



FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

RQ-2

MAR 18 1998

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

Identification Number: C00000729

Reference: Year End Report (12/1/97-12/31/97)

Dear Dr. 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:

-Schedule B of your report (pertinent portion(s) attached) discloses a contribution(s) which appears to exceed the limits set forth in the Act. 2 U.S.C. §441a(a) precludes a multicandidate committee and its affiliates from making a contribution to a candidate for federal office in excess of \$5,000 per election.

If the contribution(s) in question was incompletely or incorrectly disclosed, you should amend your original report with clarifying information. If you have made an excessive contribution, you should notify the recipient and request a refund of the amount in excess of \$5,000 and/or notify the recipient in writing of your redesignation of the contribution. In the best interest of your committee, all refunds and redesignations should be made within sixty days of the treasurer's receipt of the contribution(s).

Please inform the Commission of your corrective action immediately in writing and provide a photocopy of the refund request sent to the recipient committee(s). In addition, any refunds should be disclosed on Schedule A supporting Line 16 of the report covering the period during which they are received. Any redesignations should be disclosed as memo entries on Schedule B supporting Line 23 of the report covering the period during which the redesignation is made. 11 CFR §110.1(b)

AMERICAN DENTAL POLITICAL ACTION COMMITTEE
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Although the Commission may take further legal action regarding the excessive contribution(s), your prompt action in obtaining a refund and/or redesignating the contribution(s) will be taken into consideration.

-Schedule B of your report (pertinent portion(s) attached) discloses a contribution(s) which appears to exceed the limits set forth in the Act. 2 U.S.C. §441a(a) precludes a multicandidate committee from making a contribution to a national political party in excess of \$15,000 in a calendar year.

If the contribution(s) in question was incompletely or incorrectly disclosed, you should amend your original report with clarifying information. If you have made an excessive contribution, you should notify the recipient and request a refund of the amount in excess of \$15,000. In the best interest of your committee, all refunds should be made within sixty days of the treasurer's receipt of the contribution.

Please inform the Commission of your corrective action immediately in writing and provide a photocopy of the refund request sent to the recipient committee(s). In addition, any refunds should be disclosed on Schedule A supporting Line 16 of the report covering the period during which they are received.

Although the Commission may take further legal action concerning the excessive contribution(s), prompt action in obtaining a refund will be taken into consideration.

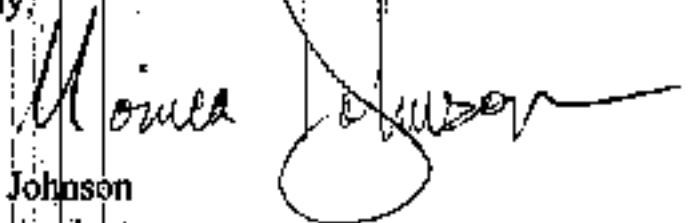
-The beginning cash balance of this report should equal the ending balance of your December Monthly Report. Please clarify this discrepancy and amend any subsequent report(s) that may be affected by this correction.

-The totals listed on Lines 23, 30, and 31, Column B of the Detailed Summary Page appear to be incorrect. Please be advised that you should add the "Calendar Year-to-Date" total from your previous report to the current "Total This Period" figure from Column A to derive the correct Column B total. Please amend your report and any subsequent reports that may be affected by this correction.

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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,

A handwritten signature in cursive script that reads "Monica Johnson". The signature is written in black ink and is positioned to the right of the typed name.

Monica Johnson
Reports Analyst
Reports Analysis Division

SCHEDULE B

ITEMIZED DISBURSEMENTS

See separate schedule(s)
for each category of the
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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 committees.

