FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (In full) — **USE FEC MAILING LABEL OR TYPE OR PRINT** ▼ — Example: If typing, type over the lines

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 ▲ | ZIPCODE ▲

2. **FEC IDENTIFICATION NUMBER** ▼ C00196246

3. IS THIS REPORT — NEW (N) X **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 Quarterly 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)	X Oct 20 (M10)		Jan 31 (YE)

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

Election on ____ in the State of ____

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

Election on ____ in the State of ____

5. Covering Period 09 01 2005 through 09 30 2005

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: Benjamin Bank

Signature of Treasurer: Electronically Filed by Benjamin Bank — Date 10 07 2005

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							

FEC FORM 3X
(Rev. 02/2003)

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: 09 01 2005 To: 09 30 2005

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2005		313215.30
(b) Cash on Hand at Begining of Reporting Period	282662.45	
(c) Total Receipts (from Line 19)	103663.95	389169.58
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	386526.40	702384.88
7. Total Disbursements (from Line 31)	52986.40	368844.88
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	333540.00	333540.00
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	

X 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

Write or Type Committee Name

American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)

Report Covering the Period: From: 09 01 2005 To: 09 30 2005

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)	90320.00	342003.75
(ii) Unitemized	13063.75	41923.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	103383.75	383926.75
(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) ▶	103383.75	383926.75
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	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	260.20	5242.83
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 Transfer (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))	103663.95	389169.58
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	103663.95	389169.58

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) Shared 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	2486.40	11503.63
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)) ▶	2486.40	11503.63
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	50000.00	356000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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	500.00	1341.25
(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)) ▶	500.00	1341.25
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20)) (a) Shared 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))	52986.40	368844.88
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)	52986.40	368844.88

DETAILED SUMMARY PAGE

of Disbursements

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)	103383.75	383926.75
34. Total Contribution Refunds (from Line 28(d))	500.00	1341.25
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	102883.75	382585.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	2486.40	11503.63
37. Offsets to Operating Expenditures (from Line 15. page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2486.40	11503.63

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 95
(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)
Robert Abel
Mailing Address Concord Plaza Naamans Building
3501 Silverside Road
City: Wilmington | State: DE | Zip Code: 19810-4910
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: 09 19 2005
Transaction ID: 70WP7N766560
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
John Allevio
Mailing Address Suite 100
4605 Brockton Avenue
City: Riverside | State: CA | Zip Code: 92506-0106
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: 09 01 2005
Transaction ID: 0517328
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Omar Almallah
Mailing Address the Focus Center
20 Mule Road
City: Toms River | State: NJ | Zip Code: 08755-5028
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: 09 27 2005
Transaction ID: FBCNWR6U1XD71
Amount of Each Receipt this Period: 250.00
PACWEB GENERATED CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **980.00**

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: PAGE 7 / 95
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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial)
Louis Alpern
Mailing Address Suite D100
4171 N Mesa Street
City: El Paso | State: TX | Zip Code: 79902-1444
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: 09 26 2005
Transaction ID: 70X2N4459213
Amount of Each Receipt this Period: 1000.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Kenneth Arnand
Mailing Address 5939 Colerain Avenue
City: Cincinnati | State: OH | Zip Code: 45239-6413
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: 09 26 2005
Transaction ID: 70X281083545
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Bette Anderson
Mailing Address Kies Eye Center
1000 W Deyoung
City: Marion | State: IL | Zip Code: 62959-1630
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: 09 26 2005
Transaction ID: 70X2KL638426
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1865.00**

TOTAL 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 8 / 95
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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)

A.
Full Name (Last, First, Middle Initial)
James Antoszyk
Mailing Address Charlotte Eent Assoc; Pa
6035 Fairview Road
City: Charlotte | State: NC | Zip Code: 28210-3256
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: 09 26 2005
Transaction ID: 70X2PN412481
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

B.
Full Name (Last, First, Middle Initial)
Amir Arbisser
Mailing Address 777 Tanglefoot Lane
City: Bettendorf | State: IA | Zip Code: 52722-1650
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: 750.00

Date of Receipt: 09 16 2005
Transaction ID: 06595-23772829771042
Amount of Each Receipt this Period: 125.00
PAC 2nd of 4

C.
Full Name (Last, First, Middle Initial)
Lisa Arbisser
Mailing Address 777 Tanglefoot Lane
City: Bettendorf | State: IA | Zip Code: 52722-1650
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: 09 02 2005
Transaction ID: D385640
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **855.00**

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: PAGE 9 / 95
(check only one)
X 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)
Robert John Barnes
Mailing Address 1300 N Highland Avenue
City: Aurora | State: IL | Zip Code: 60506-1451
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: 09 20 2005
Transaction ID: 70WP7N658475
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
J. Bronwyn Bateman
Mailing Address Rocky Mountain Lions Eye Inst
Campus Box F-731; PO Box 6510
City: Aurora | State: CO | Zip Code: 80045
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: 09 20 2005
Transaction ID: 70WP7N584419
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Alan Baum
Mailing Address 7710 Beechnut Street #100
City: Houston | State: TX | Zip Code: 77074-3108
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: 09 07 2005
Transaction ID: CH4DC1466221
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1230.00**

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: PAGE 10 / 85
(check only one)
X 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)
Paul Beer
Mailing Address Lions Eye Institute
35 Hackett Boulevard
City: Albany | State: NY | Zip Code: 12208-3420
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: 09 08 2005
Transaction ID: CH41W572475
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
William Benevento
Mailing Address 5891 Craigin Bluff Court
City: Bettendorf | State: IA | Zip Code: 52722-6589
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: 09 14 2005
Transaction ID: CH4GWY373455
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Sanders Bankwith
Mailing Address 2752 Zelda Road
City: Montgomery | State: AL | Zip Code: 36106-2654
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: 09 07 2005
Transaction ID: CH4191926144
Amount of Each Receipt this Period: 1000.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1730.00**

TOTAL 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 11 / 85
(check only one)

X 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)
Joseph Bentivegna
Mailing Address 541 Cromwell Avenue
City: Rocky Hill | State: CT | Zip Code: 06067-1805
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: 09 13 2005
Transaction ID: CH4FDB721012
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
J. Chandler Berg
Mailing Address Suite 110
2709 Meredyth Drive
City: Albany | State: GA | Zip Code: 31707-0222
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: 09 13 2005
Transaction ID: CH4FDB967883
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Brian Berger
Mailing Address 3705 Medical Parkway
Suite 410
City: Austin | State: TX | Zip Code: 78705-1019
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: 09 02 2005
Transaction ID: D028924
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

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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FOR LINE NUMBER: PAGE 12 / 85
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X 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)
Robert Berry
Mailing Address Suite 301
9600 Lile Drive
City: Little Rock | State: AR | Zip Code: 72205-6229
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: 09 12 2005
Transaction ID: CH4BVC858170
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Jerome Bettman
Mailing Address 3910 Sand Hill Road
City: Woodside | State: CA | Zip Code: 94062-1231
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: 09 26 2005
Transaction ID: 70X2KL844232
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Thomas William Biggs
Mailing Address 5825 S Main Street Suite 202
City: Clarkston | State: MI | Zip Code: 48346-2583
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: 09 12 2005
Transaction ID: CH4C2F56B484
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1230.00**

TOTAL 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 13 / 85
(check only one)

X 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)
Peter Breingan
Mailing Address Apt. 3C
325 E 79th Street
City: New York | State: NY | Zip Code: 10021-0854
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: 09 23 2005
Transaction ID: 70WUVF447545
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Thomas Brewington
Mailing Address 807 Summit Avenue
City: Greensboro | State: NC | Zip Code: 27405-7833
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: 09 13 2005
Transaction ID: CH4FDB322047
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Robert Bruce
Mailing Address Midwest Retina; Inc
500 E Main Street Suite 300
City: Columbus | State: OH | Zip Code: 43215-5369
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: 09 19 2005
Transaction ID: 70WP7N436471
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1230.00**

