09/19/2002 12 : 23

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) — **USE FEC MAILING LABEL OR TYPE OR PRINT** ▼ — Example: If typing, type over the lines

American Academy of Ophthalmology. Inc Political Committee (OPHTHPAC)

ADDRESS (number and street) ▼ 655 Beach Street

Check if different than previously reported. (ACC)

CITY ▲	STATE ▲	ZIPCODE ▲
San Francisco	CA	94109 –

2. **FEC IDENTIFICATION NUMBER** ▼ C00196246

3. IS THIS REPORT — X NEW (N) **OR** AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report(Q1)
- July 15 Quarterly Report(Q2)
- October 15 Quarterly Report(Q3)
- January 31 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2)	May 20 (M5)	Aug 20 (M8)		Nov 20 (M11) (Non-Election Year Only)
Mar 20 (M3)	Jun 20 (M6)	X Sep 20 (M9)		Dec 20 (M12) (Non-Election Year Only)
Apr 20 (M4)	Jul 20 (M7)	Oct 20 (M10)		Jan 31 (M13)

(c) 12-Day **PRE**-Election Report for the: Primary (12P) — Convention (12C) — General (12G) — Special (12G) — Runoff (12R)

Election on ____ in the State of ____

(d) 30-Day **P**ost -Election Report for the: General (30G) — Runoff (30R) — Special (30S)

Election on ____ in the State of ____

5. Covering Period 08 01 2002 through 08 31 2002

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer: Steve Rausch

Signature of Treasurer: Electronically Filed by Steve Rausch — Date 09 18 2002

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only			

FEC FORM 3X
(Revised 1/2001)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC **Form 3X** (Revised 1/2001)

Write or Type Committee Name
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

Report Covering the Period: From: 08 01 2002 To: 08 31 2002

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1 2002		225560.32
	(b) Cash on Hand at Begining of Reporting Period	185515.92	
	(c) Total Receipts (from Line 19)	75617.44	425767.93
	(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	261133.36	651328.25
7.	Total Disbursements (from Line 30)	36789.72	426984.61
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	224343.64	224343.64
9.	Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations owed **BY** the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

CA

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
OF RECEIPTS

Write or Type Committee Name

American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

Report Covering the Period: From: 08 01 2002 To: 08 31 2002

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	60275.00	
(ii) Unitemized	15298.61	
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	75573.61	425237.06
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 32, page 4) ▶	75573.61	425237.06
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 36, page 4)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts Dividends, Interest, etc.)	43.83	530.87
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18) ▶	75617.44	425767.93
20. Total Federal Receipts (subtract Line 18 from Line 19) ▶	75617.44	425767.93

DETAILED SUMMARY PAGE
of Disbursements

FEC **Form 3X** (Revised 1/2001)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	1289.72	62457.93
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)) ▶	1289.72	62457.93
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	35000.00	363026.68
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26. Loan Repayments Made	0.00	0.00
27. Loans Made	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	500.00	1500.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) ▶	500.00	1500.00
29. Other Disbursements	0.00	0.00
30. Total Disbursements (add Lines 21(c), 22, 23,24,25,26,27,28(d),and 29) ▶	36789.72	426984.61
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30) ▶	36789.72	426984.61
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) from Line 11(d), page 3)	75573.61	425237.06
33. Total Contribution Refunds (from Line 28(d))	500.00	1500.00
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)	75073.61	423737.06
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	1289.72	62457.93
36. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
37. Net Operating Expenditures (subtract Line 36 from Line 35) ▶	1289.72	62457.93

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5 / 64
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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 committee.

NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial)
William Aden
Mailing Address
1421 N State St
City | State | Zip Code
Jackson | MS | 39202-1641
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 08 20 2002
Amount of Each Receipt this Period: 1000.00
Receipt
Transaction ID: 0918200230C408212

B. Full Name (Last, First, Middle Initial)
William Argus
Mailing Address
7030 Pointe Inverness Way Ste 240
City | State | Zip Code
Fort Wayne | IN | 46804-7930
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 365.00

Date of Receipt: 08 08 2002
Amount of Each Receipt this Period: 365.00
Receipt
Transaction ID: 0819200213C405776

C. Full Name (Last, First, Middle Initial)
Robert Bahr
Mailing Address
150 E Manning St
City | State | Zip Code
Providence | RI | 02906-5131
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 08 15 2002
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 0819200023C4077410

SUBTOTAL of Receipts This Page (optional) ▶ **1665.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 64
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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial)
Robert Baker
Mailing Address
Baker Eye Clinic
111 W Broadway Ave
City | State | Zip Code
Broken Arrow | OK | 74012-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 182.50

Date of Receipt: 08 15 2002
Amount of Each Receipt this Period: 91.25
Receipt
Transaction ID: 081920023C4075312

B. Full Name (Last, First, Middle Initial)
Robert Baker
Mailing Address
Baker Eye Clinic
111 W Broadway Ave
City | State | Zip Code
Broken Arrow | OK | 74012-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 273.75

Date of Receipt: 08 19 2002
Amount of Each Receipt this Period: 91.25
Receipt
Transaction ID: 081920024BC4079013

C. Full Name (Last, First, Middle Initial)
Brock Bakewell
Mailing Address
Fishkind/Bakewell Eye & Surg Ctr
5599 North Oracle Rd
City | State | Zip Code
Tucson | AZ | 85704-3821
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 365.00

Date of Receipt: 08 15 2002
Amount of Each Receipt this Period: 365.00
Receipt
Transaction ID: 0819200213C4073514

SUBTOTAL of Receipts This Page (optional) ▶ **547.50**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial)
Charles Barr

Mailing Address
Dept Ophth/Univ Louisville 301 E Muhammad Ali Blvd

City State Zip Code
Louisville KY 40202-1594

FEC ID number of contributing federal political committee.

Name of Employer
self

Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
365.00

Date of Receipt
08 15 2002

Amount of Each Receipt this Period
365.00

Receipt

Transaction ID: 08192002 3C4075816

B. Full Name (Last, First, Middle Initial)
A Jan Berlin

Mailing Address
PO Box 511

City State Zip Code
South Freeport ME 04078-0511

FEC ID number of contributing federal political committee.

Name of Employer
self

Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
08 02 2002

Amount of Each Receipt this Period
250.00

Receipt

Transaction ID: 08192002 13C4055718

C. Full Name (Last, First, Middle Initial)
Donald Bollheimer

Mailing Address
7750 W Jefferson Blvd

City State Zip Code
Fort Wayne IN 46804-4136

FEC ID number of contributing federal political committee.

Name of Employer
self

Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
08 15 2002

Amount of Each Receipt this Period
500.00

Receipt

Transaction ID: 08192002 13C4073625

SUBTOTAL of Receipts This Page (optional) ▶ **1115.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial)
Ayman Boutros

Mailing Address
14 Pidgeon Hill Dr | Ste 270

City | State | Zip Code
Sterling | VA | 20165-6155

FEC ID number of contributing federal political committee.

Name of Employer
self

Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
365.00

Date of Receipt
08 15 2002

Amount of Each Receipt this Period
365.00

Receipt

Transaction ID: 0819200213C4064128

B. Full Name (Last, First, Middle Initial)
Darin Bowers

Mailing Address
2402 Atherholt Rd

City | State | Zip Code
Lynchburg | VA | 24501-2148

FEC ID number of contributing federal political committee.

Name of Employer
self

Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
08 21 2002

Amount of Each Receipt this Period
400.00

Receipt

Transaction ID: 0818200230C4086329

C. Full Name (Last, First, Middle Initial)
David Boyer

Mailing Address
1127 Wilshire Blvd | Ste 1620

City | State | Zip Code
Los Angeles | CA | 90017-1916

FEC ID number of contributing federal political committee.

