09/19/2007 15:29

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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

	'	roi Otilei	IIIaII AII	Authorize	a Committe	iee		Office Us	e Only	
1.		USE FEC M OR TYPE O	IAILING LAE PR PRINT 🙀		ample:If typing er the lines	g, type				
L	American Academy of Ophtha	almology Inc	Political Com	mittee (OPH	THPAC)					
		1 1 1 1								
AD	DRESS (number and street)	655 Beac	ch Street							
г	Check if different									
L	than previously reported. (ACC)	San Fran	cisco				CA	94	1109	
2.	FEC IDENTIFICATION NUM	BER ₩		CITY 🛕		;	STATEA	:	ZIPCODE	A
	C00196246			3. IS THIS REPORT		NEW (N) OR		AMENDED (A)		
4.	TYPE OF REPORT (Choose One)	(b) Mor Rep		Feb 20 (M2		May 20 (M5)		Aug 20 (M8)		v 20 (M11) on-Election ar Only)
	(a) Quarterly Reports: April 15			Mar 20 (M3)	Jun 20 (M6)	X	Sep 20 (M9)	De (No Yea	c 20 (M12) on-Election ar Only)
				Apr 20 (M4		Jul 20 (M7)		Oct 20 (M10)		n 31 (YE)
	Quarterly Report(Q	1) (c)	12-Day		Primary (12P)		General (12G) Run		noff (12R)	
	July 15 Quarterly Report(Q2	' '	PRE-Election				=	, ,	110	11011 (1211)
	October 15 Quarterly Report(Q3)	3)	Report for the	the: Convention (12C)		(12C)	Special (12G)			
	January 31 Quarterly Report(YE	≣)	E	Election on					in the State of	
	July 31 Mid-Year Report(Non-election Year Only) (MY)		(d) 30-Day Post -Electio Report for the				Runoff (30R)		ecial (30S)	
	Termination Report (TER)		-	Election on			•		in the State of	
5.	Covering Period 0.8	0 1	200	7	through	0.8	3 1	2007		
l ce	ertify that I have examined this F			ny knowledge	and belief it is	true, correct	and compl	ete.		
Тур	oe or Print Name of Treasurer	Benjami	n Bank							
Sig	nature of Treasurer Electror	nically Filed b	y Benjami	n Bank		D	ate	0 9 1 9	20	07
NO	TE : Submission of false, erron	neous, or inco	omplete infor	mation may s	ubject the pers	son signing thi	s Report to	the penalties	of 2 U.S.C	437g.
	Office Use							FEC	FORM 3	3X

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) OF RECEIPTS AND DISBURSEMENTS
Page 2

Report Covering the Period: From:	01 2007	To: 08 31 2007
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
(a) Cash on Hand January 1 Y2007 Y2007		683911.43
(b) Cash on Hand at Begining of Reporting Period	611433.55	
(c) Total Receipts (from Line 19)	28720.75	216559.67
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	640154.30	900471.10
Total Disbursements (from Line 31)	21856.28	282173.08
Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	618298.02	618298.02
Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
X This Committee has qualified as a multicandidate	committee. (see FEC FORM 1M)	

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

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

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003) Page 3

Write or Type Committee Name

(subtract Line 18(c) from Line 19)

American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)

0 1 м м 8 0 0 8 M 3^D1 2007 2007 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 24753.75 188200.00 (i) Itemized (use Schedule A) 2145.00 19678.25 (ii) Unitemized (iii) TOTAL (add 26898.75 207878.25 Lines 11(a)(i) and (ii) 0.00 0.00 (b) Political Party Committees Other Political Committees 0.00 0.00 (such as PACs) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 26898.75 207878.25 Totals to Line 33, page 5) 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees 17. Other Federal Receipts 1822.00 8681.42 (Dividends, Interest, etc.) 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3) 0.00 0.00 (b) Levin Funds (from Schedule H5) 0.00 0.00 (c) Total Transfer (add 18(a) and 18(b)). 19. Total Receipts (add Lines 11(d), 28720.75 216559.67 12, 13, 14, 15, 16, 17, and 18(c)) 20. Total Federal Receipts 216559.67

28720.75

DETAILED SUMMARY PAGE

of Disbursements

Page 4

FEC Form 3X (Rev. 02/2003)

	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)	0.00	0.00
	(i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	356.28	4760.77
	Expenditures(c) Total Operating Expenditures	330.20	4700.77
	(add 21(a)(i), (a)(ii) and (b))	356.28	4760.77
2.	Transfers to Affiliated/Other Party Committees	0.00	0.00
3.	Contributions to	0.00	0.00
	Federal Candidates/Committeesand Other Political Committees	21500.00	273352.31
4.	Independent Expenditure (use Schedule E)	0.00	0.00
5.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d))	0.00	
	(use Schedule F)	0.00	0.00
ŝ.	Loan Repayments Made	0.00	0.00
7.	Loans Made	0.00	0.00
3.	Refunds of Contributions To: (a) Individuals/Persons Other		4060.00
	Than Political Committees	0.00	4060.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) Total Contribution Refunds	0.00	4000.00
	(add Lines 28(a), (b), and (c))	0.00	4060.00
9.	Other Disbursements	0.00	0.00
0.	Federal Election Activity (2 U.S.C 431(20))		
	(a) Shared Federal Election Activity		
	(from Schedule H6) (i) Federal Share	0.00	0.00
	,,	0.00	0.00
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
1.	Total Disbursements (add Lines 21(c), 22,		
٠.	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	21856.28	282173.08
2.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) from Line 30(a)(ii)		
	from Line 31)	21856.28	282173.08