TOTAL 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 14 / 85
(check only one)
X 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)
Frederick Bruening
Mailing Address 5014 Villa Linde Parkway
City: Flint | State: MI | Zip Code: 48532-3411
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: 09 13 2005
Transaction ID: CH4FDB572806
Amount of Each Receipt this Period: 1000.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Mario Bruno
Mailing Address 3723 Seneca Street
City: West Seneca | State: NY | Zip Code: 14224-3452
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: 09 02 2005
Transaction ID: 0307533
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Robert Burlingame
Mailing Address 1303 N Travis Street
City: Sherman | State: TX | Zip Code: 75092-5138
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: 09 07 2005
Transaction ID: CH419191D928
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1730.00**

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: PAGE 15 / 85
(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)
Henry Burnett
Mailing Address 730 Highland Oaks Drive Suite 203
City: Winston-Salem | State: NC | Zip Code: 27103-7108
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: 09 07 2005
Transaction ID: CH40C1208737
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Charlotte Burns
Mailing Address 1850 Summit Avenue
City: Madison | State: WI | Zip Code: 53726-4075
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: 09 02 2005
Transaction ID: 0951938
Amount of Each Receipt this Period: 250.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Mark Cabin
Mailing Address 1575 N Barrington Road Suite #120
City: Hoffman Estates | State: IL | Zip Code: 60194-1062
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: 09 20 2005
Transaction ID: 70WP7N781611
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ 980.00

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: PAGE 16 / 85
(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)
Douglas Carlson
Mailing Address Suite 100
1719 Tower Dr. W
City: Stillwater | State: MN | Zip Code: 55082-7512
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: 09 07 2005
Transaction ID: CH4DC1450238
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Ronald Caronia
Mailing Address Floor 3
360 Merrick Road
City: Lynbrook | State: NY | Zip Code: 11563-2500
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: 09 12 2005
Transaction ID: CH4C2F121389
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Troy Carter
Mailing Address 1750 Pine Street
City: Abilene | State: TX | Zip Code: 79601-3044
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: 09 07 2005
Transaction ID: CH4DC1612714
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1230.00**

TOTAL 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 17 / 85
(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)
Joyce Cassen
Mailing Address Suite 212
850 W Hind Drive
City: Honolulu | State: HI | Zip Code: 96821-1855
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: 09 02 2005
Transaction ID: 0838858
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Barry Chaiken
Mailing Address 825 Park Avenue
City: New York | State: NY | Zip Code: 10021-6545
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: 09 12 2005
Transaction ID: CH4C2F144481
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Joseph Chappell
Mailing Address 610 Brunson Drive
City: Tupelo | State: MS | Zip Code: 38801-4547
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: 09 14 2005
Transaction ID: CH4GWY712803
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1095.00**

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: PAGE 18 / 85
(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)
George Chioran
Mailing Address Comprehensive Eyecare Central Oh
5957 Cleveland Avenue
City: Columbus | State: OH | Zip Code: 43231-2202
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: 09 23 2005
Transaction ID: 70WUVF420494
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Dennis Chuck
Mailing Address 1774 Alameda Street
City: Pomona | State: CA | Zip Code: 91768-1727
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: 09 07 2005
Transaction ID: CH4191261277
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Jay Clark
Mailing Address 175 N 400 W
City: Orem | State: UT | Zip Code: 84057-1509
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: 09 06 2005
Transaction ID: CH3ZVK592556
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1230.00**

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: PAGE 19 / 85
(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)
Robert Clark
Mailing Address 7575 W Grand River
City: Brighton | State: MI | Zip Code: 48114-9309
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: 09 23 2005
Transaction ID: 70WUVF840253
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Sander M. Zeskin Cohen
Mailing Address Suite 11
509 S Lenola Road
City: Moorestown | State: NJ | Zip Code: 08057-1561
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: 09 20 2005
Transaction ID: 70WP7N827536
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
John Colombo
Mailing Address 22835 Kelly Road
City: Eastpointe | State: MI | Zip Code: 48021-2073
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: 09 07 2005
Transaction ID: CH419121B855
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1095.00**

TOTAL 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 20 / 85
(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)
Thomas Conklin
Mailing Address Suite 22
294 E Moana Lane
City: Reno | State: NV | Zip Code: 89502-4641
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: 09 03 2005
Transaction ID: FIB5EV
Amount of Each Receipt this Period: 250.00
PACWEB GENERATED CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
David Locke Cooke
Mailing Address 4842 W Chapin Lane
City: Berrien Springs | State: MI | Zip Code: 49103-9631
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: 09 20 2005
Transaction ID: 70WPKC873168
Amount of Each Receipt this Period: 250.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Kim Cooper
Mailing Address Suite 235
1720 El Camino Real
City: Burlingame | State: CA | Zip Code: 94010-3224
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: 09 09 2005
Transaction ID: CH42EW556877
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **865.00**

TOTAL 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 21 / 85
(check only one)
X 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)
Frank Cotter
Mailing Address Vistar Eye Center
PO Box 1789
City: Roanoke | State: VA | Zip Code: 24008-1789
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: 09 09 2005
Transaction ID: CH42N8196233
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
David Craig
Mailing Address PO Box 680
1600 Highway 79 South
City: Henderson | State: TX | Zip Code: 75653-0680
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: 09 20 2005
Transaction ID: 70WP7N104048
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Anthony D'Amato
Mailing Address 27 Baker Avenue
City: Dover | State: NJ | Zip Code: 07801-2501
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: 09 02 2005
Transaction ID: D709937
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1230.00**

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: PAGE 22 / 85
(check only one)
X 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)
Edgar Depremont
Mailing Address PO Box 6545
City: Gulfport | State: MS | Zip Code: 39506-6545
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: 09 22 2005
Transaction ID: 06595-03802126646041
Amount of Each Receipt this Period: 250.00
PAC 2ND OF 4

B. Full Name (Last, First, Middle Initial)
Bill Davenport
Mailing Address 2090 Southeast Ocean Boulevard
City: Stuart | State: FL | Zip Code: 34996-3304
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: 09 07 2005
Transaction ID: CH4191421448
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Paul DeGregorio
Mailing Address Nine S Spring Street
City: Concord | State: NH | Zip Code: 03301-2425
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: 09 07 2005
Transaction ID: CH4191255241
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1115.00**

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: PAGE 23 / 85
(check only one)
X 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)
Ellen Dehm
Mailing Address Masci and Dehm Eye Associates
160 Pleasant Street
City: Attleboro | State: MA | Zip Code: 02703-2443
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: 09 06 2005
Transaction ID: CH3ZVK113007
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Patrick Dennis
Mailing Address 116-B Ashley Avenue
City: Charleston | State: SC | Zip Code: 29401-1249
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: 09 21 2005
Transaction ID: 06595-61389477720261
Amount of Each Receipt this Period: 250.00
PAC 2nd of 4

C. Full Name (Last, First, Middle Initial)
Donald Dickerson
Mailing Address 1908 Santa Monica Blvd Suite 3
City: Santa Monica | State: CA | Zip Code: 90404
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: 09 01 2005
Transaction ID: D3811D6
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ 1250.00

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: PAGE 24 / 85
(check only one)
X 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)
John Drouilhet
Mailing Address Suite 502
1329 Lusitana Street
City: Honolulu | State: HI | Zip Code: 96813-2429
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: 300.00

Date of Receipt: 09 13 2005
Transaction ID: CH4FDB528064
Amount of Each Receipt this Period: 300.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Paul Dunn
Mailing Address 275 Harvard Street
City: Fall River | State: MA | Zip Code: 02720-4125
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: 09 07 2005
Transaction ID: CH4191548637
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Dion Ehrlich
Mailing Address Suite 103
7500 Central Avenue
City: Philadelphia | State: PA | Zip Code: 19111-2430
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: 09 22 2005
Transaction ID: 70WUS2392340
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1165.00**

TOTAL 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 25 / 85
(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)
Francisco Fantes
Mailing Address Bascom Palmer Eye Institute
900 Northwest 17th Street
City: Miami | State: FL | Zip Code: 33136-1119
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: 09 15 2005
Transaction ID: CH4GWY682834
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
George Fava
Mailing Address 875 Norman Drive
City: Lebanon | State: PA | Zip Code: 17042-7454
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: 09 19 2005
Transaction ID: 70WP7N855485
Amount of Each Receipt this Period: 400.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Natalia Fedorov
Mailing Address 3301 Lake Avenue
City: Fort Wayne | State: IN | Zip Code: 46805-5523
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: 300.00