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 Disb. this Period
Norwood for Congress 3643 Walton Way Extension Augusta, GA 30909	Charlie Norwood, U.S. HOUSE 10th GA Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	06/05/97	1,000.00
B. Full Name, Mailing Address and Zip Code Citizens for John Oliver for Congress PO Box 819 Amherst, MA 01004	Purpose of Disbursement John Oliver, U.S. HOUSE 1st MA Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	Date (Month day, Year) 06/25/97	Amount of Each Disb. this Period 500.00
C. Full Name, Mailing Address and Zip Code Pallone for Congress PO Box 3176 Long Branch, NJ 07740	Purpose of Disbursement Frank Pallone, U.S. HOUSE 6th NJ Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	Date (Month day, Year) 06/25/97	Amount of Each Disb. this Period 1,250.00
D. Full Name, Mailing Address and Zip Code Pease for Congress	Purpose of Disbursement Ed Pease, U.S. HOUSE 7th IN Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	Date (Month day, Year) 06/25/97	Amount of Each Disb. this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Committee for Nancy Pelosi , CA	Purpose of Disbursement Nancy Pelosi, U.S. HOUSE 8th CA Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	Date (Month day, Year) 06/10/97	Amount of Each Disb. this Period 500.00
F. Full Name, Mailing Address and Zip Code Earl Pomeroy for Congress PO Box 746 Bismarck, ND 58502	Purpose of Disbursement Earl Pomeroy, U.S. HOUSE AL ND Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (Specify) 1996 Debt Retirement	Date (Month day, Year) 06/19/97	Amount of Each Disb. this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Rangel for Congress '96 850 Seventh Avenue New York, NY 10019	Purpose of Disbursement Charles B. Rangel, U.S. HOUSE 15th NY Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	Date (Month day, Year) 06/03/97	Amount of Each Disb. this Period 500.00
H. Full Name, Mailing Address and Zip Code Frank Riggs for Congress PO Box 580 Windsor, CA 95492	Purpose of Disbursement Frank Riggs, U.S. HOUSE 1st CA Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	Date (Month day, Year) 06/16/97	Amount of Each Disb. this Period 500.00
I. Full Name, Mailing Address and Zip Code Citizens for Rush 3361 South King Drive Chicago, IL 60616	Purpose of Disbursement Bobby L. Rush, U.S. HOUSE 1st IL Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	Date (Month day, Year) 06/25/97	Amount of Each Disb. this Period 1,000.00

SUB TOTAL of Disbursements this page (Optional)

7,250.00

TOTAL this Period (Last page this line number only)

Use separate schedule(s)
for each category of the
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SCHEDULE B

ITEMIZED DISBURSEMENTS

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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 Disb. this Period
The Tarrance Group, Inc. 201 N. Union Street Suite 410 Alexandria, VA 22314	benchmark survey-Charlie Norwood Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	12/01/97	3,473.00 (In-Kind)
B. Full Name, Mailing Address and Zip Code Norwood for Congress 3643 Walton Way Extension Augusta, GA 30909	benchmark survey-Charlie Norwood Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	12/01/97	3,473.00 Memo In-Kind
C. Full Name, Mailing Address and Zip Code Friends of Jim Saxton PO Box 795 Mount Holly, NJ 08060-9943	H. James Saxton, U.S. HOUSE 3rd NJ Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	12/03/97	1,000.00
D. Full Name, Mailing Address and Zip Code Committee for Alfonse M. D'Amato NY	Alfonse M. D'Amato, U.S. SENATE NY Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	12/03/97	2,000.00
E. Full Name, Mailing Address and Zip Code POSHARD FOR CONGRESS 1601 EUGENE LANE MARION, IL 62959	Voided Check-no PAC \$ Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	12/05/97	-1,000.00
F. Full Name, Mailing Address and Zip Code VAN HILLEARY FOR CONGRESS PO BOX 1136 SPRING CITY, TN 37381	Voided Check-no PAC \$ Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	12/09/97	-1,500.00
G. Full Name, Mailing Address and Zip Code FRIENDS OF ZACH WAMP 2044 MARINA COVE DRIVE HIKSON, TN 37343	Voided Check-no PAC \$ Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	12/09/97	-1,500.00
H. Full Name, Mailing Address and Zip Code Friends of Paul McCrakk	Voided Check-no longer a candidate Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	12/09/97	-1,500.00
I. Full Name, Mailing Address and Zip Code Bill McCollum for Congress 600 Thistlewood Court Longwood, FL 32779	Bill McCollum, U.S. HOUSE 8th FL Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	12/11/97	1,500.00

SUB TOTAL of Disbursements this page (Optional)

2,973.00

TOTAL this Period (Last page this line number only)

