FORM MPAC MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID 2 Total pages filed: The MPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00081990 3 COMMITTEE NAME **OFFICE USE ONLY** DentaQuest Political Action Committee Texas Date Received **ELECTRONICALLY FILED** 04/02/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 96 Worcester Street Change of Address Wellesley, MA 02481 Date Hand-delivered or Date Postmarked MS / MRS / MR **CAMPAIGN FIRST** MI **TREASURER** Receipt # Amount Mr. James NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Slotnick CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 96 Worcester St. STREET **ADDRESS** (Residence or Business) Wellesley, MA 02481 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 96 Worcester St. MAILING **ADDRESS** Change of Address Wellesley, MA 02481 AREA CODE **CAMPAIGN** PHONE NUMBER **EXTENSION TREASURER PHONE** (781) 446-6863 REPORT TYPE 10th day after campaign Monthly X Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 April 5 July 5 October 5 REPORT FILING **DEADLINE** February 5 May 5 August 5 November 5 March 5 September 5 December 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 03/26/2024 04/02/2024 **GO TO PAGE 2**

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

2 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
DentaQuest Political	Action Committee Texas		00081990)
4 COMMITTEE ACTIVITY	1. Candidates	A. Supported		
ACTIVITY	(Identify by name or, if applicable, classify by party.)			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	0. Management	A. Supported		
	Measures (Describe by date and location)	A. Supported		
	of election and nature of issue.)			
		B. Opposed		
	3. Officeholders			
	Assisted (Identify by name or, if applicable, classify by party.)			
5 CONTRIBUTION	1. TOTAL UNITEMIZE	D POLITICAL CONTRIBUTIONS (OTHER THAN		
TOTALS	PLEDGES, LOANS, CONTRIBUTIONS N	OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA		\$	2.22
	(OTHER THAN PLE	DGES, LOANS, OR GUARANTEES OF LOANS)	•	0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZE	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	2,850.10
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	F DAY \$	0.00
OUTSTANDING LOAN TOTALS	1	AMOUNT OF ALL OUTSTANDING LOANS AS OF REPORTING PERIOD	THE \$	0.00
6 AFFIDAVIT			<u> </u>	
		I swear, or affirm, under penalty of p true and correct and includes all info under Title 15, Election Code.	erjury, that the rmation require	accompanying report is d to be reported by me
		Mr. Jam	nes Slotnick	
		Signature of Ca	ampaign Treası	urer
AFFIX NOTA	RY STAMP / SEAL ABOVE			
Sworn to and subscrib	ned hefore me, by the said	,	this the	day
		which, witness my hand and seal of office.		
Signature of officer	administering oath	Printed name of officer administering oath	Title of offi	cer administering oath
Signature of officer	administering batti	. Three hame of officer duffillistering out	THE OF OH	oor administering batti

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

				3 of 5
17 CO	MMITTE	EE NAME	18 Filer ID	(Ethics Commission Filers)
Dei	ntaQue			
	HEDULE ME OF S	SUBTOTAL AMOUNT		
1.		\$		
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION)R	\$
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORAL LABOR ORGANIZATION	ATION OR	\$
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG.	ANIZATION	\$
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	!	\$
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$
9.		SCHEDULE E: LOANS		\$
10.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$ 2,850.10
11.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
12.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Contributing Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Gift/Awards/Memorials Expense Printing	Expense Travel Out of District S/Wages/Contract Labor OTHER (enter a category not listed above) complete this form.
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 1/1 Rpt: 4/5	DentaQuest Political Action Committee Texas	00081990
4	Date	Payee name	
	03/26/2024	Dentaquest LLC PAC (FEC)	
6	Amount (\$)	Payee address; City; State; Zip (Code
	\$2,850.10	96 Worcester Street	
	Expenditure from corporate funds	Wellesley, MA 02481	
8	PURPOSE	Category (See Categories listed at the top of this schedule)	(b) Description
	OF EXPENDITURE	Contributions/Donations Made By	Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee	Contribution to Federal PAC
			Continuation to rederal FAC
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office so	ought Office held

POLITICAL COMMITTEE **AFFIDAVIT OF DISSOLUTION**

FORM PAC-DR

5 of 5

COMMITTEE NAME DentaQuest Political Action Committee Texas Affidavit of Dissolution I, the undersigned campaign treasurer, do not expect the occurrence of any further reportable activity by this politic committee for this or any other campaign or election for which reporting under the Election Code is required. In understand that designating a report as a dissolution report terminates the appointment of campaign treasurer. I further understand that a political committee may not make or authorize political expenditures or accept political contributions without having an appointment of campaign treasurer on file. Mr. James Slotnick Signature of Campaign Treasurer DO NOT SIGN UNLESS POLITICAL COMMITTEE IS TO BE DISSOLVED AFFIX NOTARY STAMP / SEAL ABOVE Sworm to and subscribed before me, by the said	only if "Report Type" on page 1 is marked "Di		
Affidavit of Dissolution I, the undersigned campaign treasurer, do not expect the occurrence of any further reportable activity by this politic committee for this or any other campaign or election for which reporting under the Election Code is required declare that all of the information required to be reported by me has been reported. I understand that designating a report as a dissolution report terminates the appointment of campaign treasurer. I further understand that a politica committee may not make or authorize political expenditures or accept political contributions without having an appointment of campaign treasurer on file. Mr. James Slotnick Signature of Campaign Treasurer DO NOT SIGN UNLESS POLITICAL COMMITTEE IS TO BE DISSOLVED AFFIX NOTARY STAMP / SEAL ABOVE Swom to and subscribed before me, by the said	COMMITTEE NAME		2 Filer ID (Ethics Commission Filers)
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AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said, this the day of, to certify which, witness my hand and seal of office.	committee for this or any other campaign or elect declare that all of the information required to be r report as a dissolution report terminates the appo committee may not make or authorize political ex	tion for which reporting under the reported by me has been report bintment of campaign treasurer	ne Election Code is required. I ed. I understand that designating a I further understand that a political
AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said, this the day of			
AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said		Signature o	f Campaign Treasurer
AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said			
Sworn to and subscribed before me, by the said, this the day of		DO NOT SIGN UNLESS POLITI	CAL COMMITTEE IS TO BE DISSOLVED
Sworn to and subscribed before me, by the said, this the day of			
20, to certify which, witness my hand and seal of office.	AFFIX NOTARY STAMP / SEAL ABOVE		
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath			is the day of ,
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath			
	Signature of officer administering oath Printed r	name of officer administering oath	Title of officer administering oath