FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT ▼** Example: If typing, type over the lines. 12FE4M5

American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)

ADDRESS (number and street) ▼ 655 Beach Street

☐ Check if different than previously reported. (ACC)

San Francisco | CA | 94109 –

CITY ▲ STATE ▲ ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼** C C00196246

3. IS THIS REPORT ☒ 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 Year-End 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)	☐ Sep 20 (M9)	☐ Dec 20 (M12) (Non-Election Year Only)
☐ Apr 20 (M4)	☐ Jul 20 (M7)	☐ Oct 20 (M10)	☐ Jan 31 (YE)

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

Election on MM / DD / YYYY in the State of

(d) 30-Day **POST**-Election Report for the: ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on MM / DD / YYYY in the State of

5. Covering Period 02 / 01 / 2016 through 02 / 29 / 2016

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 Jill Boyett

Signature of Treasurer *Jill Boyett* ***[Electronically Filed]*** Date 03 / 18 / 2016

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							

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

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

Write or Type Committee Name

American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)

Report Covering the Period: From: 02 / 01 / 2016 To: 02 / 29 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2016		288757.48
(b) Cash on Hand at Beginning of Reporting Period	305990.05	
(c) Total Receipts (from Line 19)	20743.11	51547.21
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	326733.16	340304.69
7. Total Disbursements (from Line 31)	83914.27	97485.80
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	242818.89	242818.89
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	

☒ 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

FEC **Form 3X** (Rev. 06/2004)

Write or Type Committee Name

American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)

Report Covering the Period: From: M M 02 / D D 01 / Y Y Y Y 2016 To: M M 02 / D D 29 / Y Y Y Y 2016

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)	10797.08	35707.08
(ii) Unitemized	4946.03	10840.13
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	15743.11	46547.21
(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 33, page 5) ▶	15743.11	46547.21
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 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	5000.00	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) ▶	20743.11	51547.21
20. Total Federal Receipts (subtract Line 18(c) from Line 19) ▶	20743.11	51547.21

DETAILED SUMMARY PAGE
of Disbursements

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

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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	65.34	136.87
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶	65.34	136.87
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	70500.00	84000.00
24. Independent Expenditures (use Schedule E)	13348.93	13348.93
25. Coordinated Party Expenditures (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	0.00	0.00
(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)) ▶	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	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
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	83914.27	97485.80
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) ▶	83914.27	97485.80

DETAILED SUMMARY PAGE
of Disbursements

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

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)	15743.11	46547.21
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	15743.11	46547.21
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	65.34	136.87
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ▶	65.34	136.87

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)
[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): Joe Arterberry
Mailing Address: 224 E Broadway, Suite 110
City: Louisville State: KY Zip Code: 40202-2016
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 530.42
Date of Receipt: 02 / 28 / 2016
Transaction ID : 7BCE191C-FD6E-408C-A
Amount of Each Receipt this Period: 500.00
[ ] Memo Item

B. Full Name (Last, First, Middle Initial): Donald Budenz
Mailing Address: 74006 Harvey
City: Chapel Hill State: NC Zip Code: 27517
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 02 / 21 / 2016
Transaction ID : FE920F0D-B25D-48B2-A
Amount of Each Receipt this Period: 500.00
[ ] Memo Item

C. Full Name (Last, First, Middle Initial): S. William William Clark
Mailing Address: 502 Isabella St
City: Waycross State: HI Zip Code: 31501-3638
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 02 / 11 / 2016
Transaction ID : 818DA797-FA76-4F59-A
Amount of Each Receipt this Period: 1000.00
[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 2000.00

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

A. Full Name (Last, First, Middle Initial): Keith Dahlhauser
Mailing Address: 12117 Nyanza Rd SW
City: Lakewood State: WA Zip Code: 98499
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 02 / 17 / 2016
Transaction ID : F76F7B61-4014-4DD5-A
Amount of Each Receipt this Period: 400.00
[ ] Memo Item

B. Full Name (Last, First, Middle Initial): William Deegan
Mailing Address: 6354 Walker Ln Ste 100
City: Alexandria State: VA Zip Code: 22310-3242
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 02 / 09 / 2016
Transaction ID : BCA1E8F8-E35A-47CD-8
Amount of Each Receipt this Period: 500.00
[ ] Memo Item

