#### 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) 00015960 3 COMMITTEE NAME **OFFICE USE ONLY** Texas Dental Association Political Action Committee Date Received **ELECTRONICALLY FILED** 08/01/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 1946 S IH35 Ste 400 Change of Address Austin, TX 78704-3644 Date Hand-delivered or Date Postmarked MS / MRS / MR **CAMPAIGN FIRST** MI **TREASURER** Receipt # Amount Dr. Daniel NAME Date Processed **NICKNAME SUFFIX** LAST O'Dell Date Imaged CAMPAIGN APT / SUITE #; STREET ADDRESS (NO PO BOX PLEASE); CITY; STATE; ZIP CODE TREASURER 1946 S IH35 Ste 400 STREET **ADDRESS** (Residence or Business) Austin, TX 78704-3644 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 1946 S IH35 Ste 400 MAILING **ADDRESS** Change of Address Austin, TX 78704-3644 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (512) 443-3675 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 April 5 July 5 October 5 REPORT FILING **DEADLINE** February 5 May 5 X August 5 November 5 September 5 December 5 March 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 06/26/2024 07/25/2024

## MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

## FORM MPAC COVER SHEET PG 2

L2 COMMITTEE NAME			1	13 Filer ID	(Ethics Commission Filers)
Texas Dental Associa	ation Political Action Com	mittee •		00015960	
.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			
	2. Measures	A. Supported			
	(Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted				
	(Identify by name or, if applicable, classify by party.)				
L5 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTRIBUT OR GUARANTEES OF LO IADE ELECTRONICALLY) qualifies for the higher itemiza	OANS, OR	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUAR	ANTEES OF LOANS)	\$	15,718.97
EXPENDITURE TOTALS	3. TOTAL UNITEMIZEI	D POLITICAL EXPENDITU	RES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES		\$	0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTIN	CONTRIBUTIONS MAINTA G PERIOD	AINED AS OF THE LAST [	DAY \$	1,961,943.89
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTA	ANDING LOANS AS OF T	HE \$	0.00
.6 AFFIDAVIT				<u> </u>	
		true and cor	affirm, under penalty of per rect and includes all inform 15, Election Code.	jury, that the a	accompanying report is d to be reported by me
			Dr. Dani	el O'Dell	
			Signature of Can		urer
AFFIX NOTAI	RY STAMP / SEAL ABOVE		3	,	
Sworn to and subscrib	ed before me, by the said _		th	is the	day
					uay
0			u 000. 0. 000.		
Signature of officer	administering oath	Printed name of officer ad	ministering oath	Title of offic	cer administering oath
Signature of officer	auministening Uatin	r miteu name oi oilitel au	ministering odtil	THE OF OHIO	ser auministering Odin

### **SUBTOTALS - MPAC**

#### FORM MPAC **COVER SHEET PG 3**

					3 of 12	
<b>17</b> CO	MMITTE	EE NAME	18 Filer ID	(Ethics Comn	nission Filers)	
Tex	kas Dei	ntal Association Political Action Committee	00015960			
19 SC	HEDULE	SUBTOTALS				
l		SCHEDULE		SUBTOTAL AMOUNT		
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	2,146.67	
					,	
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS				
۷.	Ш	SCHEDOLE AZ. NON-MONETART (IN-RIND) FOLTICAL CONTRIBOTIONS		\$		
3.	Ш	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$		
4.	П	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	R	\$		
5.	П	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA	TION OR	\$		
	Ш	LABOR ORGANIZATION		Ψ		
6.	Ш	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG.	ANIZATION	\$		
7.	X	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$	13,572.30	
8.	П	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (	ORGANIZATION	\$		
"	Ш			ا		
		SCHEDULE E: LOANS				
9.	Ш	\$				
10.		SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$		
11.	П	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$		
	<u> </u>			Ť		
12.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONE			
12.	Ш	SCHEDOLE F3. FORCHASE OF INVESTMENTS FROM FOLITICAL CONTRIBUTION	JNS	\$		
13.	Ш	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$		
-						
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$		
				ļ ·		
15.	X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS IT TO FILER	RETURNED	\$	128.11	
10.			*	120.11		
l						
ı						