Date of Receipt: 09 13 2005
Transaction ID: CH4FDB311315
Amount of Each Receipt this Period: 300.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1065.00**

TOTAL 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 26 / 85
(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)
William Fein
Mailing Address Suite 200
415 N Crescent Drive
City: Beverly Hills | State: CA | Zip Code: 90210-4660
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: 09 01 2005
Transaction ID: 0303414
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
James Falch
Mailing Address 117 Abbotsford Drive
City: Nashville | State: TN | Zip Code: 37215-2439
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: 09 11 2005
Transaction ID: 16166-11889284849166
Amount of Each Receipt this Period: 125.00
PAC 4th of 4 prnts

C. Full Name (Last, First, Middle Initial)
Robert Feldman
Mailing Address 180 Boston Avenue
City: Altamonte Springs | State: FL | Zip Code: 32701-4708
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: 09 20 2005
Transaction ID: 70WP7N418D91
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ 855.00

TOTAL 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 27 / 85
(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)
Stephen Felton
Mailing Address 56 White Oak Drive
City: Princeton | State: NJ | Zip Code: 08540-1230
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: 09 15 2005
Transaction ID: CH4GWY415654
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Robert Fier
Mailing Address 1441 E Ocean Boulevard
City: Stuart | State: FL | Zip Code: 34996-2613
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: 09 13 2005
Transaction ID: CH4E2S542707
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
David Fischer
Mailing Address 256 Lankenau Medical Building East
100 Lancaster
City: Wynnewood | State: PA | Zip Code: 19096-3450
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: 09 07 2005
Transaction ID: CH4191836757
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1230.00**

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: PAGE 28 / 85
(check only one)
X 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)
Richard Fish
Mailing Address Vitreoretinal Cnslts
6560 Fannin Suite 750
City: Houston | State: TX | Zip Code: 77030-2725
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: 09 20 2005
Transaction ID: 70WPKC807048
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Brian Flowers
Mailing Address 1201 Summit Avenue
City: Fort Worth | State: TX | Zip Code: 76102-4427
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: 09 27 2005
Transaction ID: 70X4CT054655
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Jerry Ford
Mailing Address 2020 Fleischmann Road
City: Tallahassee | State: FL | Zip Code: 32308-4599
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: 09 19 2005
Transaction ID: 70WP7N362592
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1095.00**

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: PAGE 29 / 85
(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)
Peter Forgach
Mailing Address 405 International Drive
City: Williamsville | State: NY | Zip Code: 14221-5725
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: 09 12 2005
Transaction ID: CH4C2F118153
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Brett Taylor Foxman
Mailing Address 1500 Tilton Road
City: Northfield | State: NJ | Zip Code: 08225-1827
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: 09 14 2005
Transaction ID: CH4GWY636773
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Kay Ellen Frank
Mailing Address 4420 Beta Avenue
City: Cleveland | State: OH | Zip Code: 44105-3152
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: 09 28 2005
Transaction ID: 70X8MA402185
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1095.00**

TOTAL 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

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(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)
L. Neal Freeman
Mailing Address Florida Eye Associates
502 East New Haven Avenue
City: Melbourne | State: FL | Zip Code: 32901-5427
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: 300.00

Date of Receipt: 09 13 2005
Transaction ID: CH4FDB519344
Amount of Each Receipt this Period: 900.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Ronald Freeman
Mailing Address 755 South Milwaukee Avenue
North 150
City: Libertyville | State: IL | Zip Code: 60048-3253
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: 09 14 2005
Transaction ID: CH4GWY647670
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Robert Fry
Mailing Address 217 Old York Road
City: Dillsburg | State: PA | Zip Code: 17019-9318
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: 09 07 2005
Transaction ID: CH4191222285
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1030.00**

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: PAGE 31 / 85
(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)
David Fuerst
Mailing Address Suite 308
1535 W Merced Avenue
City: West Covina | State: CA | Zip Code: 91790-3404
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: 09 26 2005
Transaction ID: 70X2PN683888
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Gretchen Fuerste
Mailing Address 20922 Country Squire Lane
City: Dubuque | State: IA | Zip Code: 52001-8002
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation: Ophthalmologist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 365.00

Date of Receipt: 09 06 2005
Transaction ID: CH3ZVK144616
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Geoffrey Garrett
Mailing Address Highland Clinic
1455 E Bert Kouns
City: Shreveport | State: LA | Zip Code: 71105-5634
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: 09 13 2005
Transaction ID: CH4FDBB30896
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1095.00**

TOTAL 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

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(check only one)

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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)
John Garrett
Mailing Address 1301 Carpenter Avenue
City: Iron Mountain | State: MI | Zip Code: 49801-4725
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: 09 13 2005
Transaction ID: CH4FDB196986
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Gerald Gaul
Mailing Address North Dakota Eye Clinic
3035 Demers Avenue
City: Grand Forks | State: ND | Zip Code: 58201-4018
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: 09 20 2005
Transaction ID: 70WPKC943648
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Andrew Gilles
Mailing Address 1 Lyons Street
City: Dedham | State: MA | Zip Code: 02026-5569
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: 09 07 2005
Transaction ID: CH4DC1545835
Amount of Each Receipt this Period: 250.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1250.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 33 / 85
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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial)
William Gillum
Mailing Address 1519 E Sixth Street
City: Weslaco | State: TX | Zip Code: 78596-6605
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: 09 06 2005
Transaction ID: CH3ZVK292145
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Howard Goldman
Mailing Address 950 Northwest 13th Street
City: Boca Raton | State: FL | Zip Code: 33486-2310
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: 09 13 2005
Transaction ID: CH4FGS868126
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Richard Gordon
Mailing Address 3 Medical Park Drive
City: Pomona | State: NY | Zip Code: 10970-3518
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: 09 12 2005
Transaction ID: CH4BVC482542
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

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)
Tom Gordon
Mailing Address 2853 Freeport Road
City: Natrona Heights | State: PA | Zip Code: 15065-1905
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: 09 26 2005
Transaction ID: 70X281575168
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Marc Grinberg
Mailing Address 101 Doctors Gardens
1880 Arlington Street
City: Sarasota | State: FL | Zip Code: 34239-3524
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: 09 02 2005
Transaction ID: 0873812
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Harry Grossman
Mailing Address Suite 115
100 Brick Road
City: Marlton | State: NJ | Zip Code: 08053-2148
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: 09 13 2005
Transaction ID: F3MDG7GAD4HC0
Amount of Each Receipt this Period: 365.00
PACWEB GENERATED CONTRIBUTION

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)
John Haley
Mailing Address Garland Ophthalmology Center
1626 Forest Lane Suite B
City: Garland | State: TX | Zip Code: 75042-7843
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: 750.00

Date of Receipt: 09 23 2005
Transaction ID: 06595-64358156919480
Amount of Each Receipt this Period: 250.00
PAC 3rd of 4

B. Full Name (Last, First, Middle Initial)
Bernis H. Hanson
Mailing Address 705 14th Avenue Northeast
City: Watertown | State: SD | Zip Code: 57201-6827
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: 09 28 2005
Transaction ID: 70X6MA764273
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
James Haug
Mailing Address 605 Commercial
City: Atchison | State: KS | Zip Code: 66002-2404
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: 09 07 2005
Transaction ID: CH4191722606
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **980.00**

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)
Stewart Hazel

Mailing Address Duluth Clinic Ophth
400 E Third Street

City: Duluth | State: MN | Zip Code: 55805-1951

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: 09 15 2005
Transaction ID: CH4HX2712676
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Mamix Heersink

Mailing Address 2800 Ross Clark Circle Southwest

City: Dothan | State: AL | Zip Code: 36301-2017

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: 09 07 2005
Transaction ID: CH4191543738
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Raymond Hernandez