C. Full Name (Last, First, Middle Initial): Steven Dewey
Mailing Address: 1423 N Tejon St
City: Colorado Springs State: CO Zip Code: 80907-7436
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 02 / 25 / 2016
Transaction ID : FE7D43425A4F4B24B5B1
Amount of Each Receipt this Period: 250.00
[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1150.00

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

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

A. Full Name (Last, First, Middle Initial): Edgar Gamponia
Mailing Address: 408 Santana Pl
City: Morgantown State: WV Zip Code: 26508
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 02 / 22 / 2016
Transaction ID : 8D8F9C48-C61A-48D6-B
Amount of Each Receipt this Period: 1000.00
[ ] Memo Item

B. Full Name (Last, First, Middle Initial): Enrique Garcia-Valenzuela
Mailing Address: 8901 Golf Rd Ste 206
City: Des Plaines State: IL Zip Code: 60016-6850
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 02 / 02 / 2016
Transaction ID : 9142CCAE-367C-45A7-A
Amount of Each Receipt this Period: 250.00
[ ] Memo Item

C. Full Name (Last, First, Middle Initial): Sidney Gicheru
Mailing Address: 440 W Lbj Fwy Ste 300
City: Irving State: TX Zip Code: 75063-3841
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 416.66
Date of Receipt: 02 / 15 / 2016
Transaction ID : B6F785B6-4621-4D73-8
Amount of Each Receipt this Period: 208.33
[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1458.33

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

SCHEDULE A (FEC Form 3X)
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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 Glasser
Mailing Address: 2307 Ridge Tree Ct
City: Ellicott City | State: MD | Zip Code: 21042
FEC ID number of contributing federal political committee: C
Name of Employer: Self | Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 365.00
Date of Receipt: 02 / 06 / 2016
Transaction ID : B8085E8C-AB32-4016-9
Amount of Each Receipt this Period: 365.00
[ ] Memo Item

B. Full Name (Last, First, Middle Initial): Thomas Harbin
Mailing Address: 3225 Cmbld Blvd SE Ste 900
City: Atlanta | State: GA | Zip Code: 30339-5971
FEC ID number of contributing federal political committee: C
Name of Employer: Self | Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 365.00
Date of Receipt: 02 / 22 / 2016
Transaction ID : C06ACE52-4E6C-4919-B
Amount of Each Receipt this Period: 365.00
[ ] Memo Item

C. Full Name (Last, First, Middle Initial): Craig King
Mailing Address: 3209 N 4th St Ste 100
City: Longview | State: TX | Zip Code: 75605-5170
FEC ID number of contributing federal political committee: C
Name of Employer: Self | Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 365.00
Date of Receipt: 02 / 22 / 2016
Transaction ID : 0F6B12D7-B93E-4671-8
Amount of Each Receipt this Period: 365.00
[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1095.00

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): Judith Kirby
Mailing Address: 9301 North Central Expy, Tower 2 S
City: Dallas State: TX Zip Code: 75231
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 02 / 05 / 2016
Transaction ID : E0581F5B-C907-4448-9
Amount of Each Receipt this Period: 500.00
[ ] Memo Item

B. Full Name (Last, First, Middle Initial): Craig Kliger
Mailing Address: 100 Galewood Cir
City: San Francisco State: CA Zip Code: 94131-1132
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 208.35
Date of Receipt: 02 / 29 / 2016
Transaction ID : 8EDBB054-4BAB-4318-B
Amount of Each Receipt this Period: 41.67
[ ] Memo Item

C. Full Name (Last, First, Middle Initial): Wayne Larrison
Mailing Address: 46 Prince St Ste 203
City: New Haven State: CT Zip Code: 06519-1600
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 02 / 02 / 2016
Transaction ID : A524F331-6C6C-44A2-8
Amount of Each Receipt this Period: 500.00
[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1041.67

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): Mary Lawrence
Mailing Address: 19545 Hampshire Ct.
City: Prior Lake | State: MN | Zip Code: 55372
FEC ID number of contributing federal political committee: C
Name of Employer: Self | Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 833.34
Date of Receipt: 02 / 29 / 2016
Transaction ID : 09780BC6-4916-4D5D-8
Amount of Each Receipt this Period: 416.67
[ ] Memo Item