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 1/7 Rpt: 4/12	
2	FILER NAME Texas Denta	I Association Political Action Committee		3	Filer ID (Ethics Commission 00015960	n Filers)
4	Date 07/19/2024	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$1.11
8	Principal occu	Houston, TX 77025-1057	D Employer (See Instructions	.)		
0	Dentist	pation / Job title (See Instructions)	9 Employer (See Instructions	')		
	Date 07/19/2024	Full name of contributor  out-of-state PAC (ID#: Chan, Stephen (Dr.)  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$64.33
	Principal occu	Flower Mound, TX 75028-1300 pation / Job title (See Instructions)	Employer (See Instructions	) 		
	Dentist	oution / Job title (See manuellons)	Employer (See manuchons	')		
	Date 07/19/2024	Full name of contributor out-of-state PAC (ID#:Chong, Sonia (Dr.)  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$1.04
		Socorro, TX 79927-3536				
	Principal occu Dentist	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 07/11/2024	Full name of contributor out-of-state PAC (ID#:_Clitheroe, R. Lee (Dr.)  Contributor address; City; State; Zip Code  Sugar Land, TX 77478-5358			Amount of Contribution (\$)	\$120.00
	Principal occu Dentist	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 07/11/2024	Full name of contributor out-of-state PAC (ID#:_Cooley, Ralph A. (Dr.)  Contributor address; City; State; Zip Code  Houston, TX 77054			Amount of Contribution (\$)	\$120.00
	Principal occu Dentist	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL COI	NTRIBUTION	S 		SCHEDUL	E A1
	The Instru	ction Guide explains how to	complete this forn	n.	1	Total pages Schedule A1: Sch: 2/7 Rpt: 5/12	
2	FILER NAME Texas Denta	I Association Political Action Com	mittee		3	Filer ID (Ethics Commission 00015960	n Filers)
4	Date 07/11/2024	<ul> <li>Full name of contributor</li></ul>	out-of-state PAC (ID#: Zip Code		7	Amount of Contribution (\$)	\$25.00
		Prosper, TX 75078-7611					
8	Principal occu Dentist	pation / Job title (See Instructions)	9	Employer (See Instructions	i)		
	Date 07/19/2024	Full name of contributor	out-of-state PAC (ID#: Zip Code	)		Amount of Contribution (\$)	\$25.32
	Principal occu	Dallas, TX 75214-4445 pation / Job title (See Instructions)		Employer (See Instructions	) 		
	Dentist	salon, cos uno (coe monaciono)		zmployer (eee meadoaene	,		
	Date 07/11/2024	Full name of contributor	out-of-state PAC (ID#:  Zip Code	)		Amount of Contribution (\$)	\$50.00
		San Antonio, TX 78217-4659					
	Principal occu Dentist	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 07/11/2024	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$15.00
	Principal occu Dentist	pation / Job title (See Instructions)		Employer (See Instructions	)		
	Date 07/11/2024	Hill, Ron (Dr.)	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$120.00
	Principal occu Dentist	pation / Job title (See Instructions)		Employer (See Instructions	)		
			<u> </u>				

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 3/7 Rpt: 6/12	
2	FILER NAME Texas Denta	l Association Political Action Committee		3	Filer ID (Ethics Commission 00015960	n Filers)
4	Date 07/11/2024	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_ Ho, Duc (Dr.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$187.10
_	Deignaignal	Katy, TX 77494	O Frankrija (Casa krativijationa			
8	Dentist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 07/11/2024	Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$50.00
	Principal occu	Austin, TX 78749-6522  pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Dentist	,				
	Date 07/11/2024	Full name of contributor	)		Amount of Contribution (\$)	\$50.00
		Austin, TX 78738-5530				
	Principal occu Dentist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/11/2024	Full name of contributor out-of-state PAC (ID#:_Lee, Ronald (Dr.)  Contributor address; City; State; Zip Code  Colleyville, TX 76034-5905			Amount of Contribution (\$)	\$187.10
	Principal occu Dentist	pation / Job title (See Instructions)	Employer (See Instructions	()		
	Date 07/11/2024	Full name of contributor out-of-state PAC (ID#:_ Masters, Lisa B. (Dr.)  Contributor address; City; State; Zip Code  San Antonio, TX 78216-4361	)		Amount of Contribution (\$)	\$120.00
	Principal occu Dentist	pation / Job title (See Instructions)	Employer (See Instructions	()		
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	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 4/7 Rpt: 7/12	
2	FILER NAME Texas Denta	Association Political Action Committee		3	Filer ID (Ethics Commission 00015960	n Filers)
4	Date 07/11/2024	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$10.00
_	Dringing Lagor	San Antonio, TX 78252	O Francis or (Coo la structiona	_		
8	Dentist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 07/11/2024	Full name of contributor out-of-state PAC (ID#: Morse, Scott (Dr.)  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$187.10
	Dringinal occur	Arlington, TX 76013 pation / Job title (See Instructions)	Employer (See Instructions			
	Dentist Decid	Jation / Job title (See Instructions)	Employer (See instructions	')		
	Date 07/19/2024	Full name of contributor out-of-state PAC (ID#: Nelson, Jiman (Dr.)  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$50.00
		Houston, TX 77045-4651				
	Principal occu Dentist	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 07/10/2024	Full name of contributor out-of-state PAC (ID#: Niebla, Armando A. (Dr.)  Contributor address; City; State; Zip Code  San Antonio, TX 78228-5500	)		Amount of Contribution (\$)	\$10.00
	Principal occu Dentist	oation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 07/11/2024	Full name of contributor out-of-state PAC (ID#:_ Owen, Glenda (Dr.)  Contributor address; City; State; Zip Code  Houston, TX 77007-2286	)		Amount of Contribution (\$)	\$85.00
	Principal occu Dentist	oation / Job title (See Instructions)	Employer (See Instructions	()		
		,				

