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FEC FORM 1

STATEMENT OF ORGANIZATION

(See Instructions)

Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) 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 address is changed)

SAN FRANCISCO CA 94109-1336

CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

COMMITTEE'S WEB PAGE ADDRESS (URL)

2. DATE (M M / D D / Y Y Y Y) 05 11 2001

3. FEC IDENTIFICATION NUMBER ▶ C 00196246

4. IS THIS STATEMENT NEW (N) OR X AMENDED (A)

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

Type or Print Name of Treasurer Carol Beatty

Signature of Treasurer Carol Beatty Date (M M / D D / Y Y Y Y) 05 14 2001

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

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office Use Only				

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

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(Revised 1/01)

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