SCHEDULE B ITEMIZED DISBURSEMENTS

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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 Disb. this Period
The Terrance Group, Inc. 201 N. Union Street Suite 410 Alexandria, VA 22314	benchmark survey fees-Charlie Norwood Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	12/01/97	10,419.00
B. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year)	Amount of Each Disb. this Period
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year)	Amount of Each Disb. this Period
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year)	Amount of Each Disb. this Period
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year)	Amount of Each Disb. this Period
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year)	Amount of Each Disb. this Period
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year)	Amount of Each Disb. this Period
H. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year)	Amount of Each Disb. this Period
I. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year)	Amount of Each Disb. this Period

SUB TOTAL of Disbursements this page (Optional)	10,419.00
TOTAL this period (Last page this line number only)	10,419.00

SCHEDULE B ITEMIZED DISBURSEMENTS

See separate schedules for each category of the Detailed Summary Page

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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 Disb. this Period
Republican National Committee 310 First Street S.E. Washington, DC 20003	1st installment for 1997 membership dues (\$15,000) Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	05/12/97	5,000.00
B. Full Name, Mailing Address and Zip Code Royce Campaign Committee PO Box 6765 Fullerton, CA 92634	Purpose of Disbursement Ed Royce, U.S. HOUSE 39th CA Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	05/12/97	200.00
C. Full Name, Mailing Address and Zip Code Citizens for Rush 3361 South King Drive Chicago, IL 60616	Purpose of Disbursement Bobby L. Rush, U.S. HOUSE 1st IL Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	05/28/97	500.00
D. Full Name, Mailing Address and Zip Code Matt Salmon for Congress	Purpose of Disbursement Matt Salmon, U.S. HOUSE 1st AZ Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	05/28/97	1,250.00
E. Full Name, Mailing Address and Zip Code Max Sandlin for Congress	Purpose of Disbursement Max Sandlin, U.S. HOUSE 1st TX Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	05/12/97	1,000.00
F. Full Name, Mailing Address and Zip Code Friends of Eric Serna for Congress 1996 Warner Dr. Santa Fe, NM 87505	Purpose of Disbursement Voided Check-change in decision to contribute Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (Specify) Special Election	05/30/97	-2,000.00
G. Full Name, Mailing Address and Zip Code Stabanow for Congress	Purpose of Disbursement Voided Check-no debt Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (Specify) 1996 Debt Retirement	05/07/97	-1,000.00
H. Full Name, Mailing Address and Zip Code Friends of Dave Weldon PO Box 968 Melbourne, FL 32935	Purpose of Disbursement Dave Weldon, U.S. HOUSE 15th FL Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	05/12/97	500.00
I. Full Name, Mailing Address and Zip Code Committee for Gerald C. Jerry Weller IL	Purpose of Disbursement Gerald C. Jerry Weller, U.S. HOUSE 11th IL Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	05/21/97	500.00

SUB TOTAL of Disbursements this page (Optional)> 5,950.00

TOTAL this Period (Last page only)>

Use separate schedule(s)
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SCHEDULE B

ITEMIZED DISBURSEMENTS

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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 Disb. this Period
Committee for Jim McGovern MA	Jim McGovern, U.S. HOUSE 3rd MA Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	12/11/97	1,000.00
B. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
Committee for Thomas J. Billey VA	Thomas J. Billey, U.S. HOUSE 7th VA Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	12/11/97	750.00
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
Friends of Farr CA	Sam Farr, U.S. HOUSE 17th CA Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	12/15/97	1,000.00
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
Committee for Zoe Lofgren CA	Zoe Lofgren, U.S. HOUSE 16th CA Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	12/15/97	1,000.00
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
Boswell for Congress IA	Leonard L. Boswell, U.S. HOUSE 3rd IA Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	12/15/97	1,000.00
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
Republican National Committee 310 First Street S.E. Washington, DC 20003	1997 membership dues Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	12/15/97	15,000.00
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
Committee for Wayne T. Gilchrist MD	Voided Check-no PAC \$ Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	12/15/97	-1,000.00
H. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
Phelps for Congress 35 Dewey Road Eldorado, IL 62930	David Phelps, U.S. HOUSE 15th IL Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	12/17/97	1,500.00
I. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
Julia Carson for Congress Committee 1 North Capital Ave, Ste. 211 Indianapolis, IN 46204	Julia Carson, U.S. HOUSE 10th IN Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	12/17/97	1,000.00
SUB TOTAL of Disbursements this page (Optional)			21,250.00
TOTAL this Period (Last page this line is blank)			