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	26898.75	207878.25
34.	Total Contribution Refunds (from Line 28(d))	0.00	4060.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	26898.75	203818.25
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	356.28	4760.77
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	356.28	4760.77

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 28 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and Statem for commercial purposes, other than using the name	nents may e and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc	Political	Committee (OPHTHPAC)	
A .	Point Pleasant FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General	State NJ C Decupation Ophthalm		Date of Receipt Mark
3.	Other (specify) ▼ Full Name (Last, First, Middle Initial) Ray Balyeat Mailing Address the Williams Medical Plaza 2000 S Wheeling Avenue S		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	Tulsa FEC ID number of contributing federal political committee.	State OK C Cccupation	Zip Code 74104-5639	Transaction ID: DIGTFYNTX8FA4 Amount of Each Receipt this Period 500.00 PACWEB GENERATED CONTRIBUTION
	self)phthalm		
·			Zip Code 30322-0001	Date of Receipt M M
	Name of Employer Self O	occupation Ophthalm Aggregate		PACWEB GENERATED CONTRIBU- TION
s	UBTOTAL of Receipts This Page (optional)		>	1265.00
т.	OTAL This Period (last page this line number only)			

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 28 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology In	c Political	Committee (OPHTHPAC)	
Full Name (Last, First, Middle Initial) Terry Bergstrom Mailing Address Wk Kellogg Eye Center 1000 Wall Street Room 649 City State Ann Arbor MI FEC ID number of contributing federal political committee. Name of Employer Self Occupation Ophthal				Date of Receipt M M M / 22 2 2 007 Transaction ID: ADXJLG384164 Amount of Each Receipt this Period 365.00 Batch Tool - PAC
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 365.00	
3.	Full Name (Last, First, Middle Initial) David Bernitsky Mailing Address Suite 700 5501 Jefferson Street No City Albuquerque FEC ID number of contributing federal political committee. Name of Employer self Receipt For:	State NM C Occupation Ophthaln		Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: DWGXGI923814 Amount of Each Receipt this Period 1000.00 Batch Tool - PAC
	Primary General Other (specify) ▼	0 0	1000.00	
.	Full Name (Last, First, Middle Initial) James Brown Mailing Address 305 Hospital Road City Starkville FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General Other (specify)	State MS C Occupation Ophthaln Aggregate		Date of Receipt M M C 24 2007 Transaction ID: ACK7WR353889 Amount of Each Receipt this Period 365.00 Batch Tool - PAC
S	UBTOTAL of Receipts This Page (optional)			1730.00
	OTAL This Period (last page this line number on			

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 28 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and State for commercial purposes, other than using the nan	ments may	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc	: Political	Committee (OPHTHPAC)	
Α.	self	State GA C Occupation Ophthalm Aggregate		Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Other (specify) ▼	0 0	500.00	
3.	self	State TN C Occupation Ophthalm Aggregate		Date of Receipt M M M / 28 / 2007 Transaction ID: DP0IXI318WS60 Amount of Each Receipt this Period 365.00 PACWEB GENERATED CONTRIBUTION
- .	self	State KS C Occupation Ophthalm Aggregate		Date of Receipt M M
S	UBTOTAL of Receipts This Page (optional)			1230.00
T	OTAL 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 9 / 28 (check only one) X 11a 11b 11c 12 13 14 15 16 17			
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) American Academy of Ophthalmology	/ Inc Politica	I Committee (OPHTHPAC)				
Full Name (Last, First, Middle Initial) Shehab Ebrahim Mailing Address 4717 Woodland Aven City Metairie FEC ID number of contributing federal political committee. Name of Employer self Receipt For:	State LA C Occupation Ophthalr	nologist	Date of Receipt M M J D D J Z D O 7 Transaction ID: DGOHXQZMPUB33 Amount of Each Receipt this Period 250.00 PACWEB GENERATED CONTRIBUTION			
Primary General Other (specify) ▼	Primary General					
Full Name (Last, First, Middle Initial) Randy Mark Ennen Mailing Address Ennen Eye Center PO Box 11605 City Fort Smith FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General Other (specify)	State AR C Occupatio Ophthalr Aggregate		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Full Name (Last, First, Middle Initial) Raul Franceschi Mailing Address 29 Washington Street Suite 707 City San Juan FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General Other (specify)	State PR C Occupation Ophthalr		Date of Receipt M M D D 2 0 0 7			
SUBTOTAL of Receipts This Page (optional) .)	1500.00			
TOTAL This Period (last page this line number	only)	<u> </u>				

