REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
AMERICAN ACADEMY OF OPHTHALMOLOGY (OPHTHPAC)

ADDRESS (number and street) ☐ Check if different than previously reported
655 BEACH STREET

CITY, STATE and ZIP CODE
SAN FRANCISCO CA 94109

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

2. FEC IDENTIFICATION NUMBER
C00196246

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

4. TYPE OF REPORT

(a) ☐ April 15 Quarterly Report
☐ July 15 Quarterly Report
☐ October 15 Quarterly Report
☐ January 31 Year End Report
☐ July 31 Mid Year Report (Non-election Year Only)
☐ Termination Report

Monthly Report Due On:
☐ February 20 ☒ June 20 ☐ October 20
☐ March 20 ☐ July 20 ☐ November 20
☐ April 20 ☐ August 20 ☐ December 20
☐ May 20 ☐ September 20 ☐ January 31

☐ Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____

☐ Thirtieth day report following the General Election on _____ in the State of _____

(b) Is this Report an Amendment? ☐ YES ☒ NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period May 1 through May 31, 1998		
6. (a) Cash on Hand January 1, 19 98		$ 365,468.84
(b) Cash on Hand at Beginning of Reporting Period	$ 272,857.55	
(c) Total Receipts (from Line 19)	$ 8,498.22	$ 117,507.28
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 281,355.77	$ 482,976.12
7. Total Disbursements (from Line 30)	$ 11,123.45	$ 212,743.80
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 270,232.32	$ 270,232.32
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$ 0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$ 0	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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
PAULA E. LENT

Signature of Treasurer
Paula E. Lent Treasurer

Date
6/19/98

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

FEC FORM 3X
(revised 8/93)

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE: American Academy of Ophthalmology, Inc.
Political Committee (OPHTHPAC)

REPORT COVERING PERIOD FROM May 1 TO: May 31, 1998

	COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	6,800.00	94,950.00	11i
ii. Unitemized	1,250.00	20,268.00	11ii
iii. Total (add i and ii) ➤	8,050.00	115,218.00	11iii
b. Political Party Committees			11b
c. Other Political Committees (such as PACs)			11c
d. Total Contributions (add a iii, b and c) ➤	8,050.00	115,218.00	11d
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)	448.22	2,289.28	17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	8,498.22	117,507.28	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	8,498.22	117,507.28	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	0	608.00	21i
ii. Non-Federal Share	0	177.00	21ii
b. Other Federal Operating Expenditures	123.45	1,118.50	21b
c. Total Operating Expenditures (add a i, a ii, and b) ➤	123.45	1,903.50	21c
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	11,000.00	210,840.30	23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees			28a
b. Political Party Committees			28b
c. Other Political Committees (such as PACs)			28c
d. Total Contribution Refunds (add a, b and c) ➤			28d
29. Other Disbursements			29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	11,123.45	212,743.80	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	11,123.45	212,566.80	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	8,050.00	115,218.00	32
33. Total Contribution Refunds (from line 28d)			33
34. Net Contributions (other than loans)(subtract line 33 from 32)	8,050.00	115,218.00	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	123.45	1,726.50	35
36. Offsets to Operating Expenditures (from line 15)	0	0	36
37. Net Operating Expenditures (subtract line 36 from 35) ➤	123.45	1,726.50	37

4-00173

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

AMERICAN ACADEMY OF OPHTHALMOLOGY, INC. POLITICAL COMMITTEE (OPHTHPAC)

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Union Bank of California 350 California Street San Francisco CA 94104	N/A	5/29/98	448.22
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional) .....