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 5/7 Rpt: 8/12	
2	FILER NAME Texas Denta	l Association Political Action Committee		3	Filer ID (Ethics Commission 00015960	n Filers)
4	Date 07/11/2024	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_Parker, C Steve (Dr.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$25.00
_	Dringing Loon	Austin, TX 78752-3733	O Employer (Coo Instructions			
8	Dentist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 07/19/2024	Full name of contributor out-of-state PAC (ID#:_ Peng, Cong (Dr.)  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$16.06
	Principal occu	Pearland, TX 77584-8725 pation / Job title (See Instructions)	Employer (See Instructions			
	Dentist	oalion / Job title (See matractions)	Employer (See Instructions	')		
	Date 07/11/2024	Full name of contributor out-of-state PAC (ID#: Potter, Richard (Dr.)  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$120.00
	Principal occu	Helotes, TX 78023-4522 pation / Job title (See Instructions)	Employer (See Instructions			
	Dentist	sation, con the (occ mandellons)	Employer (See mondenons	')		
	Date 07/11/2024	Full name of contributor out-of-state PAC (ID#:_Purdy, John (Dr.)  Contributor address; City; State; Zip Code  El Paso, TX 79925-6793			Amount of Contribution (\$)	\$187.10
	Principal occu Dentist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/19/2024	Full name of contributor out-of-state PAC (ID#:_Rader, Charles (Dr.)  Contributor address; City; State; Zip Code  Victoria, TX 77901-5261			Amount of Contribution (\$)	\$0.74
	Principal occu Dentist	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIE	BUTION	IS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complet	e this for	m.	1	Total pages Schedule A1: Sch: 6/7 Rpt: 9/12	
2	FILER NAME Texas Denta	Association Political Action Committee			3	Filer ID (Ethics Commission 00015960	n Filers)
4	Date 07/11/2024	<ul> <li>Full name of contributor  out-of-state Rainwater, Michael Andrew (Dr.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>	PAC (ID#:	)	7	Amount of Contribution (\$)	\$10.00
_	Dringing age	Dallas, TX 75205		Employer (See Instructions	<u></u>		
8	Dentist Dentist	pation / Job title (See Instructions)	9	Employer (See Instructions	·)		
	Date 07/10/2024	Rashall, Gregory (Dr.)	PAC (ID#:	)		Amount of Contribution (\$)	\$120.00
	Dringing aggr	Liberty, TX 77575		Employer (See Instructions	·/		
	Dentist	pation / Job title (See Instructions)		Employer (See Instructions	)		
	Date 07/19/2024	Full name of contributor out-of-state Ricci, Shane (Dr.)  Contributor address; City; State; Zip Code	PAC (ID#:	)		Amount of Contribution (\$)	\$19.67
		Prosper, TX 75078-8467					
	Principal occu Dentist	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 07/11/2024	Full name of contributor out-of-state of Schott, Laura (Dr.)  Contributor address; City; State; Zip Code  Cypress, TX 77433	`			Amount of Contribution (\$)	\$50.00
	Principal occu Dentist	pation / Job title (See Instructions)		Employer (See Instructions	<u>(</u>		
	Date 07/11/2024	Full name of contributor out-of-state in Sperry, Stephen (Dr.)  Contributor address; City; State; Zip Code  Lubbock, TX 79423	PAC (ID#:			Amount of Contribution (\$)	\$50.00
	Principal occu Dentist	oation / Job title (See Instructions)		Employer (See Instructions	5)		
			, , , , , , , , , , , , , , , , , , ,				

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 7/7 Rpt: 10/12	
2	FILER NAME Texas Denta	al Association Political Action Committee		3	Filer ID (Ethics Commission 00015960	n Filers)
4	Date 07/11/2024	5 Full name of contributor out-of-state PAC (ID#: Stuchlik, Katie (Dr.)  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$10.00
8	Principal occu	Katy, TX 77494 pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 07/11/2024	Full name of contributor out-of-state PAC (ID#:_ Wendt, Lindsey Luann (Dr.)  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$10.00
	Principal occu	Houston, TX 77018 pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/10/2024	Full name of contributor out-of-state PAC (ID#:_ Westerberg, Matthew (Dr.)  Contributor address; City; State; Zip Code  San Antonio, TX 78209-6061	)		Amount of Contribution (\$)	\$50.00
	Principal occu Dentist	pation / Job title (See Instructions)	Employer (See Instructions	<u>(</u>		

# NON-MONETARY SUPPORT FROM CORPORATION SCHEDULE C4 **OR LABOR ORGANIZATION** 1 Total pages Schedule C4: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 11/12 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Texas Dental Association Political Action Committee 00015960 Date 5 Corporation / Labor Organization name 6 Amount (\$) 07/01/2024 **Texas Dental Association** 13,572.30

## INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 12/12 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Texas Dental Association Political Action Committee 00015960 8 Amount (\$) Date 5 Name of person from whom amount is received 07/01/2024 \$128.11 Frost Bank 6 Address of person from whom amount is received; City; State; Zip Code Austin, TX 78767 Purpose for which amount is received Check if political contribution returned to filer Interest