

**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)

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<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 Political Action Cmte.

Full Name (Last, First, Middle Initial)
A. **Ciro D. Rodriguez For Congress**

Mailing Address **963 W. Harding**

City **San Antonio** State **TX** Zip Code **78221**

Purpose of Disbursement
Contr.

Candidate Name
Ciro D. Rodriguez

Office Sought: House
 Senate
 President
State: **TX** District: **28**

Disbursement For: **2004**
 Primary General
Other (specify) ▼

Category/
Type

Transaction ID: **D820B**
Date of Disbursement

06 / 28 / 2004

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)
B. **Citizens For Bunning**

Mailing Address **1717 Dixie Highway
Ste 180**

City **Fort Wright** State **KY** Zip Code **41011**

Purpose of Disbursement
Contr.

Candidate Name
Jim Bunning

Office Sought: House
 Senate
 President
State: **KY** District:

Disbursement For: **2004**
 Primary General
Other (specify) ▼

Category/
Type

Transaction ID: **D817D**
Date of Disbursement

06 / 21 / 2004

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)
C. **Committee For E. Clay Shaw**

Mailing Address **2600 NE 14th Street Causeway**

City **Pompano Beach** State **FL** Zip Code **33062**

Purpose of Disbursement
Contr.

Candidate Name
Clay Shaw, Jr.

Office Sought: House
 Senate
 President
State: **FL** District: **22**

Disbursement For: **2004**
 Primary General
Other (specify) ▼

Category/
Type

Transaction ID: **D815B**
Date of Disbursement

06 / 15 / 2004

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

3500.00

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