Mailing Address Suite 103
19202 Stone Oak Parkway

City: San Antonio | State: TX | Zip Code: 78258-5288

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: 09 13 2005
Transaction ID: CH4FDB370232
Amount of Each Receipt this Period: 250.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **980.00**

TOTAL 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 37 / 85
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X 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)
Charles Hof
Mailing Address Boozman-Hof Clinic
PO Box 1353
City: Rogers | State: AR | Zip Code: 72757-1353
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: 09 19 2005
Transaction ID: 70WP7N506579
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
John Haines
Mailing Address 1630 Adams Street
City: Mankato | State: MN | Zip Code: 56001-4801
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: 09 07 2005
Transaction ID: CH4191543232
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Robert Hsieh
Mailing Address 6510 Kenilworth Avenue
City: Riverdale | State: MD | Zip Code: 20737-1339
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: 09 07 2005
Transaction ID: CH419174D258
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1230.00**

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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X 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)
W. Jackson Iliff
Mailing Address Suite 7
4 W Rolling Crossroads
City: Catonsville | State: MD | Zip Code: 21228-6280
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: 625.00

Date of Receipt: 09 07 2005
Transaction ID: CH40C1796032
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC refunded 9.8

B.
Full Name (Last, First, Middle Initial)
W. Jackson Iliff
Mailing Address Suite 7
4 W Rolling Crossroads
City: Catonsville | State: MD | Zip Code: 21228-6280
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: 625.00

Date of Receipt: 09 08 2005
Transaction ID: CH411S086235
Amount of Each Receipt this Period: 125.00
Batch Tool - PAC

C.
Full Name (Last, First, Middle Initial)
Morton Israel
Mailing Address Suite 1X
770 Magnolia Avenue
City: Corona | State: CA | Zip Code: 92879-3120
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: 09 01 2005
Transaction ID: D258873
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **990.00**

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: PAGE 39 / 85
(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)
Leonard Joffe
Mailing Address St. Joseph's Medical Plaza
6561 East Carondelet Drive
City: Tucson | State: AZ | Zip Code: 85710-2156
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: 09 13 2005
Transaction ID: CH4E2S895807
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
David Johnson
Mailing Address Suite 101
10619 N Hayden Road
City: Scottsdale | State: AZ | Zip Code: 85260-8510
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: 09 20 2005
Transaction ID: 70WPKC415975
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Carol Johnston
Mailing Address Office Park Eye Center
6 Office Park Drive
City: Jacksonville | State: NC | Zip Code: 28546-7325
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: 09 07 2005
Transaction ID: CH4191607048
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1230.00**

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: PAGE 40 / 85
(check only one)

X 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)
Michael Kass

Mailing Address Department of Ophthal and Visual S
660 S Euclid Avenue; Campus Box 80

City: St. Louis | State: MO | Zip Code: 63110

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: 09 02 2005
Transaction ID: 0101177
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Dennis Khoury

Mailing Address 8118 Bustleton Avenue

City: Philadelphia | State: PA | Zip Code: 19152-2809

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: 09 07 2005
Transaction ID: CH40C1991165
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
David Kim

Mailing Address 1316 Wilmington Island Road

City: Savannah | State: GA | Zip Code: 31410-4513

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: 09 02 2005
Transaction ID: D223246
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1230.00**

TOTAL 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 41 / 85
(check only one)
X 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)
Richard Kim
Mailing Address Unit 3
25351 Boots Road
City: Monterey | State: CA | Zip Code: 93940-6658
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: 09 29 2005
Transaction ID: 70X8FJ836309
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Patrick King
Mailing Address 911 W Third
City: Yankton | State: SD | Zip Code: 57078-3709
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: 09 12 2005
Transaction ID: CH4C2F324228
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Dennis Kontra
Mailing Address 5802 Washington Avenue
City: Racine | State: WI | Zip Code: 53406-4050
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: 09 07 2005
Transaction ID: CH4191431842
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1095.00**

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: PAGE 42 / 85
(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)
Michael Korey
Mailing Address 3982 North Milwaukee Avenue
City: Chicago | State: IL | Zip Code: 60641-2703
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: 09 02 2005
Transaction ID: 0174544
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Christopher Kuntz
Mailing Address 12105 Northeast 33rd Street
City: Bellevue | State: WA | Zip Code: 98005-1203
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: 09 07 2005
Transaction ID: CH4191127239
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Brian LaGrees
Mailing Address 2908 Thousand Oaks Street
City: Billings | State: MT | Zip Code: 59102-0763
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: 09 02 2005
Transaction ID: D275942
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1095.00**

TOTAL 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 43 / 85
(check only one)

X 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)
James Landers
Mailing Address Suite 200
9800 Lile Drive
City: Little Rock | State: AR | Zip Code: 72205-6229
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: 09 07 2005
Transaction ID: CH4DC1470385
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Kurt Lavik
Mailing Address 854 Craigmont Lane
City: Concord | State: NC | Zip Code: 28027-6442
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: 09 02 2005
Transaction ID: 0557627
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Bruce Larson
Mailing Address 126 West First Street
City: Hinsdale | State: IL | Zip Code: 60521-4013
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: 09 07 2005
Transaction ID: CH4DC14B1829
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1095.00**

TOTAL 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 44 / 85
(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)
Christopher Larson
Mailing Address 1442 N 31st Street
City: Sheboygan | State: WI | Zip Code: 53081-3061
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: 09 19 2005
Transaction ID: 70WP7N274094
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Jonathan Lass
Mailing Address 11100 Euclid Avenue
City: Cleveland | State: OH | Zip Code: 44106-1736
FEC ID number of contributing federal political committee: C
Name of Employer: University Ophthalmologists: Inc.
Occupation: Ophthalmologist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 04 2005
Transaction ID: 6P707N1KTBIF
Amount of Each Receipt this Period: 250.00
PAC/WEB GENERATED CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
Mitchel Lautenberg
Mailing Address: Ocean Eye Institute, 601 Route 37 W
City: Toms River | State: NJ | Zip Code: 08755-6050
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: 09 20 2005
Transaction ID: 70WPKC120768
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1115.00**

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: PAGE 45 / 85
(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)
Kent Leavitt
Mailing Address Suite 450
1135 116th Avenue Northeast
City: Bellevue | State: WA | Zip Code: 98004-4623
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: 09 07 2005
Transaction ID: CH4DC1437440
Amount of Each Receipt this Period: 1000.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
William Lee
Mailing Address 349 Folly Road
City: Charleston | State: SC | Zip Code: 29412-2508
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: 09 06 2005
Transaction ID: CH3ZVK496483
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Elise Leonard
Mailing Address Suite 300
8890 W Oakland Park Boulevard
City: Sunrise | State: FL | Zip Code: 33351-7235
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: 09 07 2005
Transaction ID: CH4DC1550971
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1730.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 46 / 85
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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial)
Cecily Leska
Mailing Address North Jersey Eye Assoc
1005 Clifton Avenue
City: Clifton | State: NJ | Zip Code: 07013-3520
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: 09 20 2005
Transaction ID: 70WPKC215436
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Robert Lesser
Mailing Address the Eye Care Group
40 Temple Street; Suite 5B
City: New Haven | State: CT | Zip Code: 06510-2715
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: 300.00

Date of Receipt: 09 26 2005
Transaction ID: 70X2KL368127
Amount of Each Receipt this Period: 300.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Andrew Lewada
Mailing Address the Eye Care Group Pc
1201 W Main Street Suite 100
City: Waterbury | State: CT | Zip Code: 06708-3105
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: 09 13 2005
Transaction ID: CH4FDBD24361
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1030.00**