TOTAL This Period (last page this line number only) 448.22

FEAANt01

American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)
Itemized Receipts
Contributions from Individuals Other than Political Committees
SCHEDULE A
From 05/01/98 To 05/31/98

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NAME and ADDRESS	EMPLOYER/OCCUPATION	YTD AMOUNT	DATE	RECEIPT AMOUNT
Zakhour Isam J 602 East Cheves Street PO Box 100534 Florence SC 29501-0534	Self-Employed Ophthalmologist	200.00	05/05/98	200.00
Day Susan H Suite 100 2340 Clay Street San Francisco CA 94115	Self Employed Ophthalmologist	500.00	05/05/98	500.00
Petty Stephen T Suite 505 850 East Harvard Avenue Denver CO 80210	Silva CPA*David W Ophthalmologist	500.00	05/05/98	500.00
Ranz David O 1811 Waterford Road Murfreesboro TN 37129	Univ of Tennessee Ophthalmologist	200.00	05/05/98	200.00
Wiley Lee A 5217 Walnut Ridge Road Erie PA 16506	Ophthalmologist	200.00	05/05/98	200.00
Herrington Ronald Glenn #403 1190 North State Street Jackson MS 39202	Eye Specialists of MS Ophthalmologist	300.00	05/05/98	300.00

Subtotal: 1,900.00

Itemized Receipts
Contributions from Individuals Other than Political Committees
SCHEDULE A
From 05/01/98 To 05/31/98

Line Number 11a i

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NAME and ADDRESS	EMPLOYER/OCCUPATION	YTD AMOUNT	DATE RECEIPT	AMOUNT
Miller Kevin N Jules Stein Eye Institute 100 Stein Plaza, UCLA Los Angeles CA 90095-7002	SELF EMPLOYED Ophthalmologist	300.00	05/08/98	300.00
Haffner Peter 299 Washington Ave Hamden CT 06518	Self-Employed Ophthalmologist	300.00	05/08/98	300.00
Snyder Robert W 1801 North Campbell Ave Tucson AZ 85719	UNIV OF ARIZ Ophthalmologist	300.00	05/08/98	300.00
Moore Malcolm Sidney 1429 Oglethorpe Street Macon GA 31201	CENTRAL GEORGIA EYEC Ophthalmologist	300.00	05/08/98	300.00
Guerra Michael E 244 Wesley Drive Kerrville TX 78028	Vanderbilt Ophthalmologist	300.00	05/12/98	300.00
Loewy David H 407 Avenue K SE Winter Haven FL 33880	EYE CHNU OF MID FL P Ophthalmologist	200.00	05/12/98	200.00

Subtotal: 1,700.00

Contributions from Individuals Other than Political Committees
SCHEDULE A
From 05/01/98 To 05/31/98

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NAME and ADDRESS	EMPLOYER/OCCUPATION	YTD AMOUNT	DATE	RECEIPT AMOUNT
Buzney Sheldon H Retina Specialists Boston/4th Fl 100 Charles River Plaza Boston MA 02114	RETINA ASSOCIATES Ophthalmologist	200.00	05/12/98	200.00
Monica Monica L 143 Robert E Lee Blvd New Orleans LA 70124	Savage*Kendra B Ophthalmologist	300.00	05/12/98	300.00
Truhlsen Stanley H 10086 Fieldcrest Drive Omaha NE 68114-4938	Ophthalmologist	300.00	05/12/98	300.00
Abel Robert Jr Concord Plaza Hamans Building 3501 Silverside Road Wilmington DE 19810	DE Ophth Consultants Ophthalmologist	200.00	05/21/98	200.00
Schlichtemeier William R 4124 Farnam Street Omaha NE 68131	Self-Employed Ophthalmologist	300.00	05/21/98	300.00
Nelson Eric Suite 355 6545 France Avenue South Edina MN 55435	UCLA Ophthalmologist	300.00	05/21/98	300.00

Subtotal: 1,600.00

American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)
Itemized Receipts
Contributions from Individuals Other than Political Committees
SCHEDULE A
From 05/01/98 To 05/31/98

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NAME and ADDRESS	EMPLOYER/OCCUPATION	YTD AMOUNT	DATE	RECEIPT AMOUNT
Sassani Joseph W 304 Candlewyck Lane Hershey PA 17033	Pennstate Hershey Ophthalmologist	200.00	05/21/98	200.00
McEwen Michael A Suite 304 100 Medical Center Drive Gadsden AL 35903-1130	Self-Employed Ophthalmologist	600.00	05/21/98	300.00
Speights James W Suite 820 7940 Floyd Curl San Antonio TX 78229	Self-Employed Ophthalmologist	500.00	05/21/98	500.00
Jacobs Ivan H 40 Stirling Road Watchung NJ 07060	SELF-EMPLOYED Ophthalmologist	300.00	05/21/98	300.00
Mauer Richard C Mauer Eye Center PC 3410 Kimball Ave Waterloo IA 50702	Self-Employed Ophthalmologist	300.00	05/21/98	300.00