Name of Employer
self

Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
08 15 2002

Amount of Each Receipt this Period
1000.00

Receipt

Transaction ID: 0819200230C4075931

SUBTOTAL of Receipts This Page (optional) ▶ **1765.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial)
William Brayner
Mailing Address
610 Brunson Dr
City | State | Zip Code
Tupelo | MS | 38801-4997
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 08 20 2002
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 0918200230C4081832

B. Full Name (Last, First, Middle Initial)
David Bryan
Mailing Address
8001 Youree Dr | Ste 800
City | State | Zip Code
Shreveport | LA | 71115-2302
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 365.00

Date of Receipt: 08 15 2002
Amount of Each Receipt this Period: 365.00
Receipt
Transaction ID: 0819200213C4073835

C. Full Name (Last, First, Middle Initial)
Claude Burgoyne
Mailing Address
LSU Eye Center | 2020 Gravier St Ste B
City | State | Zip Code
New Orleans | LA | 70112-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 08 13 2002
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 0819200213C4056338

SUBTOTAL of Receipts This Page (optional) ▶ **1165.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial)
William Randy Burks
Mailing Address
5800 Colonial Dr
City | State | Zip Code
Pompano Beach | FL | 33063-5682
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 08 15 2002
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 0819200023C4076039

B. Full Name (Last, First, Middle Initial)
Michael Callahan
Mailing Address
700 18th St S
City | State | Zip Code
Birmingham | AL | 35233-3802
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 08 15 2002
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 0819200213C4061140

C. Full Name (Last, First, Middle Initial)
David Campbell
Mailing Address
Sarasota Ophth Assoc 1921 Waldemere St Ste 405
City | State | Zip Code
Sarasota | FL | 34239-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 375.00

Date of Receipt: 08 02 2002
Amount of Each Receipt this Period: 125.00
Receipt
Transaction ID: 0819200213C4056041

SUBTOTAL of Receipts This Page (optional) ▶ **875.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial)
Michael Carroll
Mailing Address
3560 W 95th St
City | State | Zip Code
Evergreen Park | IL | 60805-2107
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 08 15 2002
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 0819200213C4062343

B. Full Name (Last, First, Middle Initial)
Jimmy Carter
Mailing Address
1806 Fairview Ave
City | State | Zip Code
Dothan | AL | 36301-3026
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 08 15 2002
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 0819200213C4060145

C. Full Name (Last, First, Middle Initial)
Philip Chen
Mailing Address
UNIV WA DEPT OF OPHTH | Box 356485
City | State | Zip Code
Seattle | WA | 98195-0001
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 08 27 2002
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 0816200230C4092948

SUBTOTAL of Receipts This Page (optional) ▶ **1250.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 64
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A.
Full Name (Last, First, Middle Initial)
David Coats
Mailing Address
1102 Bates Ave MC 3-2700
City State Zip Code
Houston TX 77030-2600
FEC ID number of contributing federal political committee.
Name of Employer
self
Occupation
Ophthalmologist
Receipt For:
Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼
300.00
Date of Receipt
08 15 2002
Amount of Each Receipt this Period
300.00
Receipt
Transaction ID: 032320017C3552052

B.
Full Name (Last, First, Middle Initial)
David Coats
Mailing Address
1102 Bates Ave MC 3-2700
City State Zip Code
Houston TX 77030-2600
FEC ID number of contributing federal political committee.
Name of Employer
self
Occupation
Ophthalmologist
Receipt For:
Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼
600.00
Date of Receipt
08 26 2002
Amount of Each Receipt this Period
300.00
Receipt
Transaction ID: 0918200023DC4088953

C.
Full Name (Last, First, Middle Initial)
Gary Cowen
Mailing Address
1350 S Main St
City State Zip Code
Fort Worth TX 76104-7869
FEC ID number of contributing federal political committee.
Name of Employer
self
Occupation
Ophthalmologist
Receipt For:
Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼
1000.00
Date of Receipt
08 02 2002
Amount of Each Receipt this Period
250.00
Receipt
Transaction ID: 0819200213C4054857

SUBTOTAL of Receipts This Page (optional) ▶ **850.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 64
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial)
Michael Crawford
Mailing Address
340 Gracewood Dr SE
City | State | Zip Code
Grand Rapids | MI | 49506-2072

FEC ID number of contributing federal political committee.

Name of Employer
self
Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
08 15 2002

Amount of Each Receipt this Period
500.00

Receipt

Transaction ID: 0819200213C4062958

B. Full Name (Last, First, Middle Initial)
Charles Barry Dobbs
Mailing Address
311 Lakepoint Dr
City | State | Zip Code
Gadsden | AL | 35901-5385

FEC ID number of contributing federal political committee.

Name of Employer
self
Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
08 26 2002

Amount of Each Receipt this Period
1000.00

Receipt

Transaction ID: 0818200230C4111162

C. Full Name (Last, First, Middle Initial)
Bill Davenport
Mailing Address
2090 SE Ocean Blvd
City | State | Zip Code
Stuart | FL | 34996-3366

FEC ID number of contributing federal political committee.

Name of Employer
self
Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
365.00

Date of Receipt
08 02 2002

Amount of Each Receipt this Period
365.00

Receipt

Transaction ID: 0819200213C4057163

SUBTOTAL of Receipts This Page (optional) ▶ **1865.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A.
Full Name (Last, First, Middle Initial)
William Degenhart
Mailing Address
PO Box 13707
City | State | Zip Code
Savannah | GA | 31416-0707
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 08 27 2002
Amount of Each Receipt this Period: 1000.00
Receipt
Transaction ID: 0918200230C4080664

B.
Full Name (Last, First, Middle Initial)
Francis Depenbusch
Mailing Address
1708 E 23rd Ave
City | State | Zip Code
Hutchinson | KS | 67502-1199
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 08 15 2002
Amount of Each Receipt this Period: 135.00
Receipt
Transaction ID: 0819200213C4080466

C.
Full Name (Last, First, Middle Initial)
Francis Depenbusch
Mailing Address
1708 E 23rd Ave
City | State | Zip Code
Hutchinson | KS | 67502-1199
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 635.00
Date of Receipt: 08 27 2002
Amount of Each Receipt this Period: 135.00
Receipt
Transaction ID: 0918200230C4080567

SUBTOTAL of Receipts This Page (optional) ▶ **1270.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial)
Ranjit Dhaliwal
Mailing Address
The Retina Eye Ctr 3520 Walton Way Ext Ste 2A
City State Zip Code
Augusta GA 30909-6505
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 08 15 2002
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 081920023C4077168

B. Full Name (Last, First, Middle Initial)
Alberto Diaz-Saldana
Mailing Address
3129 College St
City State Zip Code
Beaumont TX 77701-4682
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 08 15 2002
Amount of Each Receipt this Period: 1000.00
Receipt
Transaction ID: 081920023C4076289

C. Full Name (Last, First, Middle Initial)
Robert Dibble
Mailing Address
1120 Main St
City State Zip Code
Willimantic CT 06226-2014
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 365.00
Date of Receipt: 08 27 2002
Amount of Each Receipt this Period: 365.00
Receipt
Transaction ID: 081620023DC4089870

SUBTOTAL of Receipts This Page (optional) ▶ **1865.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial)
Margaret Digaetano

Mailing Address
Suite A | 162D Mason Avenue

City | State | Zip Code
Daytona Beach | FL | 32117-

FEC ID number of contributing federal political committee.

Name of Employer
self

Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
08 19 2002

Amount of Each Receipt this Period
300.00

Receipt

Transaction ID: 0819200020C4080271

B. Full Name (Last, First, Middle Initial)
Eric Donnenfeld

Mailing Address
2000 N Village Ave

City | State | Zip Code
Rockville Centre | NY | 11570-1001

FEC ID number of contributing federal political committee.

Name of Employer
self

Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
08 29 2002

Amount of Each Receipt this Period
400.00

Receipt

Transaction ID: 0918200023DC4083772

C. Full Name (Last, First, Middle Initial)
Alan Dorfman

Mailing Address
510 West Ave | PO Box 2099

City | State | Zip Code
Jenkintown | PA | 19046-2725

FEC ID number of contributing federal political committee.

Name of Employer
self

Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
08 15 2002

Amount of Each Receipt this Period
500.00

Receipt

Transaction ID: 0819200213C4061073

SUBTOTAL of Receipts This Page (optional) ▶ **1200.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial)
David Edwards

Mailing Address
Ste C1 15525 Pomerado Rd

City | State | Zip Code
Poway | CA | 92064-2425

FEC ID number of contributing federal political committee.