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 28 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology II	nc Politica	Committee (OPHTHPAC)	
۹.	Full Name (Last, First, Middle Initial) Ronald Freeman Mailing Address 755 South Milwaukee Av	venue		Date of Receipt
	North 150 City Libertyville	State	Zip Code 60048	Transaction ID: DGOISA0OPUB30 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		365.00
	Name of Employer self Receipt For: Primary General Other (specify)	Occupation Ophthaln Aggregate		PACWEB GENERATED CONTRIBU-
3.	Full Name (Last, First, Middle Initial) Luther Fry Mailing Address 310 E Walnut Street			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: DWGXGI417668
	Garden City FEC ID number of contributing federal political committee.	KS C	67846-5560	Amount of Each Receipt this Period 1000.00
	Name of Employer self	Occupation Ophthaln	nologist	Batch Tool - PAC
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
<u> </u>	Full Name (Last, First, Middle Initial) Robert Green			Date of Receipt
	Mailing Address Suite 400 414 Navarro Street City	State	Zip Code	0 8 2 2 2 0 0 7 Transaction ID: ADXJLG456671
	San Antonio	TX	78205-2505	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		365.00
	Name of Employer self	Occupation	nologist	Batch Tool - PAC
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 365.00	
S	UBTOTAL of Receipts This Page (optional)			1730.00
T	OTAL This Period (last page this line number or	nlv)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 28 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and Stateme for commercial purposes, other than using the name	ents may and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc P	Political	Committee (OPHTHPAC)	
Α.	Chicago FEC ID number of contributing federal political committee. Name of Employer self Oc. Op.	ccupation phthalm		Date of Receipt M M M / D D D / Y Y Y Y Y Transaction ID: DH9WVT40XKV61 Amount of Each Receipt this Period 500.00 PACWEB GENERATED CONTRIBUTION
3.	Fayetteville FEC ID number of contributing federal political committee. Name of Employer Self Oc. Op.	ccupation phthalm		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
D.	Flushing FEC ID number of contributing federal political committee. Name of Employer self Oc. Op.	ccupation phthalm		Date of Receipt M M M / 27 / 2007 Transaction ID: 6SW6ZJ621748 Amount of Each Receipt this Period 125.00 PAC 4th of 4
s	UBTOTAL of Receipts This Page (optional)		·····	1425.00
T	OTAL This Period (last page this line number only)		>	

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 12 / 28		
ITEMIZED RECEIPTS		or each category of the	(check only one)		
· · · · · · · · · · · · · · · · · · ·		Detailed Summary Page	X 11a 11b 11c 12 15 16 17		
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions		
NAME OF COMMITTEE (In Full)					
American Academy of Ophthalmolog	y Inc Politica	I Committee (OPHTHPAC)			
Full Name (Last, First, Middle Initial) G Baker Hubbard			Date of Receipt		
Mailing Address Suite B3409 1365B Clifton Road N			08 / 05 / 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4		
City <u>A</u> tlanta	State GA	Zip Code 30322-0001	Transaction ID: DH9Y9MU0XKV62 Amount of Each Receipt this Period		
FEC ID number of contributing		30322-0001			
federal political committee.	C		500.00		
Name of Employer self	Occupation Ophthaln		PACWEB GENERATED CONTRIBU- TION		
Receipt For:		e Year-to-Date ▼			
Primary General Other (specify) ▼		500.00			
Full Name (Last, First, Middle Initial) 3. James Izer	•		Date of Receipt		
Mailing Address 4255 Carmichael Cou	ırt N		08 14 2007		
City	State	Zip Code	Transaction ID: DGOGNM0MPUB35		
Montgomery	AL	36106-2875	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		250.00		
Name of Employer self	Occupation Ophthaln		PACWEB GENERATED CONTRIBU- TION		
Receipt For:		e Year-to-Date ▼			
Primary General		250.00	1		
Other (specify)	0 0				
Full Name (Last, First, Middle Initial) Edward Jaeger			Date of Receipt		
Mailing Address Suite 800 840 Walnut Street			08 22 7 2007		
City	State	Zip Code	Transaction ID: ADXJLG627868		
Philadelphia	PA	19107-5109	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		250.00		
Name of Employer Occupation Self Ophthali		n nologist	Batch Tool - PAC		
Receipt For:		e Year-to-Date ▼	7		
Primary General Other (specify) ▼	0 0	250.00			
SUBTOTAL of Receipts This Page (optional) .	1		1000.00		
TOTAL This Period (last page this line numbe	r only)				