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)
David Levine
Mailing Address Suite H2
19271 Montgomery Village Avenue
City: Montgomery Village | State: MD | Zip Code: 20886-5021
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: 09 07 2005
Transaction ID: CH40C1188780
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Scott Limstrom
Mailing Address 10228 Stewart Drive
City: Eagle River | State: AK | Zip Code: 99577-9509
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: 09 17 2005
Transaction ID: F5ZLGXAEJW076
Amount of Each Receipt this Period: 500.00
PAC/WEB GENERATED CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
Mark Lindsay
Mailing Address 2725 E 29th Street
City: Bryan | State: TX | Zip Code: 77802-2504
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: 09 13 2005
Transaction ID: CH4FDB613786
Amount of Each Receipt this Period: 25.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **890.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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X 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)
Richard Mark Lipman
Mailing Address Suite A
8679 Connecticut Street
City: Merrillville | State: IN | Zip Code: 46410-6386
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: 09 07 2005
Transaction ID: CH40C1121383
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Robert Liss
Mailing Address Village of Cross Keys
2 Hamill Road Suite 315
City: Baltimore | State: MD | Zip Code: 21210-1813
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: 09 08 2005
Transaction ID: CH411S774717
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Samuel Liu
Mailing Address Princeton Eye Group
419 N Harrison Street
City: Princeton | State: NJ | Zip Code: 08540-3521
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: 09 15 2005
Transaction ID: CH4GWY431374
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1230.00**

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: PAGE 49 / 85
(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)
Lawrence Lohman
Mailing Address 2013 State Route 59
City: Kent | State: OH | Zip Code: 44240-4113
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: 09 28 2005
Transaction ID: 70X6MA571364
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
James Lusk
Mailing Address 451 Ashley Ridge Boulevard #2 Minden Medical Plaza
City: Shreveport | State: LA | Zip Code: 71106-7229
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: 09 13 2005
Transaction ID: CH4FDB726054
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Charles Lyon
Mailing Address 836 Olive Street
City: Shreveport | State: LA | Zip Code: 71104-2102
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: 09 06 2005
Transaction ID: CH3ZVK034167
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1230.00**

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: PAGE 50 / 85
(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)
David Mallory
Mailing Address 1240 Southwest 44th
City: Oklahoma City | State: OK | Zip Code: 73109-3604
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: 09 20 2005
Transaction ID: 70WPKC451054
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Dale Manjoney
Mailing Address 2720 Main Street
City: Bridgeport | State: CT | Zip Code: 06606-5208
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: 750.00

Date of Receipt: 09 07 2005
Transaction ID: CH4191176058
Amount of Each Receipt this Period: 750.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Mark Mannis
Mailing Address Uc Davis Department of Ophthalmolo
4860 Y Street #2400
City: Sacramento | State: CA | Zip Code: 95817-2307
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: 09 15 2005
Transaction ID: CH4H9H262800
Amount of Each Receipt this Period: 250.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1365.00**

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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(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)
Thomas Marvelli
Mailing Address 6273 Granbury Road
City: Fort Worth | State: TX | Zip Code: 76133-3401
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: 09 20 2005
Transaction ID: 70WPKC311737
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
G. Philip Matthews
Mailing Address 5421 La Sierra Drive
City: Dallas | State: TX | Zip Code: 75231-4107
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: 09 14 2005
Transaction ID: CH4FZ6700176
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Raj Mehul
Mailing Address Midwest Eye Institute
201 Pennsylvania Parkway
City: Indianapolis | State: IN | Zip Code: 46280-2301
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: 09 02 2005
Transaction ID: 3E4BIDJN8BIF
Amount of Each Receipt this Period: 500.00
PACWEB GENERATED CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **1365.00**

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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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)
David McClure
Mailing Address 1255 Pineview Drive
City: Morgantown | State: WV | Zip Code: 26505-2713
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: 09 30 2005
Transaction ID: 06595-21784809556198
Amount of Each Receipt this Period: 250.00
PAC 2nd of 4

B. Full Name (Last, First, Middle Initial)
John McGetrick
Mailing Address Gessler Clinic
635 First St. N
City: Winter Haven | State: FL | Zip Code: 33881-4129
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: 09 12 2005
Transaction ID: CH4BVC433119
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Edward McGill
Mailing Address Suite 405
7710 Mercy Road
City: Omaha | State: NE | Zip Code: 68124-2372
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: 09 12 2005
Transaction ID: CH4C2F32B122
Amount of Each Receipt this Period: 250.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **865.00**

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: PAGE 53 / 85
(check only one)
X 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)
Norman Medow
Mailing Address 225 East 64th Street
City: New York | State: NY | Zip Code: 10021-6690
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: 09 13 2005
Transaction ID: CH4FDB539363
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Calvin Mein
Mailing Address Suite 166
4499 Medical Drive
City: San Antonio | State: TX | Zip Code: 78229-3735
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: 09 20 2005
Transaction ID: 70WP7N648874
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Toufic Meki
Mailing Address the Retina Cntrs of Wash
15020 Shady Grove Road Suite 302
City: Rockville | State: MD | Zip Code: 20850-3379
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: 09 21 2005
Transaction ID: 70WSUS141860
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1095.00**

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: PAGE 54 / 85
(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)
Anita Miedziak
Mailing Address Princeton Eye Group
419 N Harrison Street
City: Princeton | State: NJ | Zip Code: 08540-3521
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: 09 15 2005
Transaction ID: CH4GWY694882
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Carl Migliazzo
Mailing Address 7504 Antioch Road
City: Overland Park | State: KS | Zip Code: 66204-2622
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: 09 02 2005
Transaction ID: 0532502
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Lawrence Minard
Mailing Address Suite 1
500 Donnally Street
City: Charleston | State: WV | Zip Code: 25301-1648
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: 09 02 2005
Transaction ID: D048817
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1365.00**

TOTAL 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 55 / 85
(check only one)
X 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)
Harvey Minatoya
Mailing Address Minatoya Eye Clinic
1003 Pensacola Street
City: Honolulu | State: HI | Zip Code: 96814-1927
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: 09 13 2005
Transaction ID: CH4FDB228436
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Perry Mollick
Mailing Address One Center Lane
City: Levittown | State: NY | Zip Code: 11756-1032
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: 09 13 2005
Transaction ID: CH4FDB539623
Amount of Each Receipt this Period: 250.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Dan Montzka
Mailing Address Suite 106
11031 US Highway 19
City: Port Richey | State: FL | Zip Code: 34668-2248
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: 09 07 2005
Transaction ID: CH4DC1634836
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ 980.00

TOTAL 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 56 / 85
(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)
Sanford Moretsky
Mailing Address 2125 West Indian School Road
City: Phoenix | State: AZ | Zip Code: 85015-4808
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: 09 13 2005
Transaction ID: CH4FDB894791
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
John Morrison
Mailing Address Casey Eye Institute
3375 Southwest Terwilliger Bouleva
City: Portland | State: OR | Zip Code: 97239-4146
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: 09 13 2005
Transaction ID: CH4FDB275886
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Frank Moya
Mailing Address Suite 100
2025 Frontis Plaza Boulevard
City: Winston-Salem | State: NC | Zip Code: 27103-5883
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: 09 07 2005
Transaction ID: CH4DC1018885
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1230.00**

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: PAGE 57 / 85
(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)
Paul Moyer
Mailing Address 520 Bruton Circle
City: Kettering | State: OH | Zip Code: 45429-1624
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: 09 20 2005
Transaction ID: 70WPKC254228
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
G. Peyton Nestrour
Mailing Address 2676 Wimbledon Point Drive
City: Virginia Beach | State: VA | Zip Code: 23454-1167
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: 09 20 2005
Transaction ID: 70WPKC546804
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Steven Newman
Mailing Address PO Box 800715
City: Charlottesville | State: VA | Zip Code: 22908-0715
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: 09 26 2005
Transaction ID: 70X2PN517769
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1230.00**

TOTAL 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 58 / 85
(check only one)

X 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)
Mildred M. G. Olivier
Mailing Address Suite 110
1575 N Barrington Road
City: Hoffman Estates | State: IL | Zip Code: 60194-1057
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: 09 01 2005
Transaction ID: 0145265
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
William Orenberg
Mailing Address 31 Centennial Drive
City: Peabody | State: MA | Zip Code: 01960-7901
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: 350.00

Date of Receipt: 09 07 2005
Transaction ID: CH4191485224
Amount of Each Receipt this Period: 350.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Samuel Packer
Mailing Address 84 Beverly Road
City: Great Neck | State: NY | Zip Code: 11021-1621
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: 09 12 2005
Transaction ID: CH4BVC637511
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1080.00**