Name of Employer
self

Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
08 15 2002

Amount of Each Receipt this Period
300.00

Receipt

Transaction ID: 0819200213C4062775

B. Full Name (Last, First, Middle Initial)
Richard Eggleston

Mailing Address
500 Port Dr

City | State | Zip Code
Clarkston | WA | 99403-1835

FEC ID number of contributing federal political committee.

Name of Employer
self

Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
08 15 2002

Amount of Each Receipt this Period
250.00

Receipt

Transaction ID: 0819200213C4063176

C. Full Name (Last, First, Middle Initial)
Katherine Erlichman

Mailing Address
311 Hospital Dr

City | State | Zip Code
Everett | PA | 15537-7022

FEC ID number of contributing federal political committee.

Name of Employer
self

Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
08 15 2002

Amount of Each Receipt this Period
500.00

Receipt

Transaction ID: 0819200213C4063079

SUBTOTAL of Receipts This Page (optional) ▶ **1050.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A.
Full Name (Last, First, Middle Initial)
Thomas Essman
Mailing Address
1645 E Meadowmere St
City | State | Zip Code
Springfield | MO | 65804-0221
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 365.00

Date of Receipt: 08 26 2002
Amount of Each Receipt this Period: 365.00
Receipt
Transaction ID: 0918200230C4088080

B.
Full Name (Last, First, Middle Initial)
Stuart Fine
Mailing Address
Scheie Eye Institute 51 N 39th St
City | State | Zip Code
Philadelphia | PA | 19104-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 08 27 2002
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 0918200230C4083381

C.
Full Name (Last, First, Middle Initial)
Neil Finnen
Mailing Address
Mid-South Retina Assoc LLC 609 Skyline Dr
City | State | Zip Code
Jackson | TN | 38301-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 08 15 2002
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 0819200213C4065182

SUBTOTAL of Receipts This Page (optional) ▶ **1115.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial)
Ronald Foltz
Mailing Address
1000 Fowler Way
City | State | Zip Code
Placerville | CA | 95667-5738
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 365.00

Date of Receipt: 08 15 2002
Amount of Each Receipt this Period: 365.00
Receipt
Transaction ID: 0819200213C4068885

B. Full Name (Last, First, Middle Initial)
Jerry Ford
Mailing Address
Eye Associates of Tallahassee 2819 Capital Medical Blvd
City | State | Zip Code
Tallahassee | FL | 32308-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 365.00

Date of Receipt: 08 19 2002
Amount of Each Receipt this Period: 365.00
Receipt
Transaction ID: 0819200020C4080386

C. Full Name (Last, First, Middle Initial)
Lawrence Keith Fox
Mailing Address
22 Green St
City | State | Zip Code
Poughkeepsie | NY | 12601-1346
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 08 26 2002
Amount of Each Receipt this Period: 1000.00
Receipt
Transaction ID: 0816200230C4089287

SUBTOTAL of Receipts This Page (optional) ▶ **1730.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial)
Leslie Fox
Mailing Address
1703 S Meridian | Ste 101
City | State | Zip Code
Puyallup | WA | 98371-7590
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 08 15 2002
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 032320017C2787588

B. Full Name (Last, First, Middle Initial)
Richard Fuller
Mailing Address
Perry Eye Clinic | 3545 Lincoln Way E
City | State | Zip Code
Massillon | OH | 44646-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 365.00
Date of Receipt: 08 15 2002
Amount of Each Receipt this Period: 265.00
Receipt
Transaction ID: 0819200213C4062892

C. Full Name (Last, First, Middle Initial)
David Gajda
Mailing Address
Eye Care Clinic | 6252 Yellowstone Road
City | State | Zip Code
Cheyenne | WY | 82009-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 08 19 2002
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 081920020C4081094

SUBTOTAL of Receipts This Page (optional) ▶ **815.00**

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

SCHEDULE A (FEC Form 3X)
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial)
Manuel Garnton
Mailing Address
PO Box 965
City | State | Zip Code
Aguadilla | PR | 00605-0965
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 08 19 2002
Amount of Each Receipt this Period: 125.00
Receipt
Transaction ID: 081920020C4080996

B. Full Name (Last, First, Middle Initial)
Robert Gerald
Mailing Address
7308 Fleming Ave
City | State | Zip Code
Amarillo | TX | 79106-1829
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 08 15 2002
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 081920021 3C4080998

C. Full Name (Last, First, Middle Initial)
Howard Gilbert
Mailing Address
710 E 24th St
City | State | Zip Code
Minneapolis | MN | 55404-3846
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 150.00
Date of Receipt: 08 15 2002
Amount of Each Receipt this Period: 150.00
Receipt
Transaction ID: 081920023C407B399

SUBTOTAL of Receipts This Page (optional) ▶ **575.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A.
Full Name (Last, First, Middle Initial)
Howard Gilbert
Mailing Address
710 E 24th St
City | State | Zip Code
Minneapolis | MN | 55404-3846
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 08 30 2002
Amount of Each Receipt this Period: 150.00
Receipt
Transaction ID: 0918200230C40946100

B.
Full Name (Last, First, Middle Initial)
Mark Gildenhar
Mailing Address
1703 S Meridian
City | State | Zip Code
Puyallup | WA | 98371-7590
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 08 15 2002
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 0819200213C40884101

C.
Full Name (Last, First, Middle Initial)
Robert Gillam
Mailing Address
107 James Coleman Dr
City | State | Zip Code
Victoria | TX | 77904-3100
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 365.00
Date of Receipt: 08 27 2002
Amount of Each Receipt this Period: 365.00
Receipt
Transaction ID: 0916200230C40901102

SUBTOTAL of Receipts This Page (optional) ▶ **815.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial)
William Gillum
Mailing Address
1519 E 8th St
City | State | Zip Code
Weslaco | TX | 78596-6694
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 08 15 2002
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 08192002I3C40592103

B. Full Name (Last, First, Middle Initial)
Ronald Glatzer
Mailing Address
5801 N Dixie Hwy Ste 307
City | State | Zip Code
Fort Lauderdale | FL | 33334-4148
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 600.00
Date of Receipt: 08 15 2002
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 08192002I3C40677106

C. Full Name (Last, First, Middle Initial)
Paul Goldstein
Mailing Address
2801 W Kinnickinnic River Pkwy
City | State | Zip Code
Milwaukee | WI | 53215-3876
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 365.00
Date of Receipt: 08 19 2002
Amount of Each Receipt this Period: 365.00
Receipt
Transaction ID: 08192002I4BC4078910B

SUBTOTAL of Receipts This Page (optional) ▶ **915.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A.
Full Name (Last, First, Middle Initial)
Barry Golub
Mailing Address
LI Vitreo-Retinal Cons
1377 Motor Pkwy Ste 1
City | State | Zip Code
Islandia | NY | 11749-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 08 27 2002
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 0918200230C40899109

B.
Full Name (Last, First, Middle Initial)
Jay Gooze
Mailing Address
21 Gonic Rd
City | State | Zip Code
Rochester | NH | 03867-3900
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 08 20 2002
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 0918200230C40836111

C.
Full Name (Last, First, Middle Initial)
Daniel Hadad
Mailing Address
355 E Big Beaver Rd
City | State | Zip Code
Troy | MI | 48083-1225
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 08 30 2002
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 0918200230C40943115

SUBTOTAL of Receipts This Page (optional) ▶ **800.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 64
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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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 committee.

NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial)
Robert Harbin

Mailing Address
Harbin Clinic Eye Ctr | 1825 Martha Berry Blvd

City | State | Zip Code
Rome | GA | 30165-1698

FEC ID number of contributing federal political committee.

Name of Employer
self

Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
08 13 2002

Amount of Each Receipt this Period
500.00

Receipt

Transaction ID: 08192002I3C40584117

B. Full Name (Last, First, Middle Initial)
David Harper

Mailing Address
5259 Cross Bow Cir

City | State | Zip Code
Roanoke | VA | 24014-5003

FEC ID number of contributing federal political committee.

Name of Employer
self

Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
08 15 2002

Amount of Each Receipt this Period
300.00

Receipt

Transaction ID: 08192002I3C40602118

C. Full Name (Last, First, Middle Initial)
Walter Hertel

Mailing Address
Southern Ohio Medical Park | 89 Sylvania

City | State | Zip Code
Dayton | OH | 45440-

FEC ID number of contributing federal political committee.