Subtotal: 1,600.00

TOTAL: 6,800.00

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE I OF 1

FOR LINE NUMBER 21b

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, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Novus Services Inc 12 Readsway New Castle, DE 19720	Merchant Fees Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	5/6/98	8.40
B. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Union Bank of California 350 California Street San Francisco CA 94104	Merchant Fees Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	5/1/98	115.05
C. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
D. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
E. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
F. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
G. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
H. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
I. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		

SUBTOTAL of Disbursements This Page (optional)	123.45
TOTAL This Period (last page this line number only)	123.45

FE4AN101

American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)
Itemized Disbursements
Contributions to Federal Candidates and Other Political Committees
Schedule B
From 05/01/98 To 05/31/98

Any information copied from such Reports or 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 and ADDRESS	DISBURSEMENT PURPOSE	DATE	AMOUNT
Democratic Congl Cmpgn Committee 430 South Capitol Street SE Washington DC 20003	COMMITTEE / / DC /	05/06/98	5,000.00
Ferguson for Senate 2000 S Rhodes Suite B W Memphis AR 72301	SENATE / / AR 98 / Primary	05/06/98	2,500.00
Maloney for Congress 49 East 92nd Street New York NY 10128	HOUSE / 14 / NY 98 / Primary	05/06/98	1,000.00
Walden for Congress PO Box 360 Hood River OR 97031	HOUSE / 2 / OR 98 / Primary	05/06/98	2,500.00
Rick Hill For Congress Committee Box 2157 Helena MT 59604	HOUSE / ALRG / MT 98 / Primary	05/14/98	1,000.00
Hooley for Congress 6545 Failing Street West Linn OR 97068	HOUSE / 5 / OR 98 / Primary	05/14/98	1,000.00

Subtotal: 13,000.00

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NAME and ADDRESS	DISBURSEMENT PURPOSE	DATE	AMOUNT
Gary Miller for Congress PO Box 4682 Diamond Bar CA 91	HOUSE / 41 / CA 98 / Primary	05/26/98	1,000.00
Bill Thomas Campaign Committee PO Box 395 Bakersfield CA 93302	HOUSE / 21 / CA 98 / General	05/26/98	2,500.00
Friends of Blanche Lincoln Cmpgn PO Box 3197 Little Rock AR	SENATE / / AR 98 / RUNOFF	05/28/98	2,500.00
Pete Sessions for Congress Comm PO Box 140970 Dallas TX 75214	HOUSE / 5 / TX 98 / General	05/28/98	1,000.00

Subtotal: 7,000.00

TOTAL: 20,000.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

AMERICAN ACADEMY OF OPHTHALMOLOGY, INC. POLITICAL COMMITTEE (OPHTHPAC)

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
Natl Republican Senatorial Comm. 425 Second Street, NE Washington, DC 20002	Check Voided Issued in error	4/17/98	<1,000.00>
Republican Victory 98 4100 Truxtun Avenue, Ste 210 Bakersfield, CA 93309	Check voided Issued in error	4/17/98	<5,000.00>
Democratic Congl Cmpgn Comm 430 South Capitol Street, SE Washington, DC 20003	Check voided Issued in error	4/17/98	<2,000.00>
Wes Watkins for Congress Box WW Stillwater, OK 74076	Check voided 1998 Primary State	4/17/98	<1,000.00>

SUBTOTAL of Disbursements This Page (optional) <9,000.00>

TOTAL This Period (last page this line number only) 11,000.00

FE4AN101

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☐	Hand Delivered	Date of Receipt
☐	First Class Mail	POSTMARKED
☑	Registered/Certified Mail	POSTMARKED 6-19-98
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House office of Records and Registration	Date of Receipt
☐	Received from the Senate Office of Public Records	Date of Receipt
☐	Other (Specify):	Postmarked _____ and/or Date of Receipt
☐	Electronic Filing	

SGP — PREPARER

6-22-98 — DATE PREPARED

(4/98)