQ-2

Michael Donohoo, Treasurer
American Dental Political Action Committee
1111 14th Street, NW 11th Floor
Washington, DC 20005

MAR - 3 1999

Identification Number: C00000729

Reference: Year End Report (11/24/98-12/31/98)

Dear Mr. Donohoo:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. The review raised questions concerning certain information contained in the report(s). An itemization follows:

-Your report discloses what appears to be an in-kind contribution made on behalf of *People for Ganske Committee*, (pertinent portion(s) attached). The original payments for the goods and services have been disbursed to The Tarrance Group, Inc. and listed as a memo entry on Schedule B supporting Line 23 of the Detailed Summary Page.

If the transaction in question is an in-kind contribution, please note that the amount of such activity should be **ADDED** to the total for Line 23 of the Detailed Summary Page. This method of reporting would clarify for the public record the total amount of contributions to federal candidates (including in-kind contributions). However, if this expenditure is not an in-kind contribution, please clarify the nature of the transaction.

A written response or an amendment to your original report(s) correcting the above problem(s) should be filed with the Federal Election Commission within fifteen (15) days of the date of this letter. If you need assistance, please feel free to contact me on our toll-free number, (800) 424-9530. My local number is (202) 694-1130.

Sincerely,

Antoinette Kitchen
Reports Analyst
Reports Analysis Division

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 1 OF 1
FOR LINE NUMBER 23

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 Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The Terrace Group, Inc. 201 N. Union Street Suite 410 Alexandria, VA 22314	25% of benchmark survey to Ganske campaign Disbursement for: ☐ Primary ☒ General ☐ Other (specify) 1998	11/28/98	2,500.00 (Memo Entry)
B. Full Name, Mailing Address and ZIP Code People for Ganske Committee 621 E. Locust Avenue Des Moines, IA 50308	26% of benchmark survey to Ganske campaign Disbursement for: ☐ Primary ☒ General ☐ Other (specify) 1998	11/28/98	2,500.00 (Memo Entry)
C. Full Name, Mailing Address and ZIP Code Committee for John H. Isakson GA	Purpose of Disbursement John H. Isakson, U.S. SENATE GA Disbursement for: ☐ Primary ☐ General ☒ Other (specify) Special Election-Georgia	12/15/98	5,000.00
D. Full Name, Mailing Address and ZIP Code Republican National Committee 310 First Street S.E. Washington, DC 20003	Purpose of Disbursement 1998 membership dues Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	12/16/98	45,000.00
E. Full Name, Mailing Address and ZIP Code Democratic National Committee 430 S. Capitol St., SE Washington, DC 20003	Purpose of Disbursement 1999 membership dues Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	12/16/98	15,000.00
F. Full Name, Mailing Address and ZIP Code Committee for Spencer Abraham MI	Purpose of Disbursement Spencer Abraham, U.S. SENATE MI Disbursement for: ☐ Primary ☐ General ☐ Other (specify) 1999	12/16/98	1,000.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
SUBTOTAL of Disbursements This Page (optional)			36,000.00
TOTAL This Period (last page this line number only)			39,000.00