Name of Employer
self

Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
365.00

Date of Receipt
08 27 2002

Amount of Each Receipt this Period
365.00

Receipt

Transaction ID: 08192002I3C40910119

SUBTOTAL of Receipts This Page (optional) ▶ **1165.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 64
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial)
Kurt Frederick Heitman

Mailing Address
Southern Eye Assoc | 104 Simpson St

City | State | Zip Code
Greenville | SC | 29605-4413

FEC ID number of contributing federal political committee.

Name of Employer
self

Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
08 08 2002

Amount of Each Receipt this Period
250.00

Receipt

Transaction ID: 08192002I3C40574121

B. Full Name (Last, First, Middle Initial)
Mark Helm

Mailing Address
505 Anglers Dr

City | State | Zip Code
Steamboat Springs | CO | 80487-8836

FEC ID number of contributing federal political committee.

Name of Employer
self

Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
273.75

Date of Receipt
08 02 2002

Amount of Each Receipt this Period
91.25

Receipt

Transaction ID: 08192002I3C40563122

C. Full Name (Last, First, Middle Initial)
K Dwight Hendricks

Mailing Address
8919 Parallel Pky | Ste 226

City | State | Zip Code
Kansas City | KS | 66112-

FEC ID number of contributing federal political committee.

Name of Employer
self

Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
08 15 2002

Amount of Each Receipt this Period
300.00

Receipt

Transaction ID: 08192002I3C40776123

SUBTOTAL of Receipts This Page (optional) ▶ **641.25**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A.
Full Name (Last, First, Middle Initial)
Steven Henslee
Mailing Address
2100 North Ave
City | State | Zip Code
Columbus | GA | 31904-6843
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 08 20 2002
Amount of Each Receipt this Period: 50.00
Receipt
Transaction ID: 0918200230C40831124

B.
Full Name (Last, First, Middle Initial)
Mark Hughes
Mailing Address
73 Chatham St
City | State | Zip Code
Brookline | MA | 02446-5451
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1875.00
Date of Receipt: 08 02 2002
Amount of Each Receipt this Period: 375.00
Receipt
Transaction ID: 0819200213C40556125

C.
Full Name (Last, First, Middle Initial)
Mark Hughes
Mailing Address
73 Chatham St
City | State | Zip Code
Brookline | MA | 02446-5451
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 2125.00
Date of Receipt: 08 02 2002
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 0819200213C40549126

SUBTOTAL of Receipts This Page (optional) ▶ **675.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A.
Full Name (Last, First, Middle Initial)
David Hunter
Mailing Address
1000 Ballpark Way
City | State | Zip Code
Arlington | TX | 76011-5169
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 08 15 2002
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 081920023C40778127

B.
Full Name (Last, First, Middle Initial)
W Jackson Iliff
Mailing Address
4 W Rolling Cross Rd | Ste 7
City | State | Zip Code
Catonsville | MD | 21228-6280
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 225.00
Date of Receipt: 08 02 2002
Amount of Each Receipt this Period: 75.00
Receipt
Transaction ID: 081920021 3C40551129

C.
Full Name (Last, First, Middle Initial)
Mohamad Jaafar
Mailing Address
Childrens National Medical Ctr | 111 Michigan Ave NW
City | State | Zip Code
Washington | DC | 20010-2970
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 08 29 2002
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 081620023DC4094113D

SUBTOTAL of Receipts This Page (optional) ▶ **875.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial)
Edward Jaeger

Mailing Address
1098 W Baltimore Pike Ste 3302

City | State | Zip Code
Media | PA | 19063-5140

FEC ID number of contributing federal political committee.

Name of Employer: self
Occupation: Ophthalmologist

Receipt For: Primary / General / Other (specify)

Aggregate Year-to-Date: 300.00

Date of Receipt: 08 15 2002

Amount of Each Receipt this Period: 300.00

Receipt

Transaction ID: 0819200213C40626131

B. Full Name (Last, First, Middle Initial)
David Johnson

Mailing Address
1721 E 19th Ave

City | State | Zip Code
Denver | CO | 80218-1243

FEC ID number of contributing federal political committee.

Name of Employer: self
Occupation: Ophthalmologist

Receipt For: Primary / General / Other (specify)

Aggregate Year-to-Date: 250.00

Date of Receipt: 08 26 2002

Amount of Each Receipt this Period: 250.00

Receipt

Transaction ID: 0918200023DC40890133

C. Full Name (Last, First, Middle Initial)
Murray Johnstone

Mailing Address
1221 Madison St Ste 1124

City | State | Zip Code
Seattle | WA | 98104-3566

FEC ID number of contributing federal political committee.

Name of Employer: self
Occupation: Ophthalmologist

Receipt For: Primary / General / Other (specify)

Aggregate Year-to-Date: 300.00

Date of Receipt: 08 15 2002

Amount of Each Receipt this Period: 300.00

Receipt

Transaction ID: 0819200213C40598134

SUBTOTAL of Receipts This Page (optional) ▶ **850.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial)
Jeffrey Ward Kalenak

Mailing Address
2600 N Mayfair Rd

City | State | Zip Code
Milwaukee | WI | 53226-1374

FEC ID number of contributing federal political committee.

Name of Employer
self

Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
08 15 2002

Amount of Each Receipt this Period
250.00

Receipt

Transaction ID: 0819200213C40680137

B. Full Name (Last, First, Middle Initial)
Jeffrey Kearfott

Mailing Address
Kearfott Eye Group Inc 20 S Burnett Rd

City | State | Zip Code
Springfield | OH | 45505-

FEC ID number of contributing federal political committee.

Name of Employer
self

Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
08 15 2002

Amount of Each Receipt this Period
500.00

Receipt

Transaction ID: 0819200023C40764140

C. Full Name (Last, First, Middle Initial)
Tim Khater

Mailing Address
4020 21st St

City | State | Zip Code
Lubbock | TX | 79410-1126

FEC ID number of contributing federal political committee.

Name of Employer
self

Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
273.75

Date of Receipt
08 02 2002

Amount of Each Receipt this Period
91.25

Receipt

Transaction ID: 0819200213C40565142

SUBTOTAL of Receipts This Page (optional) ▶ **841.25**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial)
Tim Khater
Mailing Address
4020 21st St
City | State | Zip Code
Lubbock | TX | 79410-1126
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 456.25
Date of Receipt: 08 15 2002
Amount of Each Receipt this Period: 182.50
Receipt
Transaction ID: 0819200213C40737143

B. Full Name (Last, First, Middle Initial)
Kenoush Kian
Mailing Address
1501 N Gilbert Rd
City | State | Zip Code
Gilbert | AZ | 85234-2394
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 365.00
Date of Receipt: 08 26 2002
Amount of Each Receipt this Period: 365.00
Receipt
Transaction ID: 0918200230C40884144

C. Full Name (Last, First, Middle Initial)
Richard Kimbrough
Mailing Address
Houston Eye Associates 2855 Gramercy St
City | State | Zip Code
Houston | TX | 77025-1635
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 365.00
Date of Receipt: 08 26 2002
Amount of Each Receipt this Period: 365.00
Receipt
Transaction ID: 0918200230C40881145

SUBTOTAL of Receipts This Page (optional) ▶ **912.50**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial)
Robert Knox
Mailing Address
3000 Rogers Ave
City | State | Zip Code
Fort Smith | AR | 72901-4299
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 08 20 2002
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 0918200230C40830149

B. Full Name (Last, First, Middle Initial)
Diane Jean Kraus
Mailing Address
PO Box 4142
City | State | Zip Code
Kingston | NY | 12402-4142
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 800.00

Date of Receipt: 08 15 2002
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 081920023C40765151

C. Full Name (Last, First, Middle Initial)
Richard Lanning
Mailing Address
220 Grandview Ave
City | State | Zip Code
Camp Hill | PA | 17011-1742
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 08 15 2002
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 081920023C40777155

SUBTOTAL of Receipts This Page (optional) ▶ **1500.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial)
Paul Lee

Mailing Address
DUKE EYE CENTER Box 3802 Erwin Rd

City State Zip Code
Durham NC 27710-0001

FEC ID number of contributing federal political committee.