SCHEDULE	A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUI	
ITEMIZED F			or each category of the	(check only one	<i>′</i> — —
	LOLII 10		Detailed Summary Page		11b 11c 12 14 15 16 17
Any information co	opied from such Reports and St	atements may	not be sold or used by any perso		
or for commercial	purposes, other than using the	name and add	y not be sold or used by any perso dress of any political committee to	solicit contribution	ns from such committee.
NAME OF CO	MMITTEE (In Full)				
American Ad	cademy of Ophthalmology	Inc Politica	Committee (OPHTHPAC)		
Anthony Pruett				Date of Rec	ceipt
Mailing Addres	s 601 Halton Road			0.8	29 / 2007
City		State	Zip Code		1 ID: DWGXGI218070
Greenville		SC	29607-3403	Amount of E	Each Receipt this Period
FEC ID numbe federal political	er of contributing I committee.	C			1000.00
Name of Emplo	oyer	Occupation	n	Batch Tool	- PAC
self		Ophthaln	nologist		
Receipt For:		Aggregate	e Year-to-Date ▼		
Primary Other (sp	General	1	1000.00		
Other (sp	Decity) 🔻	1 1			
Full Name (Las	st, First, Middle Initial)			Date of Rec	ceipt
Mailing Addres	S Clark Holder Clinic 303 Smith Street			0.8	10 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		State	Zip Code	Transaction	םו וD: AGDQ7B025662
<u>Lagrange</u>		GA	30240-2745	Amount of E	Each Receipt this Period
FEC ID numbe federal political	er of contributing I committee.	C			365.00
Name of Emplo	oyer	Occupation	n	Batch Tool	- PAC
self		Ophthaln	•		
Receipt For:		Aggregate	e Year-to-Date ▼		
Other (sp	General	, ,	365.00		
	Scony) •	0 0			
Full Name (Las Dawnielle Kerne	st, First, Middle Initial) er			Date of Rec	eeipt
Mailing Addres	s Suite 300 160 Kingsley Lane			0 8	17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	100 Kingoloy Lane	State	Zip Code	Transaction	ıD: 10AF8XMSQ4OGID
Norfolk		VA	23505-4600		Each Receipt this Period
FEC ID numbe federal political	er of contributing I committee.	C			500.00
				PACWER	GENERATED CONTRIBU-
Name of Emplo self	oyer	Occupation Ophthaln		TIÓN	S-11-11 11-20 0011111120
Receipt For:		_ t	Year-to-Date ▼		
Primary	General	199.194		1	
Other (sp	oecify) ▼		500.00		
					1865.00
SUBTOTAL of R	Receipts This Page (optional)		<u> </u>		1000.00
TOTAL This Per	riod (last page this line number o	only))		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 28 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology I	nc Politica	Committee (OPHTHPAC)	
۹.	Full Name (Last, First, Middle Initial) James Kinyoun Mailing Address Department of Ophth Univ of Wa Box 356485 City	State	Zip Code	Date of Receipt 0 8 2 4 2 0 0 7 Transaction ID: ACK7WR288481
	Seattle FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General Other (specify) ▼	Occupation Ophthalm		Amount of Each Receipt this Period 500.00 Batch Tool - PAC
3.	Full Name (Last, First, Middle Initial) Douglas Koch Mailing Address Nc205 6565 Fannin Street City Houston FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General Other (specify)	State TX C Occupatio Ophthaln Aggregate		Date of Receipt M M D D 2 0 0 7 Transaction ID: DH9UJW6XWKV67 Amount of Each Receipt this Period 250.00 PACWEB GENERATED CONTRIBUTION
Э.	Full Name (Last, First, Middle Initial) Stephen Lane Mailing Address Suite 840 280 Smith Avenue N City St. Paul FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General Other (specify)	State MN C Occupation Ophthalm Aggregate		Date of Receipt M M
s	UBTOTAL of Receipts This Page (optional)			1750.00
T	OTAL This Period (last page this line number or	nlv))	

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 15 / 28 (check only one)
IT	EMIZED RECEIPTS		or each category of the	X 11a 11b 11c 12
			Detailed Summary Page	13 14 15 16 17
An or	y information copied from such Reports and Statem for commercial purposes, other than using the nam	nents may e and add	not be sold or used by any perso	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)		71	
\rangle	American Academy of Ophthalmology Inc	Political	Committee (OPHTHPAC)	
۹.	Full Name (Last, First, Middle Initial) Lawrence Loewenthal			Date of Receipt
	Mailing Address 44650 Delco Boulevard			08 / 14 / 2007
	City	State	Zip Code	Transaction ID: DGOGIMNLPUB35
	Sterling Heights	MI	48313-1063	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		365.00
	solf ' '	occupation Ophthalm		PACWEB GENERATED CONTRIBU- TION
		<u> </u>	Year-to-Date ▼	7
	Primary General Other (specify) ▼	0 0	365.00	
3.	Full Name (Last, First, Middle Initial) Edward Lores			Date of Receipt
	Mailing Address Suite D 4950 Southwest Lejeune R	08 / 28 / 2007		
	City	State	Zip Code	Transaction ID: 6SW7MT485765
	Coral Gables	FL	33146-2231	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00 Batch Tool - PAC
	colf '	occupation Ophthalm		Batch 1001 - PAC
		Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
 C.	Full Name (Last, First, Middle Initial) Richard Mackool			Date of Receipt
	Mailing Address 31-27 41st Street			08 / 29 / Y Y Y Y Y
	City	State	Zip Code	Transaction ID: DWGXGI712334
	<u>Astoria</u>	NY	11103-3901	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		365.00
	oolf '	occupation Ophthalm		Batch Tool - PAC
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify) ▼	0 0	365.00	
S	UBTOTAL of Receipts This Page (optional)			980.00
т,	OTAL This Period (last page this line number only)			