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: PAGE 59 / 85
(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)
Kirk Packo
Mailing Address Rush University Medical Center
1725 W Harrison Street Suite 931
City: Chicago | State: IL | Zip Code: 60612-3841
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: 365.00

Date of Receipt: 09 22 2005
Transaction ID: 70WUS2854245
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Shawn Parker
Mailing Address 360 S Mount Auburn Road
City: Cape Girardeau | State: MO | Zip Code: 63703-4920
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: 09 14 2005
Transaction ID: CH4GWY699588
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Daniel Petashnick
Mailing Address 732 Main Street
City: Manchester | State: CT | Zip Code: 06040-5108
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: 09 07 2005
Transaction ID: CH4191011728
Amount of Each Receipt this Period: 250.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **980.00**

TOTAL 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 60 / 85
(check only one)

X 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)
Anthony Pilavas
Mailing Address 25-09 31st Avenue
City: Astoria | State: NY | Zip Code: 11106-3620
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: 09 07 2005
Transaction ID: CH41BE512922
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Jonathan Ply
Mailing Address 3911 Highway 17 Bypass
City: Murrells Inlet | State: SC | Zip Code: 29576-5014
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: 09 06 2005
Transaction ID: CH3YQG507518
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Daniel Pope
Mailing Address 426 Manatee Avenue W
City: Bradenton | State: FL | Zip Code: 34205-8845
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: 09 19 2005
Transaction ID: 70WP7N882338
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1095.00**

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: PAGE 61 / 85
(check only one)
X 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)
Peter Pritchett
Mailing Address 1800 E Pavilion Place
City: Montrose | State: CO | Zip Code: 81401-5337
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: 09 13 2005
Transaction ID: CH4E2S683617
Amount of Each Receipt this Period: 1000.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Brian Renelle
Mailing Address 1872 Norwood Drive
City: Hurst | State: TX | Zip Code: 76054-3066
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: 09 20 2005
Transaction ID: 70WP7N912822
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
David Renz
Mailing Address Stones River Eye Center
171 Heritage Park Drive
City: Murfreesboro | State: TN | Zip Code: 37129-1573
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: 09 06 2005
Transaction ID: CH3YQG928826
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1730.00**

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: PAGE 62 / 85
(check only one)

X 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)
Silas Read
Mailing Address 957 Baxter Street
City: Athens | State: GA | Zip Code: 30606-3754
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: 09 01 2005
Transaction ID: 0894885
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
John Reifschneider
Mailing Address Reifschneider Eye Center and Optic
1001 6th Avenue Suite 100
City: Leavenworth | State: KS | Zip Code: 66048-3248
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: 09 12 2005
Transaction ID: CH4C2F712566
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
R. David Reynolds
Mailing Address 419 North Harrison Street
City: Princeton | State: NJ | Zip Code: 08540-3521
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: 09 15 2005
Transaction ID: CH4GWY235075
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1230.00**

TOTAL 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 63 / 85
(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)
Alexander Glen Rico
Mailing Address 2200 Northwest Myhre
City: Silverdale | State: WA | Zip Code: 98383-7681
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: 09 13 2005
Transaction ID: CH4FDB314347
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
John Denis Roarty
Mailing Address Childrens Hosp-Department of Ophth
3901 Beaubien
City: Detroit | State: MI | Zip Code: 48201-2119
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: 09 27 2005
Transaction ID: 70X4T2754254
Amount of Each Receipt this Period: 250.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
David Robinson
Mailing Address Delaware Eye Inst
18791 John J Williams Highway
City: Rehoboth Beach | State: DE | Zip Code: 19971-4401
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: 09 19 2005
Transaction ID: 70WP7N576572
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **980.00**

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: PAGE 64 / 85
(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)
Lawrence Ronning
Mailing Address 8046 Whipple Avenue
City: North Canton | State: OH | Zip Code: 44720-7616
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: 09 07 2005
Transaction ID: CH41BE289900
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Teresa Rosales
Mailing Address Suite 108
4100 Long Beach Boulevard
City: Long Beach | State: CA | Zip Code: 90807-2696
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: 09 01 2005
Transaction ID: 0846714
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Steven Rosenfeld
Mailing Address Delray Eye Assoc
16201 S Military Trail
City: Delray Beach | State: FL | Zip Code: 33484-6503
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: 09 23 2005
Transaction ID: 70WUVF129217
Amount of Each Receipt this Period: 250.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ 980.00

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: PAGE 65 / 85
(check only one)

X 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)
Jay Rudd
Mailing Address Clarus Eye Centre
420 Lilly Road Northeast
City: Olympia | State: WA | Zip Code: 98506-5132
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: 09 12 2005
Transaction ID: CH4C2F815287
Amount of Each Receipt this Period: 250.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Matthew Runde
Mailing Address W5534 Southdale Drive
City: La Crosse | State: WI | Zip Code: 54601-7147
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: 09 07 2005
Transaction ID: CH41BE159561
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Norman Saffra
Mailing Address Med and Surg Eyesite Pc
902 49th Street
City: Brooklyn | State: NY | Zip Code: 11219-2922
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: 09 08 2005
Transaction ID: CH411S681627
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **980.00**

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: PAGE 66 / 85
(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)
E. Ronald Salvitti

Mailing Address 750 East Beau Street
Southwestern Pa Eye Center

City: Washington | State: PA | Zip Code: 15301-6661

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: 300.00

Date of Receipt: 09 02 2005
Transaction ID: 0503561
Amount of Each Receipt this Period: 300.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Eugene Martin Sanvitz

Mailing Address Bethlehem Eye Assoc
1530 8th Avenue

City: Bethlehem | State: PA | Zip Code: 18018-1883

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: 09 07 2005
Transaction ID: CH41BE815785
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Robert Sax

Mailing Address 2222 6th Avenue

City: Troy | State: NY | Zip Code: 12180-2203

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: 09 29 2005
Transaction ID: D6595-170B1006D40573
Amount of Each Receipt this Period: 125.00
PAC 2nd of 4

SUBTOTAL of Receipts This Page (optional) ▶ **790.00**

TOTAL 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 67 / 85
(check only one)

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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)
Kirk Scattergood
Mailing Address 2253 W Mason Street
City: Green Bay | State: WI | Zip Code: 54303-4706
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: 09 26 2005
Transaction ID: 06595-13778922935104
Amount of Each Receipt this Period: 125.00
PAC 2nd of 4

B. Full Name (Last, First, Middle Initial)
Matthew Schmick
Mailing Address 7600 W College Drive
City: Palos Heights | State: IL | Zip Code: 60463-1001
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: 09 07 2005
Transaction ID: CH41BE454547
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Loren Schrenk
Mailing Address Suite 201
12818 Tesson Ferry Road
City: St. Louis | State: MO | Zip Code: 63128-2545
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: 09 20 2005
Transaction ID: 70WP7N912773
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **990.00**

TOTAL 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 68 / 85
(check only one)
X 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)
Ivan Schwab
Mailing Address Uc Davis/Department Ophthalmology
4860 Y Street Suite 2400
City: Sacramento | State: CA | Zip Code: 95817-2307
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: 09 26 2005
Transaction ID: 70X281101192
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

B.
Full Name (Last, First, Middle Initial)
Arthur Schwartz
Mailing Address Suite 950
5454 Wisconsin Avenue
City: Chevy Chase | State: MD | Zip Code: 20815-6901
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: 09 27 2005
Transaction ID: 70X4CT474363
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C.
Full Name (Last, First, Middle Initial)
Joseph Schwartz
Mailing Address Atlantic Retina Center Pa
31455 Winterplace Parkway
City: Salisbury | State: MD | Zip Code: 21804-1891
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: 09 07 2005
Transaction ID: CH4DC1914848
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1230.00**

TOTAL 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 69 / 85
(check only one)

X 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)
Richard Seeger
Mailing Address 1015 Ridge Road
City: Webster | State: NY | Zip Code: 14580-2807
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: 09 02 2005
Transaction ID: 0629203
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Christian Serdahl
Mailing Address 4925 J Street
City: Sacramento | State: CA | Zip Code: 95819-3828
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: 730.00

