

**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)

<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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Dental Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ralph Abraham For Congress

Mailing Address PO 270

City Archibald State LA Zip Code 71218

Purpose of Disbursement
VOID - Contribution to Federal Candidate

Candidate Name
Rep. Ralph L. Abraham Jr.

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: LA District: 05

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : **B62D93263B7764A01976**

Amount of Each Disbursement this Period

----- -2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Ralph Abraham For Congress

Mailing Address PO 270

City Archibald State LA Zip Code 71218

Purpose of Disbursement
Contribution to Federal Candidate

Candidate Name
Rep. Ralph L. Abraham Jr.

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: LA District: 05

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : **BAD6B6823B5E14A92BF2**

Amount of Each Disbursement this Period

----- 2000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Richmond For Congress

Mailing Address 1631 Elysian Fields
Suite 150

City New Orleans State LA Zip Code 70126

Purpose of Disbursement
Contribution to Federal Candidate

Candidate Name
Rep. Cedric L. Richmond

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: LA District: 02

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : **BFA8594CFED8D439EA68**

Amount of Each Disbursement this Period

----- 1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

----- 1000.00