B. Full Name (Last, First, Middle Initial): Masud Malik
Mailing Address: 5 Acadia Dr.
City: S. Barrington | State: IL | Zip Code: 60010
FEC ID number of contributing federal political committee: C
Name of Employer: Self | Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 333.32
Date of Receipt: 02 / 15 / 2016
Transaction ID : A1DDA67A-F553-4A96-A
Amount of Each Receipt this Period: 83.33
[ ] Memo Item

C. Full Name (Last, First, Middle Initial): Masud Malik
Mailing Address: 3865 N Mulford Rd
City: Rockford | State: IL | Zip Code: 61114-5603
FEC ID number of contributing federal political committee: C
Name of Employer: Self | Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 333.32
Date of Receipt: 02 / 15 / 2016
Transaction ID : C26B9710-3FD3-4335-B
Amount of Each Receipt this Period: 83.33
[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 583.33

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): Thomas Moore
Mailing Address: 2001 Coolidge Rd
City: East Lansing | State: MI | Zip Code: 48823-1378
FEC ID number of contributing federal political committee: C
Name of Employer: Self | Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 02 / 11 / 2016
Transaction ID : 12BA8E4F-8C0C-44AC-9
Amount of Each Receipt this Period: 500.00
[ ] Memo Item

B. Full Name (Last, First, Middle Initial): David Plager
Mailing Address: 1160 W Michigan St
City: Indianapolis | State: IN | Zip Code: 46202-5209
FEC ID number of contributing federal political committee: C
Name of Employer: Self | Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 02 / 18 / 2016
Transaction ID : 4B8BE195-81DD-4DB8-A
Amount of Each Receipt this Period: 500.00
[ ] Memo Item

C. Full Name (Last, First, Middle Initial): N. Niki Silverstein
Mailing Address: 198 North Rd
City: Chester | State: NJ | Zip Code: 07930-2323
FEC ID number of contributing federal political committee: C
Name of Employer: Self | Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 02 / 09 / 2016
Transaction ID : BFBDFA88-CF06-43EB-8
Amount of Each Receipt this Period: 500.00
[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1500.00

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): John Thomas
Mailing Address: 3519 Friendsville Road
City: Wooster State: OH Zip Code: 44691
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 02 / 11 / 2016
Transaction ID : 1CBF14B6-C120-49FB-8
Amount of Each Receipt this Period: 500.00
[ ] Memo Item

B. Full Name (Last, First, Middle Initial): Russell Van Gelder
Mailing Address: 7525 Mercer Terrace Dr
City: Mercer Island State: WA Zip Code: 98040-5531
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 02 / 22 / 2016
Transaction ID : 9BBBAF7C-A699-4DEE-8
Amount of Each Receipt this Period: 1000.00
[ ] Memo Item

C. Full Name (Last, First, Middle Initial): Aaron Weingeist
Mailing Address: 4717 53rd Ave S
City: Seattle State: WA Zip Code: 98118-1640
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 468.75
Date of Receipt: 02 / 29 / 2016
Transaction ID : 0B82A100-2903-4502-9
Amount of Each Receipt this Period: 468.75
[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1968.75

TOTAL This Period (last page this line number only) ▶ 10797.08

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)
☐ 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 Lawrence for Congress
Mailing Address: PO Box 21215
City: Eagan State: MN Zip Code: 55121
FEC ID number of contributing federal political committee: C C00573063
Name of Employer:
Occupation:
Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 02 / 02 / 2016
Transaction ID : C69490915BC08182B6A
Amount of Each Receipt this Period: 5000.00
☐ Memo Item
Refund of ck reported on 12/2/15

B.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt: M M / D D / Y Y Y Y
Amount of Each Receipt this Period:
☐ Memo Item

C.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt: M M / D D / Y Y Y Y
Amount of Each Receipt this Period:
☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 5000.00