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 16 / 28
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
\rangle	American Academy of Ophthalmology Ir	c Political	Committee (OPHTHPAC)	
۹.	Full Name (Last, First, Middle Initial) William Maron			Date of Receipt
	Mailing Address Suite 222 21 Woodland Street			08 / 25 / Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 3F1QWKN5GU6FLE
	Hartford	CT	06105-4318	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		365.00
	Name of Employer self	Occupation Ophthaln		PACWEB GENERATED CONTRIBU- TION
	Receipt For:	•	Year-to-Date ▼	-
	Primary General	, iggi ogaic		
	Other (specify) ▼		365.00	
3.	Full Name (Last, First, Middle Initial) David McClure			Date of Receipt
	Mailing Address 1255 Pineview Drive			08 / 29 / 2007
	City	State	Zip Code	Transaction ID: DP0KNOP77WS60
	Morgantown	WV	26505-2713	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		312.50
	Name of Employer self	Occupation Ophthaln		PACWEB GENERATED CONTRIBU- TION
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		312.50	
 D.	Full Name (Last, First, Middle Initial) John Mikulla			Date of Receipt
	Mailing Address Suite 200 2400 Ardmore Boulevard	l		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: DQ7GAI8NXGWD4
	Pittsburgh	PA	15221-5299	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer self	Occupation Ophthaln		PACWEB GENERATED CONTRIBU- TION
	Receipt For:	•	e Year-to-Date ▼	1
	Primary General			1
	Other (specify)		250.00	
s	UBTOTAL of Receipts This Page (optional)			927.50
	OTAL This Period (last page this line number on	lv)		
	CIAL THIS I CHOO (IAST PAYE THIS HITE HUTTIDE! OH	ıy <i>)</i>	······································	

SO	CHEDULE A (FEC Form 3X)		Harana and a shadala (a)	FOR LINE NUMBER: PAGE 17 / 28					
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)					
	EIVIIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 12					
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An or	y information copied from such Reports and Staten for commercial purposes, other than using the nam	nents may ne and add	not be sold or used by any perso lress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.					
$\overline{}$	NAME OF COMMITTEE (In Full)								
\rangle	American Academy of Ophthalmology Inc	Political	Committee (OPHTHPAC)						
۸.	Full Name (Last, First, Middle Initial) Aubrey Nichols			Date of Receipt					
	Mailing Address 414-B Marion Drive			08 / 16 / Y Y Y Y Y Y Y					
	City	State	Zip Code	Transaction ID: DHVEZA48XKV63					
	<u>McComb</u>	MS	39648-2710	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		500.00					
	colf	Occupation Ophthalm		PACWEB GENERATED CONTRIBU- TION					
			Year-to-Date ▼						
	Primary General	1							
	Other (specify) ▼	0 0	500.00						
3.	Full Name (Last, First, Middle Initial) Richard Pare			Date of Receipt					
	Mailing Address North Fulton Professional I 2500 Hospital Boulevard; S	08 / 14 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y							
	City	State	Zip Code	Transaction ID: 1E3BUPP8Z7DOGD					
	Roswell	GA	30076	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		250.00 PACWEB GENERATED CONTRIBU-					
	colf ' '	Occupation Ophthalm		TION TION					
		Aggregate	Year-to-Date ▼						
	Primary General Other (specify) ▼		250.00						
).	Full Name (Last, First, Middle Initial) Larry Patterson			Date of Receipt					
	Mailing Address Eye Centers of Tennessee 15 Iris Lane			0 8					
	City	State	Zip Code	Transaction ID: DGOD7UZOPUB3S					
	Crossville	TN	38555	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		500.00					
	nolf '	Occupation Ophthalm		PACWEB GENERATED CONTRIBU- TION					
			Year-to-Date ▼	1					
	Primary General	1 1	500.00						
	Other (specify) ▼	0 0	300.00						
SI	UBTOTAL of Receipts This Page (optional)			1250.00					
т	OTAL This Period (last page this line number only)								

S	CHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 18 / 28						
	EMIZED RECEIPTS	or each category of the	(check only one)						
•••	LIVIIZED RECEIP 13	Detailed Summary Page	X 11a 11b 11c 12						
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or	ly information copied from such Reports and Statements m for commercial purposes, other than using the name and a	lay not be sold or used by any perso ddress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.						
	NAME OF COMMITTEE (In Full)								
$ \rangle$	American Academy of Ophthalmology Inc Politic	al Committee (OPHTHPAC)							
		(
	Full Name (Last, First, Middle Initial)								
A.	Francis Price		Date of Receipt						
	Mailing Address Suite 100 9002 N Meridian Street		08 17 2007						
	City State	Zip Code	Transaction ID: DIGP4YNPX8FA2						
	<u>Indianapolis</u> IN	46260-5349	Amount of Each Receipt this Period						
	FEC ID number of contributing		1000.00						
	federal political committee.		1000.00						
	Name of Employer Occupat	ion	PACWEB GENERATED CONTRIBU-						
	colf	lmologist	TION						
		ate Year-to-Date ▼							
	Primary General	1000.00							
	Other (specify) ▼	1000.00							
В.	Full Name (Last, First, Middle Initial) William Rich		Date of Receipt						
	Mailing Address Suite 608		M M / D D / Y Y Y Y						
	6231 Leesburg Pike		08 22 2007						
	City State	Zip Code	Transaction ID: 6U9W34185427						
	<u>Falls Church</u> VA	22044-2102	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee		1000.00						
	federal political committee.		D. I. T. I. DAG						
	Name of Employer Occupat	ion	Batch Tool - PAC						
		lmologist							
		ate Year-to-Date ▼							
	Primary General Other (specify) ▼	1000.00							
	Cutor (specify)	0 0 0 0 0 0 0							
_	Full Name (Last, First, Middle Initial)								
C.	Lawrence Ronning		Date of Receipt						
	Mailing Address 6046 Whipple Avenue		0 8 2 2 2 0 0 7						
	City State	Zip Code	Transaction ID: ADXJLG263493						
	North Canton OH	44720-7616	Amount of Each Receipt this Period						
	FFC ID number of contributing	11720 7010							
	federal political committee.		300.00						
	Name of Family an	1	Batch Tool - PAC						
	Name of Employer Occupat	Imologist							
		ate Year-to-Date T							
	Primary General		1						
	Other (specify) ▼	300.00							
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		2300.00							
S	UBTOTAL of Receipts This Page (optional)	<u> </u>	2300.00						
_	OTAL This Desired (least as one this Pa								
l t	OTAL This Period (last page this line number only)								