Date of Receipt: 09 12 2005
Transaction ID: CH4C2F525807
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
William Shechtman
Mailing Address 1725 E Prospect Road
City: Fort Collins | State: CO | Zip Code: 80525-1307
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: 09 12 2005
Transaction ID: CH4C2F684250
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1230.00**

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: PAGE 70 / 85
(check only one)

X 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)
David Shepherd
Mailing Address Suite 103
41935 W 12 Mile Road
City: Novi | State: MI | Zip Code: 48377-3111
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: 09 06 2005
Transaction ID: CH3ZVK464331
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
M. Bruce Shields
Mailing Address Yale Union Sch Med-Ophth and Vista
330 Cedar Street PO Box 208061
City: New Haven | State: CT | Zip Code: 06510-3218
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: 09 02 2005
Transaction ID: 0109457
Amount of Each Receipt this Period: 250.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
James Shreck
Mailing Address 1307 South Willow
City: North Platte | State: NE | Zip Code: 69101-6011
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: 09 26 2005
Transaction ID: 70X2KL364073
Amount of Each Receipt this Period: 1000.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1615.00**

TOTAL 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 71 / 85
(check only one)

X 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)
Piero Simone
Mailing Address 4101 Wentworth Drive
City: Troy | State: MI | Zip Code: 48098-5913
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: 09 06 2005
Transaction ID: CH3ZVK910834
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Harinderjit Singh
Mailing Address Suite 201
3685 Wheeler Road
City: Augusta | State: GA | Zip Code: 30909-6446
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: 300.00

Date of Receipt: 09 02 2005
Transaction ID: 0318365
Amount of Each Receipt this Period: 300.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Peter Christian Smith
Mailing Address Clearwater Eye and Laser Center
610 Lakeview Road
City: Clearview | State: FL | Zip Code: 33758-3338
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: 09 01 2005
Transaction ID: D855012
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1165.00**

TOTAL 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 72 / 85
(check only one)

X 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)
Stephen Smith
Mailing Address 4225 Evans Avenue
City: Fort Myers | State: FL | Zip Code: 33901-9311
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: 09 01 2005
Transaction ID: 0211912
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Jeffery Snow
Mailing Address South 427 Bernard
City: Spokane | State: WA | Zip Code: 99204-2509
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: 09 26 2005
Transaction ID: 70X281655958
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Michael Stagner
Mailing Address Attn: Barbara J.
2403 Stockton Hill Road; Suite 1
City: Kingman | State: AZ | Zip Code: 86401-4188
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: 09 07 2005
Transaction ID: CH41BE541B60
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

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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FOR LINE NUMBER: PAGE 73 / 85
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X 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)
Robert Stamper
Mailing Address Ucsf Department Ophthalmology
10 Koret Way Room K-301
City: San Francisco | State: CA | Zip Code: 94143-0001
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: 09 07 2005
Transaction ID: CH40C1852555
Amount of Each Receipt this Period: 250.00
Batch Tool - PAC

B.
Full Name (Last, First, Middle Initial)
Drew Stoken
Mailing Address 338 Alexander Spring Road
City: Carlisle | State: PA | Zip Code: 17013-9129
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: 09 08 2005
Transaction ID: GDQDPGAH24HC
Amount of Each Receipt this Period: 500.00
PAC/WEB GENERATED CONTRIBUTION

C.
Full Name (Last, First, Middle Initial)
Domenic Strazzulla
Mailing Address Suite 1A1
500 Congress Street
City: Quincy | State: MA | Zip Code: 02169-0508
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: 09 13 2005
Transaction ID: CH4FDB137204
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1115.00**

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: PAGE 74 / 85
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X 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)
Marvin Talansky
Mailing Address 3333 Fairmont Avenue
City: Asbury Park | State: NJ | Zip Code: 07712-4010
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: 09 12 2005
Transaction ID: CH4C2F492522
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
William Tasman
Mailing Address Suite 1510
840 Walnut Street
City: Philadelphia | State: PA | Zip Code: 19107-5109
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: 09 07 2005
Transaction ID: CH41BE353453
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Richard Tax
Mailing Address Tricounty Eye Physicians Surgeons
319 2nd Street Pike
City: Southampton | State: PA | Zip Code: 18966-3812
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: 09 23 2005
Transaction ID: 70WUVF123462
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1230.00**

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: PAGE 75 / 85
(check only one)
X 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)
Stuart Terry
Mailing Address 1100 N Main Avenue
City: San Antonio | State: TX | Zip Code: 78212-4701
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: 09 07 2005
Transaction ID: CH40C1838857
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Lyle Teska
Mailing Address 304 S Cottonwood Suite A
City: Richardson | State: TX | Zip Code: 75080-5702
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: 09 02 2005
Transaction ID: 0376284
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Gregory Lee Thorgaard
Mailing Address 135 Deppe Lane
City: Ottumwa | State: IA | Zip Code: 52501-1218
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: 09 13 2005
Transaction ID: CH4E2S700782
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1230.00**

TOTAL 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 76 / 85
(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)
Isaac Torem
Mailing Address 2932 Youngstown Road
City: Warren | State: OH | Zip Code: 44484-5259
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: 09 01 2005
Transaction ID: 0581853
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Sebastian Troia
Mailing Address 515 N 98th Street
City: Omaha | State: NE | Zip Code: 68114-2344
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: 09 13 2005
Transaction ID: CH4FGS720376
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Gary Tylock
Mailing Address 3100 N Macarthur Boulevard
City: Irving | State: TX | Zip Code: 75062-4451
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: 09 19 2005
Transaction ID: 70WP7N420B78
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1365.00**

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: PAGE 77 / 85
(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)
Sara Vegh

Mailing Address Suite 105
1660 W Winchester Road

City: Libertyville | State: IL | Zip Code: 60048-5321

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: 09 07 2005
Transaction ID: CH40C1738716
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Michael Versackas

Mailing Address Suite 202
1212 Pleasant Street

City: Des Moines | State: IA | Zip Code: 50309-1414

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: 09 01 2005
Transaction ID: 0500851
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Mark Volpicelli

Mailing Address 1174 Castro Street
Suite 100

City: Mountain View | State: CA | Zip Code: 94040-2568

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: 09 08 2005
Transaction ID: CH411SB23049
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1095.00**

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: PAGE 78 / 85
(check only one)

X 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)
Stephen Wahman
Mailing Address 111 W Lincoln
City: Belleville | State: IL | Zip Code: 62220-2019
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: 09 06 2005
Transaction ID: CH3ZVK468359
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Charles Wesley
Mailing Address Suite 101
18051 River Avenue
City: Noblesville | State: IN | Zip Code: 46062-7091
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: 09 12 2005
Transaction ID: CH4C2F941659
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Amy Weider
Mailing Address 509 S Lenola Road
Suite 11
City: Lenola | State: NJ | Zip Code: 08057-1561
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: 09 20 2005
Transaction ID: 70WP7N974425
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1230.00**

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: PAGE 79 / 85
(check only one)

X 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)
Maynard Wheeler
Mailing Address PO Box 538
10 Sandy Brae
City: Grantham | State: NH | Zip Code: 03753-0538
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: 09 13 2005
Transaction ID: CH4E2S621451
Amount of Each Receipt this Period: 250.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Thomas Whitaker
Mailing Address 900 Med Circle
City: Myrtle Beach | State: SC | Zip Code: 29572-4114
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: 625.00

Date of Receipt: 09 06 2005
Transaction ID: CH3YQG273413
Amount of Each Receipt this Period: 625.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Wayne Whitmore
Mailing Address 116 E 68th Street
City: New York | State: NY | Zip Code: 10021-5555
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: 09 01 2005
Transaction ID: D0711B3
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1240.00**

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: PAGE 80 / 85
(check only one)