TOTAL This Period (last page this line number only) ▶ 5000.00

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 ☐ 30b

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

A. Full Name (Last, First, Middle Initial): Billy Long for Congress
Mailing Address: 3246 E Ridgeview St
City: Springfield State: MO Zip Code: 65804-4076
Purpose of Disbursement: 2016 Primary
Candidate Name: William H. Long II
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: MO District: 07
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 02 / 03 / 2016
Transaction ID : 2D83B3F35415A288506
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Brady for Congress
Mailing Address: PO Box 8277
City: the Woodlands State: TX Zip Code: 77387-8277
Purpose of Disbursement: 2016 General
Candidate Name: Kevin Patrick Brady
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: TX District: 08
Disbursement For: 2016 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 02 / 24 / 2016
Transaction ID : F58D46BBBF073A1AA7C
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Buddy Carter for Congress
Mailing Address: 200 E St Julian St Suite 603
City: Savannah State: GA Zip Code: 31401
Purpose of Disbursement: 2016 Primary
Candidate Name: Earl L. B. Carter
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: GA District: 01
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 02 / 10 / 2016
Transaction ID : A32B60A181A25108E89
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 7500.00

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 ☐ 30b

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

A. Full Name (Last, First, Middle Initial): Connolly for Congress
Mailing Address: PO Box 563
City: Merrifield State: VA Zip Code: 22116
Purpose of Disbursement: 2016 General
Category/Type: 011
Candidate Name: Gerald E. Connolly
Office Sought: ☒ House ☐ Senate ☐ President
State: VA District: 11
Disbursement For: 2016 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 02 / 24 / 2016
Transaction ID : 3F2FE308A116BDF0146
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Denny Heck for Congress
Mailing Address: PO Box 235
City: Olympia State: WA Zip Code: 98507
Purpose of Disbursement: 2016 Primary
Category/Type: 011
Candidate Name: Dennis Heck
Office Sought: ☒ House ☐ Senate ☐ President
State: WA District: 10
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 02 / 10 / 2016
Transaction ID : B80F3D90993FC5EE9EB
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Dr. Matt Heinz for Arizona
Mailing Address: PO Box 57698
City: Tucson State: AZ Zip Code: 85732
Purpose of Disbursement: 2016 Primary
Category/Type: 011
Candidate Name: Matthew G. Heinz
Office Sought: ☒ House ☐ Senate ☐ President
State: AZ District: 02
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 02 / 24 / 2016
Transaction ID : C070C6CDE4547C84F6F
Amount of Each Disbursement this Period: 5000.00
☐ Memo Item

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 ☐ 30b

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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 Sam Johnson
Mailing Address: PO Box 860096
City: Plano State: TX Zip Code: 75086
Purpose of Disbursement: 2016 Primary
Candidate Name: Samuel Robert Johnson
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: TX District: 03
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 02 / 10 / 2016
Transaction ID : 1A71C74B387BB932591
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): George Holding for Congress Inc.
Mailing Address: PO Box 97187
City: Raleigh State: NC Zip Code: 27624
Purpose of Disbursement: 2016 Primary
Candidate Name: George E. B. Holding
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: NC District: 13
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 02 / 24 / 2016
Transaction ID : 66A741226966116F334
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Guthrie for Congress
Mailing Address: PO Box 9639
City: Bowling Green State: KY Zip Code: 42102-9639
Purpose of Disbursement: 2016 Primary
Candidate Name: S. Brett Guthrie
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: KY District: 02
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 02 / 24 / 2016
Transaction ID : 9A83CBE6733D289AB7F
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 6000.00

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 ☐ 30b

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

A. Full Name (Last, First, Middle Initial): Healthcare Freedom Fund
Mailing Address: PO Box 2485
City: Springfield State: VA Zip Code: 22152
Purpose of Disbursement: 2016 Contribution
Candidate Name: Healthcare Freedom Fund
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2016 ☐ Primary ☐ General ☒ Other (specify) ▼ Contribution
Date of Disbursement: 02 / 03 / 2016
Transaction ID : B303CA94EE93AD7D350
Amount of Each Disbursement this Period: 5000.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Hudson for Congress
Mailing Address: PO Box 5053
City: Concord State: NC Zip Code: 28027-1500
Purpose of Disbursement: 2016 Primary
Candidate Name: Richard Lane Hudson Jr.
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: NC District: 08
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify) ▼
Date of Disbursement: 02 / 24 / 2016
Transaction ID : 7BE4EBA284A2B47BE75
Amount of Each Disbursement this Period: 2000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Kansans for Marshall
Mailing Address: PO Box 1588
City: Great Bend State: KS Zip Code: 67530
Purpose of Disbursement: 2016 Primary
Candidate Name: Roger W. Marshall
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: KS District: 01
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify) ▼
Date of Disbursement: 02 / 17 / 2016
Transaction ID : B3DD429DE384B748F48
Amount of Each Disbursement this Period: 5000.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 12000.00