Name of Employer
self

Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
08 13 2002

Amount of Each Receipt this Period
1000.00

Receipt

Transaction ID: 0819200213C40582158

B. Full Name (Last, First, Middle Initial)
David Loewy

Mailing Address
407 Ave K SE

City State Zip Code
Winter Haven FL 33880-

FEC ID number of contributing federal political committee.

Name of Employer
self

Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
365.00

Date of Receipt
08 15 2002

Amount of Each Receipt this Period
365.00

Receipt

Transaction ID: 0819200023C40766165

C. Full Name (Last, First, Middle Initial)
William Thomas Mabrey

Mailing Address
9800 Lile Dr

City State Zip Code
Little Rock AR 72205-6243

FEC ID number of contributing federal political committee.

Name of Employer
self

Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
08 20 2002

Amount of Each Receipt this Period
250.00

Receipt

Transaction ID: 0816200023DC40840171

SUBTOTAL of Receipts This Page (optional) ▶ **1615.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A.
Full Name (Last, First, Middle Initial)
Jonathan Macy
Mailing Address
8635 W 3rd St
City | State | Zip Code
Los Angeles | CA | 90048-6101
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 08 19 2002
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 0819200248C40786174

B.
Full Name (Last, First, Middle Initial)
Mark Mandel
Mailing Address
1237 B St
City | State | Zip Code
Hayward | CA | 94541-2977
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 08 02 2002
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 0819200213C40569176

C.
Full Name (Last, First, Middle Initial)
Mark Christophe Maria
Mailing Address
150 Quail Ln
City | State | Zip Code
Lebanon | PA | 17042-9403
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 375.00

Date of Receipt: 08 05 2002
Amount of Each Receipt this Period: 125.00
Receipt
Transaction ID: 0819200213C40566177

SUBTOTAL of Receipts This Page (optional) ▶ **925.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one) — PAGE 35 / 64

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial)
Peter Marks
Mailing Address
2880 Old Dixwell Ave
City | State | Zip Code
Hamden | CT | 06518-3144
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 08 20 2002
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 0918200230C40838178

B. Full Name (Last, First, Middle Initial)
Norman Medow
Mailing Address
225 E 64th St
City | State | Zip Code
New York | NY | 10021-6690
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 08 15 2002
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 0819200213C40644182

C. Full Name (Last, First, Middle Initial)
William Mestrezat
Mailing Address
2620 Genesys Pky
City | State | Zip Code
Grand Blanc | MI | 48439-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 08 15 2002
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 0819200213C40646183

SUBTOTAL of Receipts This Page (optional) ▶ **1050.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 64
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial)
Mary Miller

Mailing Address
Fallon Clinic 370 Lunenburg

City State Zip Code
Fitchburg MA 01420-

FEC ID number of contributing federal political committee.

Name of Employer
self

Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
08 15 2002

Amount of Each Receipt this Period
350.00

Receipt

Transaction ID: 0819200213C40639185

B. Full Name (Last, First, Middle Initial)
Michael Miller

Mailing Address
2480 S Downing St

City State Zip Code
Denver CO 80210-5843

FEC ID number of contributing federal political committee.

Name of Employer
self

Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
364.85

Date of Receipt
08 02 2002

Amount of Each Receipt this Period
91.25

Receipt

Transaction ID: 0819200213C40558186

C. Full Name (Last, First, Middle Initial)
Bernard Milstein

Mailing Address
2902 Ave P

City State Zip Code
Galveston TX 77550-

FEC ID number of contributing federal political committee.

Name of Employer
self

Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
08 15 2002

Amount of Each Receipt this Period
250.00

Receipt

Transaction ID: 032320017C15403187

SUBTOTAL of Receipts This Page (optional) ▶ **691.25**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 64
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial)
Lawrence Minardi
Mailing Address
500 Donnally St
City | State | Zip Code
Charleston | WV | 25301-1648
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 08 29 2002
Amount of Each Receipt this Period: 1000.00
Receipt
Transaction ID: 0918200230C40838188

B. Full Name (Last, First, Middle Initial)
Edward Mintz
Mailing Address
Columbia Eye Clinic | 100 Palmetto Park Blvd
City | State | Zip Code
Lexington | SC | 29072-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 08 20 2002
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 0918200230C40826189

C. Full Name (Last, First, Middle Initial)
Robert Mobley
Mailing Address
Lakeside Ophthalmology | 42524 Hayes Rd Ste 400
City | State | Zip Code
Clinton Township | MI | 48036-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 08 27 2002
Amount of Each Receipt this Period: 1000.00
Receipt
Transaction ID: 0918200230C40908191

SUBTOTAL of Receipts This Page (optional) ▶ **2500.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

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(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial)
David Morimoto

Mailing Address
PO Box 2937 | 219 N Hammes Ave

City | State | Zip Code
Joliet | IL | 60434-2937

FEC ID number of contributing federal political committee.

Name of Employer
self

Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
08 15 2002

Amount of Each Receipt this Period
500.00

Receipt

Transaction ID: 032320017C34703193

B. Full Name (Last, First, Middle Initial)
Van Nosh

Mailing Address
Raleigh Ophth & Surg Eye Assoc | 2709 Blue Ridge Rd Ste 100

City | State | Zip Code
Raleigh | NC | 27607-6427

FEC ID number of contributing federal political committee.

Name of Employer
self

Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
08 19 2002

Amount of Each Receipt this Period
500.00

Receipt

Transaction ID: 081920020C40804196

C. Full Name (Last, First, Middle Initial)
Roger Novack

Mailing Address
1127 Wilshire Blvd

City | State | Zip Code
Los Angeles | CA | 90017-4007

FEC ID number of contributing federal political committee.

Name of Employer
self

Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
08 02 2002

Amount of Each Receipt this Period
250.00

Receipt

Transaction ID: 0819200213C40552198

SUBTOTAL of Receipts This Page (optional) ▶ **1250.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial)
Hanna Obertynski
Mailing Address
15400 Michigan Ave
City | State | Zip Code
Dearborn | MI | 48126-3491
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 350.00
Date of Receipt: 08 15 2002
Amount of Each Receipt this Period: 350.00
Receipt
Transaction ID: 0819200213C40620201

B. Full Name (Last, First, Middle Initial)
Stephen Obstbaum
Mailing Address
115 E 39th St
City | State | Zip Code
New York | NY | 10016-0943
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 08 15 2002
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 0819200213C40739202

C. Full Name (Last, First, Middle Initial)
Stephen Obstbaum
Mailing Address
115 E 39th St
City | State | Zip Code
New York | NY | 10016-0943
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 600.00
Date of Receipt: 08 20 2002
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 0816200023DC40825203

SUBTOTAL of Receipts This Page (optional) ▶ **950.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 40 / 64
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial)
Carolyn Oesterle
Mailing Address
2015 N Main St
City | State | Zip Code
Wheaton | IL | 60187-3190
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 08 15 2002
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 0819200213C40690204

B. Full Name (Last, First, Middle Initial)
Rafael Ortiz
Mailing Address
11760 SW 40th St
City | State | Zip Code
Miami | FL | 33175-3589
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 547.50
Date of Receipt: 08 02 2002
Amount of Each Receipt this Period: 91.25
Receipt
Transaction ID: 0819200213C40564206

C. Full Name (Last, First, Middle Initial)
Francisco Pabalan
Mailing Address
Suite G 12980 Frederick
City | State | Zip Code
Moreno Valley | CA | 92553-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 08 15 2002
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 0819200023C40761207

SUBTOTAL of Receipts This Page (optional) ▶ **841.25**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial)
Paul Parnet
Mailing Address
9150 Crawford Ave
City | State | Zip Code
Skokie | IL | 60076-1700

FEC ID number of contributing federal political committee.

Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 365.00

Date of Receipt: 08 26 2002
Amount of Each Receipt this Period: 365.00
Receipt
Transaction ID: 0918200230C40893210

B. Full Name (Last, First, Middle Initial)
William Peloquin
Mailing Address
301 W Bastanchury Rd Ste 115
City | State | Zip Code
Fullerton | CA | 92835-3419

FEC ID number of contributing federal political committee.

Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 08 05 2002
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 0819200213C40572211

C. Full Name (Last, First, Middle Initial)
Scott Pomerantz
Mailing Address
523 Forest Ave
City | State | Zip Code
Paramus | NJ | 07652-4737

FEC ID number of contributing federal political committee.

Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 750.00

Date of Receipt: 08 02 2002
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 0819200213C40562212

SUBTOTAL of Receipts This Page (optional) ▶ **1115.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A.
Full Name (Last, First, Middle Initial)
Eugene Pratzko
Mailing Address
Seidenberg Pratzko Eye Associates 930 Revolution St
City | State | Zip Code
Havre De Grace | MD | 21078-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 08 27 2002
Amount of Each Receipt this Period: 1000.00
Receipt
Transaction ID: 0918200230C40828214

B.
Full Name (Last, First, Middle Initial)
Benjamin Quinones
Mailing Address
PO Box 9138
City | State | Zip Code
Humacao | PR | 00792-9138
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 375.00

Date of Receipt: 08 15 2002
Amount of Each Receipt this Period: 125.00
Receipt
Transaction ID: 0819200213C40849215

C.
Full Name (Last, First, Middle Initial)
Benjamin Quinones
Mailing Address
PO Box 9138
City | State | Zip Code
Humacao | PR | 00792-9138
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 08 27 2002
Amount of Each Receipt this Period: 125.00
Receipt
Transaction ID: 0916200230C40902216

SUBTOTAL of Receipts This Page (optional) ▶ **1250.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial)
Annette Reds

Mailing Address
Virginia Ophth Assoc | 885 Kempsville Rd, Amelia Bldg, St

City | State | Zip Code
Norfolk | VA | 23502-

FEC ID number of contributing federal political committee.

Name of Employer: self
Occupation: Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
08 15 2002

Amount of Each Receipt this Period
1000.00

Receipt

Transaction ID: 0819200213C40743220

B. Full Name (Last, First, Middle Initial)
Alan Rehmer

Mailing Address
340 E Town St | Ste 7-150

City | State | Zip Code
Columbus | OH | 43215-4600

FEC ID number of contributing federal political committee.

Name of Employer: self
Occupation: Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
08 15 2002

Amount of Each Receipt this Period
300.00

Receipt

Transaction ID: 0819200213C40741221

C. Full Name (Last, First, Middle Initial)
Alan Rehmer

Mailing Address
340 E Town St | Ste 7-150

City | State | Zip Code
Columbus | OH | 43215-4600

FEC ID number of contributing federal political committee.

Name of Employer: self
Occupation: Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
665.00

Date of Receipt
08 19 2002

Amount of Each Receipt this Period
365.00

Receipt

Transaction ID: 0819200248C40794222

SUBTOTAL of Receipts This Page (optional) ▶ **1665.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial)
Ned Reinstein
Mailing Address
7171 S Yale Ave
City: Tulsa | State: OK | Zip Code: 74136-6367
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 08 15 2002
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 0819200213C40676223

B. Full Name (Last, First, Middle Initial)
Richard Roebuck
Mailing Address
213 Dayton St
City: Hamilton | State: OH | Zip Code: 45011-1633
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 365.00
Date of Receipt: 08 15 2002
Amount of Each Receipt this Period: 365.00
Receipt
Transaction ID: 0819200213C40590227

C. Full Name (Last, First, Middle Initial)
Muriel Rose-Delgado
Mailing Address
113 Alamo Dr-Parkville Terrace
City: Guaynabo | State: PR | Zip Code: 00969-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 365.00
Date of Receipt: 08 15 2002
Amount of Each Receipt this Period: 365.00
Receipt
Transaction ID: 0819200213C40586229

SUBTOTAL of Receipts This Page (optional) ▶ **1230.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial)
Michael Rosenberg
Mailing Address
675 N Saint Clair St
City | State | Zip Code
Chicago | IL | 60611-5987
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 08 15 2002
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 0819200213C40740230

B. Full Name (Last, First, Middle Initial)
Carlos Rosende
Mailing Address
1811 Braeburn Bnd
City | State | Zip Code
San Antonio | TX | 78258-4511
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 08 15 2002
Amount of Each Receipt this Period: 200.00
Receipt
Transaction ID: 032320017C31919231

C. Full Name (Last, First, Middle Initial)
Alan Salz
Mailing Address
201 Union Ave
City | State | Zip Code
Bridgewater | NJ | 08807-3002
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 08 19 2002
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 081920020C408D0235

SUBTOTAL of Receipts This Page (optional) ▶ **750.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial)
Thomas Samuelson
Mailing Address
710 E 24th St
City | State | Zip Code
Minneapolis | MN | 55404-3810
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 08 15 2002
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 08192002I3C40636236

B. Full Name (Last, First, Middle Initial)
Dalia Sang
Mailing Address
73 Chatham St
City | State | Zip Code
Brookline | MA | 02446-5451
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1750.00
Date of Receipt: 08 02 2002
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 08192002I3C40550237

C. Full Name (Last, First, Middle Initial)
Dalia Sang
Mailing Address
73 Chatham St
City | State | Zip Code
Brookline | MA | 02446-5451
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 2125.00
Date of Receipt: 08 02 2002
Amount of Each Receipt this Period: 375.00
Receipt
Transaction ID: 08192002I3C40555238

SUBTOTAL of Receipts This Page (optional) ▶ **925.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial)
John Schietroma

Mailing Address
Retina & Oculoplastic Cnslts | 220 Grandview Ave

City | State | Zip Code
Camp Hill | PA | 17011-

FEC ID number of contributing federal political committee.

Name of Employer
self

Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
365.00

Date of Receipt
08 15 2002

Amount of Each Receipt this Period
365.00

Receipt

Transaction ID: 081920023C40749240

B. Full Name (Last, First, Middle Initial)
A Schonder

Mailing Address
Ste A-1 | 350 W Sixth St

City | State | Zip Code
Reno | NV | 89503-

FEC ID number of contributing federal political committee.

Name of Employer
self

Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
08 15 2002

Amount of Each Receipt this Period
250.00

Receipt

Transaction ID: 081920023C40591242

C. Full Name (Last, First, Middle Initial)
Joel Schuman

Mailing Address
New England Eye Ctr | 750 Washington St Box 450

City | State | Zip Code
Boston | MA | 02111-

FEC ID number of contributing federal political committee.

Name of Employer
self

Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
08 15 2002

Amount of Each Receipt this Period
500.00

Receipt

Transaction ID: 081920023C40772244

SUBTOTAL of Receipts This Page (optional) ▶ **1115.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 64
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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial)
Donald Schwartz
Mailing Address
Ste 108 2850 Elm Ave
City State Zip Code
Long Beach CA 90806-

Date of Receipt
08 30 2002

Amount of Each Receipt this Period
500.00

FEC ID number of contributing federal political committee.

Name of Employer
self

Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Receipt

Transaction ID: 0918200230C40847245

B. Full Name (Last, First, Middle Initial)
Janet Sarfe
Mailing Address
Mt Sinai Hosp Ophth Box 1183 One Gustave L Levy Pl
City State Zip Code
New York NY 10029-6574

Date of Receipt
08 27 2002

Amount of Each Receipt this Period
365.00

FEC ID number of contributing federal political committee.

Name of Employer
self

Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
365.00

Receipt

Transaction ID: 0918200230C40830246

C. Full Name (Last, First, Middle Initial)
William Shechtman
Mailing Address
1725 E Prospect Rd
City State Zip Code
Fort Collins CO 80525-1307

Date of Receipt
08 15 2002

Amount of Each Receipt this Period
500.00

FEC ID number of contributing federal political committee.