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 28 (check only one) X 11a
Ar or	y information copied from such Reports and Stater for commercial purposes, other than using the nam	ments may ne and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc	Political	Committee (OPHTHPAC)	
A.	self	State AZ C C C C C C C C C C C C C		Date of Receipt M M
3.	Glenn Shear Mailing Address Suite 114 33 Upper Riverdale Road S City Riverdale FEC ID number of contributing federal political committee. Name of Employer self	State GA C C C C C C C C C C C C C C C C C C	Zip Code 30274-2642	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: DH9UEGVWWKV60 Amount of Each Receipt this Period 1000.00 PACWEB GENERATED CONTRIBUTION
C .	self	State NJ C Description Descrip		Date of Receipt M M M / 29 / Y Y Y Y Y Transaction ID: DWGXGI344457 Amount of Each Receipt this Period 1000.00 Batch Tool - PAC
s	UBTOTAL of Receipts This Page (optional))	2091.25
T	OTAL This Period (last page this line number only)	>	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 28 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any or f	v information copied from such Reports and Stor commercial purposes, other than using the	atements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
\	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology	Inc Politica	I Committee (OPHTHPAC)	
A.	Full Name (Last, First, Middle Initial) Ronald Smith Mailing Address Suite 5706 1450 San Pablo Street City Los Angeles FEC ID number of contributing federal political committee. Name of Employer self	State CA C Occupatio		Date of Receipt M M
	Receipt For: Primary General Other (specify)	Ophthalr Aggregate	nologist e Year-to-Date ▼ 365.00	
3.	Full Name (Last, First, Middle Initial) Kerry Solomon Mailing Address Suite 221 167 Ashley Avenue City Charleston FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General Other (specify)	State SC C Occupatio Ophthalr Aggregate		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: DWGXGI743633 Amount of Each Receipt this Period 1000.00 Batch Tool - PAC
C	Full Name (Last, First, Middle Initial) Gerald Spindel Mailing Address Suite 101 6 Tsienneto Road City Derry FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General Other (specify)	State NH C Occupatio Ophthalr Aggregate		Date of Receipt M
SL	JBTOTAL of Receipts This Page (optional)			1615.00
TC	DTAL This Period (last page this line number o	only)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 28 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology In	c Political	Committee (OPHTHPAC)	
Full Name (Last, First, Middle Initial) A. Griffith Steiner Mailing Address Ophthalmic Assciates 542 W 2nd Avenue				Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: G8YJHZANKWQ1E
	Anchorage FEC ID number of contributing federal political committee. Name of Employer	C Occupation	99516	Amount of Each Receipt this Period 365.00 PACWEB GENERATED CONTRIBU-
	Receipt For: Primary Other (specify)	Ophthaln		TION
3.	Full Name (Last, First, Middle Initial) Kevin Sullivan Mailing Address 7447 W Talcott Avenue S	Suite 300		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: DK8Z011OTMA3E
	Chicago	IL	60631-3714	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00 PACWEB GENERATED CONTRIBU-
	Name of Employer self	Occupation Ophthaln		TION TION
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
).	Full Name (Last, First, Middle Initial) Howard Tessler			Date of Receipt
	Mailing Address 48 S Greenleaf Avenue			08 26 7 2007
	City	State	Zip Code	Transaction ID: DNTQBNYK5M935
	Gurnee FEC ID number of contributing federal political committee.	C	60031-3300	Amount of Each Receipt this Period 365.00
			n nologist • Year-to-Date ▼	PACWEB GENERATED CONTRIBU-
	Primary General Other (specify) ▼		365.00	
S	UBTOTAL of Receipts This Page (optional)		·····	1230.00
T	OTAL This Period (last page this line number on	v)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 22 / 28 (check only one)						
			Detailed Summary Page	13 14 15 16 17						
An or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may ime and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.						
$\overline{}$	NAME OF COMMITTEE (In Full)									
\rangle	American Academy of Ophthalmology In	c Political	Committee (OPHTHPAC)	_						
۹.	Full Name (Last, First, Middle Initial) Susan Stuckey Thoms			Date of Receipt						
	Mailing Address University Michigan Cent 19900 Haggerty Road Su)	08 23 2007						
	City	State	Zip Code	Transaction ID: DM1AH40GJXDA4						
	Livonia	MI	48152	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		365.00						
	Name of Employer self	Occupation Ophthaln		PACWEB GENERATED CONTRIBU- TION						
	Receipt For:	Aggregate	e Year-to-Date ▼							
	Primary General Other (specify) ▼		365.00							
3.	Full Name (Last, First, Middle Initial) Thomas Whitaker			Date of Receipt						
	Mailing Address 900 Med Circle			08 / 14 / 2007						
	City	State	Zip Code	Transaction ID: 1108820709174086971						
	Myrtle Beach	SC	29572-4114	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		250.00 PAC 4th of 4						
	Name of Employer self	Occupation Ophthaln	nologist	1 70 4(110) 4						
	Receipt For: Primary General	Aggregate	Year-to-Date ▼							
	Other (specify)		1000.00							
D.	Full Name (Last, First, Middle Initial) Julia Whiteside-De Vos			Date of Receipt						
	Mailing Address 2984 Brighton Road			08 / 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
	City Shaker Heights	State OH	Zip Code 44120-1721	Transaction ID: DGOFTINKPUB36						
	FEC ID number of contributing		44120-1721	Amount of Each Receipt this Period						
federal political committee. Name of Employer Colf				250.00 PACWEB GENERATED CONTRIBU-						
			า าologist	TION						
	Receipt For:		Year-to-Date ▼							
	Primary General Other (specify) ▼		250.00							
SI	UBTOTAL of Receipts This Page (optional)			865.00						
т	OTAL This Period (last page this line number on	24753.75								