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 ☐ 30b

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

A. Full Name (Last, First, Middle Initial): Kevin McCarthy for Congress
Mailing Address: PO Box 12667
City: Bakersfield State: CA Zip Code: 93389-2667
Purpose of Disbursement: 2016 Primary
Candidate Name: Kevin Owen McCarthy
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: CA District: 23
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 02 / 24 / 2016
Transaction ID : DB8D8B17E7570D354E6
Amount of Each Disbursement this Period: 1500.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Kurt Schrader for Congress
Mailing Address: PO Box 3314
City: Oregon City State: OR Zip Code: 97045
Purpose of Disbursement: 2016 Primary
Candidate Name: Kurt Schrader
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: OR District: 05
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 02 / 03 / 2016
Transaction ID : 4A9846035811D400EA7
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Marsha Blackburn for Congress, Inc.
Mailing Address: PO Box 3750
City: Brentwood State: TN Zip Code: 37024-3750
Purpose of Disbursement: 2016 General
Candidate Name: Marsha Wedgeworth Blackburn
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: TN District: 07
Disbursement For: 2016 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 02 / 10 / 2016
Transaction ID : 332F3BDAC1C2CA1C1AC
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 3500.00

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 ☐ 30b

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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 Burgess for Congress
Mailing Address: PO Box 2334
City: Denton State: TX Zip Code: 76202-2334
Purpose of Disbursement: 2016 Primary
Candidate Name: Michael Clifton Burgess
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: TX District: 26
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 02 / 10 / 2016
Transaction ID : 39C4641AB2D2F925F32
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Michael Burgess for Congress
Mailing Address: PO Box 2334
City: Denton State: TX Zip Code: 76202-2334
Purpose of Disbursement: 2016 General
Candidate Name: Michael Clifton Burgess
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: TX District: 26
Disbursement For: 2016 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 02 / 10 / 2016
Transaction ID : FA0144C3062E0B25955
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Mike Bost for Congress Committee
Mailing Address: PO Box 1212
City: Murphysboro State: IL Zip Code: 62966
Purpose of Disbursement: 2016 Primary
Candidate Name: Michael J. Bost
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: IL District: 12
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 02 / 03 / 2016
Transaction ID : 1B96CD6511D66BC8817
Amount of Each Disbursement this Period: 1500.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 6500.00

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 ☐ 30b

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

A. Full Name (Last, First, Middle Initial): Morgan Griffith for Congress
Mailing Address: PO Box 361
City: Christiansburg State: VA Zip Code: 24068
Purpose of Disbursement: 2016 General
Candidate Name: H. Morgan Griffith
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: VA District: 09
Disbursement For: 2016 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 02 / 10 / 2016
Transaction ID : 199264515E6083BDB13
Amount of Each Disbursement this Period: 5000.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Nutmeg PAC
Mailing Address: C/O Cacace Tusch & Santagata, 777 Summer St
City: Stamford State: CT Zip Code: 06901
Purpose of Disbursement: 2016 Contribution
Candidate Name: Nutmeg PAC
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2016 ☐ Primary ☐ General ☒ Other (specify) Contribution
Date of Disbursement: 02 / 03 / 2016
Transaction ID : E787ADAD4D9C1FC100C
Amount of Each Disbursement this Period: 3000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Pete Sessions for Congress
Mailing Address: PO Box 823047
City: Dallas State: TX Zip Code: 75382-3047
Purpose of Disbursement: 2016 Primary
Candidate Name: Peter Anderson Sessions
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: TX District: 32
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 02 / 03 / 2016
Transaction ID : 352DCA1589B3BF1D433
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 10500.00

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 ☐ 30b

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

A. Full Name (Last, First, Middle Initial): Renee Ellmers for Congress Committee
Mailing Address: PO Box 99567
City: Raleigh State: NC Zip Code: 27624
Purpose of Disbursement: 2016 General
Candidate Name: Renee L. Ellmers
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: NC District: 02
Disbursement For: 2016 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 02 / 03 / 2016
Transaction ID : AD46EA90B904DF559F3
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Robin Kelly for Congress
Mailing Address: PO Box 6953
City: Chicago State: IL Zip Code: 60680
Purpose of Disbursement: 2016 Primary
Candidate Name: Robin Lynne Kelly
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: IL District: 02
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 02 / 24 / 2016
Transaction ID : 7AC3C7E62D81D9806BA
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Roskam for Congress Committee
Mailing Address: PO Box 713
City: Wheaton State: IL Zip Code: 60187
Purpose of Disbursement: 2016 General
Candidate Name: Peter James Roskam
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: IL District: 06
Disbursement For: 2016 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 02 / 24 / 2016
Transaction ID : C8D359FCFBD5943F8BE
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 3000.00

