

**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 21 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 3225 Cmbld Blvd SE Ste 900

City	State	Zip Code
Atlanta	GA	30339-5971

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Self	Ophthalmologist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
365.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2015

**Transaction ID : 8412922D-3991-44FE-B**

Amount of Each Receipt this Period  
365.00

**B. David Harris Jr.**  
Full Name (Last, First, Middle Initial)

Mailing Address 1928 Alcoa Hwy Ste 324

City	State	Zip Code
Knoxville	TN	37920-1505

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Self	Ophthalmologist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
365.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	25	/	2015

**Transaction ID : 890168B5-657B-4ED9-8**

Amount of Each Receipt this Period  
365.00

**C. Thomas Hawk**  
Full Name (Last, First, Middle Initial)

Mailing Address 6131 Luther Ln Ste 216

City	State	Zip Code
Dallas	TX	75225

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Self	Ophthalmologist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
365.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2015

**Transaction ID : D98076E8-1084-481C-9**

Amount of Each Receipt this Period  
365.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1095.00
<b>TOTAL</b> This Period (last page this line number only).....▶	