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 23 / 28 Use separate schedule(s) (check only one) or each category of the **ITEMIZED RECEIPTS** 11a 11b 11c Detailed Summary Page 13 14 **X** 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) Full Name (Last, First, Middle Initial) A. Wells Fargo Bank N.A. Date of Receipt Mailing Address PO Box 63020 8 0 31 2007 City Zip Code State Transaction ID: 8505620709194457570 San Francisco CA 94163 Amount of Each Receipt this Period FEC ID number of contributing C 1822.00 federal political committee. Bank interest 8/07 Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General 1822.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)	•	1822.00
TOTAL This Period (last page this line number only)	•	1822.00

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State:

SCHEDULE B (FEC Form 3X)

District:

FOR LINE NUMBER: PAGE 24/28 Use seperate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the Detailed Summary Page 21b 23 26 27 28a 28b 28c 29 30b Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of solicating 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) Full Name (Last, First, Middle Initial) Transaction ID: 2241100709194460042 Wells Fargo Bank N.A. Date of Disbursement 3 1 0 8 2007 Mailing Address PO Box 63020 City State Zip Code Amount of Each Disbursement this Period San Francisco CA 94163 356.28 Purpose of Disbursement Bank charges 8/07 Candidate Name Category/ Type Office Sought: Disbursement For: House Senate Primary General President Other (specify)

SUBTOTAL of Disbursements This Page (optional)	<u> </u>	356.28
TOTAL This Period (last page this line number only)		356.28

SCHEDULE B (FEC Form 3X)

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ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	l —	1b [22 28a	X 23	3 Bb	24 28c	\vdash	25 29	—	26 30b
Any Information copied from such Reports and Statem											
or for commercial purposes, other than using the name	and address of any political co	ommittee	to soi	icit contr	ibution	s from	1 such (commi	ittee		
NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc	Political Committee (OPH	THPAC)								
Full Name (Last, First, Middle Initial)						-	30107	0708	2148	801	51
21st Century Majority Fund					of Disb			ΥΥ	Y	Υ	
Mailing Address 6065 Roswell Road #227 Box 2274	4			0 ^M 8		2 1		2 (o ŏ 7`		
	State Zip Code GA 30328			Amou	nt of E	ach D	isburse	ement	this Pe	eriod	_
Purpose of Disbursement	Г		\neg					25	500.00	0	
2007 Contribution Candidate Name		Category	//								
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)	Type									
Full Name (Last, First, Middle Initial)				Trans	action	ID: 2	39014	0708	1334	7729	— 96
Becerra for Congress				Date o	of Disb	ursem	nent				, ,
Mailing Address PO Box 261060				0 ^M 8	M /	1 3		ž	o ŏ 7	Y	
,	State Zip Code CA 90026			Amou	nt of E	ach D	isburse			-	7
Purpose of Disbursement 2008 Primary						. 10	00.00	U	_		
Candidate Name Becerra Xavier		Category Type	//								
Senate X President	ment For: 2008 Primary General Other (specify)										
State: CA District: 31 Full Name (Last, First, Middle Initial)											
Becerra for Congress				Date o	of Disb	ursem					35
Mailing Address PO Box 261060				0 ^M 8	M /	21		Ž) 0 7 °	Y	
,	State Zip Code CA 90026			Amou	nt of E	ach D	isburse	ement	this Pe	eriod	_
Purpose of Disbursement 2008 Primary		0 0						10	00.00	0	_
Candidate Name Becerra Xavier	-	Category Type	//								
	ment For: 2008 Primary General Other (specify)										
SUBTOTAL of Disbursements This Page (optional)			•					45	00.00	0	Ī
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SCHEDULE B (FEC Form 3X)