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 ☐ 30b

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

A. Full Name (Last, First, Middle Initial): Simpson for Congress
Mailing Address: 1487 Parkway Drive
City: Blackfoot State: ID Zip Code: 83221
Purpose of Disbursement: 2016 Primary
Candidate Name: Michael Keith Simpson
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: ID District: 02
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 02 / 10 / 2016
Transaction ID : B98305BAC4F33FC8217
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Ted Deutch for Congress Committee
Mailing Address: 1050 17th St, NW, Ste 590
City: Washington State: DC Zip Code: 20036
Purpose of Disbursement: 2016 Primary
Candidate Name: Theodore Eliot Deutch
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: FL District: 22
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 02 / 17 / 2016
Transaction ID : D5CE2FA4E714F8B673D
Amount of Each Disbursement this Period: 5000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): The Congressman Joe Barton Committee
Mailing Address: PO Box 1444
City: Ennis State: TX Zip Code: 75120
Purpose of Disbursement: 2016 Primary
Candidate Name: Joseph Linus Barton
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: TX District: 06
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 02 / 10 / 2016
Transaction ID : 13F81441E9691E9F09A
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 7000.00

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 ☐ 30b

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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 Murphy for Congress
Mailing Address: PO Box 24551
City: Pttsburgh State: PA Zip Code: 15234
Purpose of Disbursement: 2016 Primary
Candidate Name: Timothy Francis Murphy
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: PA District: 18
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 02 / 03 / 2016
Transaction ID : E9E71628D3A02922157
Amount of Each Disbursement this Period: 2000.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Volunteers for Shimkus
Mailing Address: PO Box 661
City: Collinsville State: IL Zip Code: 62234-0661
Purpose of Disbursement: 2016 Primary
Candidate Name: John M. Shimkus
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: IL District: 15
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 02 / 10 / 2016
Transaction ID : DBE44BA25FDF97DCEAD
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Zeldin for Congress
Mailing Address: 47 Flintlock Drive
City: Shirley State: NY Zip Code: 11967
Purpose of Disbursement: 2016 Primary
Candidate Name: Lee M. Zeldin
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: NY District: 01
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 02 / 17 / 2016
Transaction ID : 1FAC028D2A73739FC02
Amount of Each Disbursement this Period: 1500.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 6000.00

TOTAL This Period (last page this line number only) ▶ 70500.00

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

FEC IDENTIFICATION NUMBER ▼
C C00196246

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee: Mammen Group, Inc.
☐ Memo Item
Date of Public Distribution/Dissemination: 02 / 24 / 2016
Mailing Address: 1901 L Street NW
Amount: 13348.93
City: Washington State: DC Zip Code: 20036
Transaction ID : VC35AC9362A42455DAD9
Purpose of Expenditure: 2/24/16 mailing for 3/1/16 Primary
Category/Type:
Date of Disbursement or Obligation: 02 / 24 / 2016
Name of Federal Candidate: Rep. Raymond Eugene Green
☒ Support ☐ Oppose
Office Sought: ☒ House District: 29 ☐ President ☐ Senate State: TX
Calendar Year-To-Date Per Election for Office Sought 2016: 13348.93
Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶

Full Name of Payee
☐ Memo Item
Date of Public Distribution/Dissemination: M M / D D / Y Y Y Y
Mailing Address
Amount
City State Zip Code
Purpose of Expenditure
Category/Type
Date of Disbursement or Obligation: M M / D D / Y Y Y Y
Name of Federal Candidate
☐ Support ☐ Oppose
Office Sought: ☐ House District: ☐ President ☐ Senate State:
Calendar Year-To-Date Per Election for Office Sought
Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 13348.93

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶ 13348.93

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Jill Boyett
[Electronically Filed]
Signature

Date 03 / 18 / 2016