Name of Employer
self

Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Receipt

Transaction ID: 081920023C40773247

SUBTOTAL of Receipts This Page (optional) ▶ **1365.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial)
Farhad Shokoohi
Mailing Address
341 Golfview Dr
City | State | Zip Code
Saginaw | MI | 48603-5827
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 08 19 2002
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 0819200248C40791249

B. Full Name (Last, First, Middle Initial)
James Shreck
Mailing Address
1307 S Willow St
City | State | Zip Code
North Platte | NE | 69101-6090
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 08 15 2002
Amount of Each Receipt this Period: 1000.00
Receipt
Transaction ID: 0819200213C40613250

C. Full Name (Last, First, Middle Initial)
David Stager
Mailing Address
8201 Preston Rd
City | State | Zip Code
Dallas | TX | 75225-6206
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1250.00
Date of Receipt: 08 02 2002
Amount of Each Receipt this Period: 1000.00
Receipt
Transaction ID: 0819200213C40568253

SUBTOTAL of Receipts This Page (optional) ▶ **2500.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 50 / 64
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial)
G Winston Stubbs
Mailing Address
8121 1/2 Stenton Ave
City | State | Zip Code
Philadelphia | PA | 19150-3530
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 08 15 2002
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 0819200213C40587255

B. Full Name (Last, First, Middle Initial)
Gregory Lee Thorgaard
Mailing Address
135 Deppe Ln
City | State | Zip Code
Ottumwa | IA | 52501-1218
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 365.00

Date of Receipt: 08 15 2002
Amount of Each Receipt this Period: 365.00
Receipt
Transaction ID: 0819200023C40756260

C. Full Name (Last, First, Middle Initial)
Steven Thornquist
Mailing Address
25 Oak Ridge Dr
City | State | Zip Code
Bethany | CT | 06524-3117
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 08 20 2002
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 0816200023DC40820261

SUBTOTAL of Receipts This Page (optional) ▶ **865.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 64
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial)
Prem Virdi
Mailing Address
2202 18th Ave
City | State | Zip Code
Rock Island | IL | 61201-3614
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 08 29 2002
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 0918200230C40940263

B. Full Name (Last, First, Middle Initial)
Michael Vrabec
Mailing Address
Valley Eye Associates 21 Park Place
City | State | Zip Code
Appleton | WI | 54914-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 08 02 2002
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 0819200213C40553264

C. Full Name (Last, First, Middle Initial)
Kevin Lee Waltz
Mailing Address
8103 Clearvista Pkwy
City | State | Zip Code
Indianapolis | IN | 46256-5826
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 08 27 2002
Amount of Each Receipt this Period: 1000.00
Receipt
Transaction ID: 0916200230C40915266

SUBTOTAL of Receipts This Page (optional) ▶ **1500.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 52 / 64
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A.
Full Name (Last, First, Middle Initial)
Wi Lee Wan
Mailing Address
1700 N Rose Ave
City | State | Zip Code
Oxnard | CA | 93030-3791
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 225.00

Date of Receipt: 08 02 2002
Amount of Each Receipt this Period: 75.00
Receipt
Transaction ID: 08192002I3C40554267

B.
Full Name (Last, First, Middle Initial)
Marshall Wareham
Mailing Address
5250 Far Hills Ave
City | State | Zip Code
Dayton | OH | 45429-2362
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 200.00

Date of Receipt: 08 15 2002
Amount of Each Receipt this Period: 200.00
Receipt
Transaction ID: 08192002I3C40643268

C.
Full Name (Last, First, Middle Initial)
Marshall Wareham
Mailing Address
5250 Far Hills Ave
City | State | Zip Code
Dayton | OH | 45429-2362
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 08 15 2002
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 08192002I3C40659269

SUBTOTAL of Receipts This Page (optional) ▶ **575.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 53 / 64
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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A.
Full Name (Last, First, Middle Initial)
George Waring
Mailing Address
Emory Vision Correction Center
417D Ashford Dunwoody Rd Ste 300
City: Atlanta | State: GA | Zip Code: 30319-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 08 15 2002
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 0819200213C40637270

B.
Full Name (Last, First, Middle Initial)
Steve Weber
Mailing Address
Glacier Eye Clinic
160 Heritage Way
City: Kalispell | State: MT | Zip Code: 59901-3144
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 08 30 2002
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 0818200230C40850271

C.
Full Name (Last, First, Middle Initial)
Gary Wainer
Mailing Address
18 Crestview Dr
City: Salina | State: KS | Zip Code: 67401-3566
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 08 15 2002
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 0819200213C40625272

SUBTOTAL of Receipts This Page (optional) ▶ **1500.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 64
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial)
John Welch

Mailing Address
Hastings Med Pk | 2115 N Kansas Ave

City | State | Zip Code
Hastings | NE | 68901-3933

FEC ID number of contributing federal political committee.

Name of Employer
self

Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
08 15 2002

Amount of Each Receipt this Period
300.00

Receipt

Transaction ID: 032320017C31709275

B. Full Name (Last, First, Middle Initial)
Thomas Whitaker

Mailing Address
900 Med Cir

City | State | Zip Code
Myrtle Beach | SC | 29572-4114

FEC ID number of contributing federal political committee.

Name of Employer
self

Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
08 02 2002

Amount of Each Receipt this Period
250.00

Receipt

Transaction ID: 0819200213C40559276

C. Full Name (Last, First, Middle Initial)
CP Wilkinson

Mailing Address
Greater Baltimore MC/Ste 505 | 6569 N Charles St

City | State | Zip Code
Baltimore | MD | 21204-

FEC ID number of contributing federal political committee.

Name of Employer
self

Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
365.00

Date of Receipt
08 27 2002

Amount of Each Receipt this Period
365.00

Receipt

Transaction ID: 091620023DC40913277

SUBTOTAL of Receipts This Page (optional) ▶ **915.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 55 / 64
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial)
Michael Wong
Mailing Address
419 N Harrison St
City | State | Zip Code
Princeton | NJ | 08540-3521
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 1300.00
Date of Receipt: 08 15 2002
Amount of Each Receipt this Period: 1000.00
Receipt
Transaction ID: 081920023C40775280

B. Full Name (Last, First, Middle Initial)
Norman Woodlief
Mailing Address
516 S Division St
City | State | Zip Code
Cedar Falls | IA | 50613-2380
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 08 15 2002
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 081920021 3C40885281

C. Full Name (Last, First, Middle Initial)
Mamdouh Zeini
Mailing Address
8801 Northwest 8th Ave
City | State | Zip Code
Gainesville | FL | 32606-6704
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 08 21 2002
Amount of Each Receipt this Period: 400.00
Receipt
Transaction ID: 081820023DC40885283

SUBTOTAL of Receipts This Page (optional) ▶ **1900.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 56 / 64
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A.
Full Name (Last, First, Middle Initial)
Carol Ziel

Mailing Address
McKinley & Ziel Ophthalmology 2025 Frontis Plaza Blvs Ste 100

City | State | Zip Code
Winston-Salem | NC | 27103-

FEC ID number of contributing federal political committee.

Name of Employer: self
Occupation: Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
08 02 2002

Amount of Each Receipt this Period
75.00

Receipt

Transaction ID: 0818200213C40561285

B.
Full Name (Last, First, Middle Initial)
Neal Zimmerman

Mailing Address
133 Transylvania Rd

City | State | Zip Code
Woodbury | CT | 06798-3325

FEC ID number of contributing federal political committee.

Name of Employer: self
Occupation: Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
08 26 2002

Amount of Each Receipt this Period
500.00

Receipt

Transaction ID: 0918200230C40886287

C.

SUBTOTAL of Receipts This Page (optional)	▶	**575.00**
TOTAL This Period (last page this line number only)	▶	**60275.00**

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 57 / 64
(check only one)
☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A.
Full Name (Last, First, Middle Initial)
Union Bank

Mailing Address
PO Box 24512

City | State | Zip Code
San Francisco | CA | 94124-0512

FEC ID number of contributing federal political committee.

Name of Employer | Occupation

Receipt For:
Primary X General
Other (specify) ▼

Aggregate Year-to-Date ▼
530.87

Date of Receipt
M M / D D / Y Y Y Y
08 31 2002

Amount of Each Receipt this Period
43.83

Other Receipt

Transaction ID: 0918200230C41120

B.

C.

SUBTOTAL of Receipts This Page (optional)	▶	43.83
TOTAL This Period (last page this line number only)	▶	43.83

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)

[X] 21b	[ ] 22	[ ] 23	[ ] 24	[ ] 25	[ ] 26	[ ] 27	[ ] 28a	[ ] 28b	[ ] 28c	[ ] 29

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NAME OF COMMITTEE (In Full)

American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A.