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ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27	22 28a	X	23 28b	24 28c		25 29	—	26 30b		
Any Information copied from such Reports and Stateme or for commercial purposes, other than using the name													
 NAME OF COMMITTEE (In Full) 	and address of any political co	ااااااااا	100 IU S	OHOR COIL	ווטענונ	UII 6110	an SuCII	CONTIN	illoc				
American Academy of Ophthalmology Inc F	Political Committee (OPH)	THPA	AC)										
Full Name (Last, First, Middle Initial)							831565	50708	1334	5797	73		
Gene Green Congressional Campaign					Date of Disbursement								
Mailing Address PO Box 16128				0,8		1	3 /	2	0 ŏ 7				
	itate Zip Code FX 77222			Amou	unt of	Each	Disburse	ement	this Pe	eriod	_		
Purpose of Disbursement			-	L	_			10	0.00	0			
2008 Primary Candidate Name		Categ	iory/										
Green Gene		Тур	-										
Office Sought: X House Disburser Senate X	nent For: 2008 Primary General												
President	Other (specify)												
State: TX District: 29													
Full Name (Last, First, Middle Initial) 3- Jim Ramstad Volunteer Committee						on ID: sburse	504162	20708	31334	721	18		
					M /		3 /	YYY	0 ŏ 7	Υ			
Mailing Address 1809 Plymouth Road Sou	tn #310			8 0		<u> </u>			0 0 7				
,	itate Zip Code MN 55305			Amou	unt of	Each	Disburse	ement	this Pe	eriod			
Purpose of Disbursement	rpose of Disbursement							10	0.00	0			
2008 Primary Candidate Name		Categ	ion/										
Ramstad Jim		Typ	-										
Office Sought: X House Disburser Senate X	nent For: 2008 Primary General												
President A	Other (specify)												
State: MN District: 03													
Full Name (Last, First, Middle Initial) Louie Gohmert for Congress Committee						on ID: sburse	981899 ment	90708	31334	6445	55		
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				0.8				0					
,	State Zip Code FX 75711			Amou	unt of	Each	Disburse	ement	this Pe	eriod	_		
Purpose of Disbursement 2008 Primary	I	•		L.	_			. 10	0.000	0			
Candidate Name		Categ											
Gohmert Louis Office Sought: X House Disburser	nent For: 2008	Тур	e										
Senate X	Primary General												
President State: TX District: 01	Other (specify) ▼												
Sate. 17. District 01											_		
SUBTOTAL of Disbursements This Page (optional)			<u> </u>	<u>L</u> .	_			30	0.00	0	_		
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SCHEDULE B (FEC Form 3X)

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	ation copied from such Reports and Stater nercial purposes, other than using the nam													
	OF COMMITTEE (In Full)	e and address of any political t	JOHIH	iillee lo	SUIICI	CONTINE	Julions II	OIII SUCII	COITIII	iiilee				
\	can Academy of Ophthalmology Inc	Political Committee (OPI	НТН	PAC)										
	me (Last, First, Middle Initial)					Transa	ction ID	: 666173	30708	31334	6818	1		
• Range	Rangel for Congress					Date of Disbursement								
Mailing	Address PO Box 5577 Manhattanville Station					0 ^M 8 M]	1 3 [/]		0 ŏ 7				
City New Y	ork (State Zip Code NY 10027				Amoun	t of Each	n Disburs	-		-	1		
2008 P									2	500.0	0			
Range	ate Name el Charles			egory/ ype										
Office S	Senate X President	ement For: 2008 Primary General Other (specify)												
Full Na	me (Last, First, Middle Initial)					Transa	ction ID	: 217819	90708	32149	0637	 '8		
Republican Mainstreet Partnership Pac						Date of	Disburs	ement		0 0 7		Ü		
	Address C/O G & W 2201 Wisco Suite 320					0 8		21	^					
City Washi	naton	State Zip Code DC 20007				Amoun	t of Each	n Disburs	ement	this P	eriod			
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SCHEDULE B (FEC FOIIII 3X)	Use seperate schedule(s)	R LINE NUMBER: PAGE 28 / 28 eck only one)				
ITEMIZED DISBURSEMENTS	for each category of the	21b 22 X 23 24 25 26 27 28a 28b 28c 29 30b				
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name						
NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc I	Political Committee (OPHTHPA	C)				
Full Name (Last, First, Middle Initial) 1. Texans for Lamar Smith		Transaction ID: 8031120708214877048 Date of Disbursement				
Mailing Address PO Box 6155		088 / 21 / Y 2007				
,	State Zip Code FX 78209	Amount of Each Disbursement this Period				
Purpose of Disbursement 2008 Primary		1000.00				
Candidate Name Smith Lamar	Catego Type					
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Full Name (Last, First, Middle Initial) 3. Voice for Freedom		Transaction ID: 1432450708214870519				
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Atlanta	GA 30339	2000.00				
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Full Name (Last, First, Middle Initial) Volunteers for Shimkus		Transaction ID: 6413340708133474584 Date of Disbursement				
Mailing Address PO Box 5458		088 / 013 / 2007				
,	State Zip Code L 62705	Amount of Each Disbursement this Period				
Purpose of Disbursement 2008 Primary		1000.00				
Candidate Name Shimkus John	Catego Type					
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SUBTOTAL of Disbursements This Page (optional)						
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