Full Name (Last, First, Middle Initial)

Union Bank

Mailing Address

PO Box 24512

City: San Francisco | State: CA | Zip Code: 94124-0512

Purpose of Disbursement

UB cking acct exp 8/02

Candidate Name

Category/ Type

Office Sought: House / Senate / President

State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement

08 31 2002

Amount of Each Disbursement this Period

1289.72

UB cking acct exp 8/02

Transaction ID: 091820023DE3252

B.

C.

SUBTOTAL of Disbursements This Page (optional) ▶	**1289.72**
TOTAL This Period (last page this line number only) ▶	**1289.72**

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25
☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial)
Cantor For Congress

Mailing Address
4914 Fitzhugh Ave, Suite 202
City: Richmond | State: VA | Zip Code: 23230-

Purpose of Disbursement
House VA-7 General

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: ☐ Primary ☒ General ☐ Other (specify)

Date of Disbursement: 08 / 27 / 2002

Amount of Each Disbursement this Period: 1000.00

House VA-7 General

Transaction ID: 0918200023DE3242

B. Full Name (Last, First, Middle Initial)
Democratic National Committee

Mailing Address
430 S Capitol St SE
City: Washington | State: DC | Zip Code: 20003-4080

Purpose of Disbursement
Committee Contribution

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: ☐ Primary ☐ General ☒ Other (specify) SPECIAL

Date of Disbursement: 08 / 09 / 2002

Amount of Each Disbursement this Period: 5000.00

Committee Contribution

Transaction ID: 0819200214E3215

C. Full Name (Last, First, Middle Initial)
Democratic Senatorial Campaign Comm

Mailing Address
430 S Capitol St SE
City: Washington | State: DC | Zip Code: 20003-4080

Purpose of Disbursement
Committee Contribution

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: ☐ Primary ☐ General ☒ Other (specify) SPECIAL

Date of Disbursement: 08 / 09 / 2002

Amount of Each Disbursement this Period: 5000.00

Committee Contribution

Transaction ID: 0819200214E3216

SUBTOTAL of Disbursements This Page (optional) ▶ **11000.00**

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

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25
☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial)
Friends Of John Conyers

Mailing Address
12138 Central Ave, Suite 194
City: Bowie | State: MD | Zip Code: 20721-

Purpose of Disbursement
House MI-14 General

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: ☐ Primary ☒ General ☐ Other (specify)

Date of Disbursement: 08 / 09 / 2002

Amount of Each Disbursement this Period: 1000.00

House MI-14 General

Transaction ID: 0819200214E3207

B. Full Name (Last, First, Middle Initial)
Keegan 2002

Mailing Address
PO Box 887
City: Peoria | State: AZ | Zip Code: 85380-

Purpose of Disbursement
House AZ-2

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: ☒ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 08 / 27 / 2002

Amount of Each Disbursement this Period: 2500.00

House AZ-2

Transaction ID: 091620023DE3243

C. Full Name (Last, First, Middle Initial)
Mike Ross For Congress Committee

Mailing Address
PO Box 360
City: Prescott | State: AR | Zip Code: 71857-0360

Purpose of Disbursement
House AR-4 General

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: ☐ Primary ☒ General ☐ Other (specify)

Date of Disbursement: 08 / 09 / 2002

Amount of Each Disbursement this Period: 1000.00

House AR-4 General

Transaction ID: 0819200214E3212

SUBTOTAL of Disbursements This Page (optional) ▶ **4500.00**

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

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)

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25
☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial)
Murtha For Congress Committee

Mailing Address
PO Box 1091
City: Johnstown | State: PA | Zip Code: 15907-

Purpose of Disbursement
House PA-12 General

Candidate Name

Category/ Type

Office Sought: House / Senate / President
State: District:

Disbursement For: Primary / X General / Other (specify)

Date of Disbursement: 08 09 2002

Amount of Each Disbursement this Period: 1000.00

House PA-12 General

Transaction ID: 0819200214E3208

B. Full Name (Last, First, Middle Initial)
National Republican Senatorial Committ

Mailing Address
Ronald Reagan Republican Center 425 2nd St NE
City: Washington | State: DC | Zip Code: 20002-

Purpose of Disbursement
Committee Contribution

Candidate Name

Category/ Type

Office Sought: House / Senate / President
State: District:

Disbursement For: Primary / General / X Other (specify)
SPECIAL

Date of Disbursement: 08 09 2002

Amount of Each Disbursement this Period: 5000.00

Committee Contribution

Transaction ID: 0819200214E3217

C. Full Name (Last, First, Middle Initial)
Norwood for Congress

Mailing Address
PO Box 499
City: Evans | State: GA | Zip Code: 30809-

Purpose of Disbursement
House GA-10 General

Candidate Name

Category/ Type

Office Sought: House / Senate / President
State: District:

Disbursement For: Primary / X General / Other (specify)

Date of Disbursement: 08 09 2002

Amount of Each Disbursement this Period: 2500.00

House GA-10 General

Transaction ID: 0819200214E3209

SUBTOTAL of Disbursements This Page (optional) ▶ **8500.00**

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

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25
☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial)
Oklahomans For Nuttle

Mailing Address
1141 38th Ave NW, Suite 202
City: Norman | State: OK | Zip Code: 73072-

Purpose of Disbursement
House OK-4 Primary

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: ☒ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 08 / 09 / 2002

Amount of Each Disbursement this Period: 2500.00

House OK-4 Primary

Transaction ID: 0819200214E3210

B. Full Name (Last, First, Middle Initial)
Pallone For Congress

Mailing Address
PO Box 3176
City: Long Branch | State: NJ | Zip Code: 07740-3176

Purpose of Disbursement
House NJ-6 General

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: ☐ Primary ☒ General ☐ Other (specify)

Date of Disbursement: 08 / 09 / 2002

Amount of Each Disbursement this Period: 500.00

House NJ-6 General

Transaction ID: 0819200214E3211

C. Full Name (Last, First, Middle Initial)
Republican National Committee

Mailing Address
310-1st Street Se
City: Washington | State: DC | Zip Code: 20003-

Purpose of Disbursement
Committee Contribution

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: ☐ Primary ☐ General ☒ Other (specify) SPECIAL

Date of Disbursement: 08 / 09 / 2002

Amount of Each Disbursement this Period: 5000.00

Committee Contribution

Transaction ID: 0819200214E3218

SUBTOTAL of Disbursements This Page (optional) ▶ **8000.00**

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

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)

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25
☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A.

Full Name (Last, First, Middle Initial)
Sensenbrenner Committee

Mailing Address
PO Box 575

City: Brookfield | State: WI | Zip Code: 53008-

Purpose of Disbursement
House WI-9 General

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: ☐ Primary ☒ General ☐ Other (specify)

Date of Disbursement
08 09 2002

Amount of Each Disbursement this Period
1000.00

House WI-9 General

Transaction ID: 0819200214E3213

B.

Full Name (Last, First, Middle Initial)
Torricelli For Us Senate

Mailing Address
1300 Connecticut Ave NW Suite 800

City: Washington | State: DC | Zip Code: 20036-1703

Purpose of Disbursement
Senate NJ General

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: ☐ Primary ☒ General ☐ Other (specify)

Date of Disbursement
08 09 2002

Amount of Each Disbursement this Period
2000.00

Senate NJ General

Transaction ID: 0819200214E3214

C.

SUBTOTAL of Disbursements This Page (optional) ▶	**3000.00**
TOTAL This Period (last page this line number only) ▶	**35000.00**

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)

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25
☐ 26 ☐ 27 ☒ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A.

Full Name (Last, First, Middle Initial)
Louis Lobes

Mailing Address
Attn: Elaine
3501 Forbes Ave, Suite 500

City | State | Zip Code
Pittsburgh | PA | 15213-

Purpose of Disbursement
Refund of Contribution Refund of duplica

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Date of Disbursement
08 20 2002

Amount of Each Disbursement this Period
500.00

Transaction ID: 091820023DE3241

B.

C.

SUBTOTAL of Disbursements This Page (optional) ▶	**500.00**
TOTAL This Period (last page this line number only) ▶	**500.00**