X 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)
Martyn Wills
Mailing Address 211 North Eddy Street
City: South Bend | State: IN | Zip Code: 46617-2808
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: 09 13 2005
Transaction ID: CH4E2S526855
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Donald Wilson
Mailing Address 201 Pennsylvania Parkway
City: Indianapolis | State: IN | Zip Code: 46280-2201
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: 09 26 2005
Transaction ID: 70X281502758
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Richard Winslow
Mailing Address 3414 Oak Grove Avenue
City: Dallas | State: TX | Zip Code: 75204-2375
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: 09 21 2005
Transaction ID: 70WRPY744227
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1365.00**

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: PAGE 81 / 85
(check only one)

X 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)
Jonathan Wise
Mailing Address 3816 Hollywood Boulevard Suite 101
City: Hollywood | State: FL | Zip Code: 33021-6750
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: 09 07 2005
Transaction ID: CH40C1368143
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Chauncey Witcraft
Mailing Address 310 Second Avenue Southwest
City: Miami | State: OK | Zip Code: 74354-6743
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: 09 13 2005
Transaction ID: CH4FDB223383
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Michael Wong
Mailing Address 419 N Harrison Street
City: Princeton | State: NJ | Zip Code: 08540-3521
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: 09 15 2005
Transaction ID: CH4GWY049475
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1365.00**

TOTAL 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 82 / 85
(check only one)

X 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)
Richard Wong
Mailing Address 419 N Harrison Street
City: Princeton | State: NJ | Zip Code: 08540-3521
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: 09 15 2005
Transaction ID: CH4GWY314675
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Lawrence Wright
Mailing Address Suite 150
3100 Timmons Lane
City: Houston | State: TX | Zip Code: 77027-5926
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: 300.00

Date of Receipt: 09 07 2005
Transaction ID: CH41BE022526
Amount of Each Receipt this Period: 300.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Robert Arthur Yohai
Mailing Address 884 Second Street
City: Santa Rosa | State: CA | Zip Code: 95404-4810
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: 09 02 2005
Transaction ID: D712250
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶	**1165.00**
TOTAL This Period (last page this line number only) ▶	**90320.00**

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 83 / 85
(check only one)

11a	11b	11c	12	
13	14	15	16	X 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)
Union Bank

Mailing Address 400 California Street

City: San Francisco | State: CA | Zip Code: 94104

FEC ID number of contributing federal political committee: C

Name of Employer | Occupation

Receipt For:
Primary General
Other (specify)

Aggregate Year-to-Date: 393.36

Date of Receipt: 09 30 2005

Transaction ID: SB30050510075752429

Amount of Each Receipt this Period: 55.20

MM interest 9/05

SUBTOTAL of Receipts This Page (optional)	55.20
TOTAL This Period (last page this line number only)	55.20

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)

[X] 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)
AAO SURGICAL SCOPE FUND

Mailing Address 655 BEACH ST

City: SAN FRANCISCO | State: CA | Zip Code: 94109

Purpose of Disbursement: AAO SSF funds

Candidate Name

Category/ Type

Office Sought: House / Senate / President

State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: VD1962705090953900912

Date of Disbursement: 09 / 12 / 2005

Amount of Each Disbursement this Period: 200.00

B. Full Name (Last, First, Middle Initial)
Union Bank

Mailing Address 400 California Street

City: San Francisco | State: CA | Zip Code: 94104

Purpose of Disbursement: Bank charges 9/05

Candidate Name

Category/ Type

Office Sought: House / Senate / President

State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: 9725410510075747992

Date of Disbursement: 09 / 30 / 2005

Amount of Each Disbursement this Period: 2130.15

SUBTOTAL of Disbursements This Page (optional) ▶	2330.15
TOTAL This Period (last page this line number only) ▶	2330.15

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)
Berkley for Congress

Mailing Address 9069 Conquista Court

City: Las Vegas | State: NV | Zip Code: 89121

Purpose of Disbursement: 2006 Primary

Candidate Name: Berkley Shelley

Category/ Type:

Office Sought: X House / Senate / President
State: NV District: 01

Disbursement For: 2006
X Primary / General / Other (specify)

Transaction ID: 6712630509023821017
Date of Disbursement: 09 / 06 / 2005

Amount of Each Disbursement this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
Bilirakis for Congress

Mailing Address 610 S Boulevard

City: Tampa | State: FL | Zip Code: 33606

Purpose of Disbursement: 2006 Primary

Candidate Name: Bilirakis Gus

Category/ Type:

Office Sought: X House / Senate / President
State: FL District: 09

Disbursement For: 2006
X Primary / General / Other (specify)

Transaction ID: 5975870509215786413
Date of Disbursement: 09 / 22 / 2005

Amount of Each Disbursement this Period: 2500.00

C. Full Name (Last, First, Middle Initial)
Capuano for Congress Committee

Mailing Address PO Box 440305

City: Somerville | State: MA | Zip Code: 02144

Purpose of Disbursement: 2006 Primary

Candidate Name: Capuano Michael

Category/ Type:

Office Sought: X House / Senate / President
State: MA District: 08

Disbursement For: 2006
X Primary / General / Other (specify)

Transaction ID: 1140180509285270690
Date of Disbursement: 09 / 29 / 2005

Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶ **4500.00**

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)
Charlie Melancon Campaign Committee Inc

Mailing Address 511 Congress Street
PO Box 549

City: Napoleonville | State: LA | Zip Code: 70390

Purpose of Disbursement: 2006 Primary

Candidate Name: Melancon Charlie

Category/ Type:

Office Sought: X House / Senate / President

State: LA District: 03

Disbursement For: 2006 X Primary / General / Other (specify)

Transaction ID: 4644220509154634253
Date of Disbursement: 09 / 19 / 2005

Amount of Each Disbursement this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
Cleaver for Congress

Mailing Address 2300 Main Street Suite 1000

City: Kansas City | State: MO | Zip Code: 64108

Purpose of Disbursement: 2006 Primary

Candidate Name: Cleaver Emanuel

Category/ Type:

Office Sought: X House / Senate / President

State: MO District: 05

Disbursement For: 2006 X Primary / General / Other (specify)

Transaction ID: 7003530509154889011
Date of Disbursement: 09 / 19 / 2005

Amount of Each Disbursement this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
Democratic Senatorial Campaign Committee

Mailing Address 120 Maryland Avenue Northeast

City: Washington | State: DC | Zip Code: 20002

Purpose of Disbursement: 2005 Contribution

Candidate Name:

Category/ Type:

Office Sought: House / Senate / President

State: District:

Disbursement For: Primary / General / Other (specify)

Transaction ID: 7545950509023858298
Date of Disbursement: 09 / 06 / 2005

Amount of Each Disbursement this Period: 5000.00

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)
Dnc Services Corporation/Democratic National Committee

Mailing Address 430 South Capitol Street Southeast

City: Washington | State: DC | Zip Code: 20003

Purpose of Disbursement: 2005 Contribution

Candidate Name:

Category/ Type:

Office Sought: ☐ House ☐ Senate ☐ President — State: District:

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Transaction ID: 5094330509215908984
Date of Disbursement: 09 / 22 / 2005

Amount of Each Disbursement this Period: 5000.00

B. Full Name (Last, First, Middle Initial)
Donald A. Manzullo for Congress

Mailing Address PO Box 7783
PO Box 7783

City: Rockford | State: IL | Zip Code: 61126

Purpose of Disbursement: 2006 Primary

Candidate Name: Manzullo Donald

Category/ Type:

Office Sought: ☒ House ☐ Senate ☐ President — State: IL District: 16

Disbursement For: 2006 ☒ Primary ☐ General ☐ Other (specify)

Transaction ID: 9440590509023719671
Date of Disbursement: 09 / 06 / 2005

Amount of Each Disbursement this Period: 2500.00

C. Full Name (Last, First, Middle Initial)
Friends for Jim McDermott

Mailing Address PO Box 21788

City: Seattle | State: WA | Zip Code: 98111

Purpose of Disbursement: 2006 Primary

Candidate Name: McDermott Jim

Category/ Type:

Office Sought: ☒ House ☐ Senate ☐ President — State: WA District: 07

Disbursement For: 2006 ☒ Primary ☐ General ☐ Other (specify)

Transaction ID: 7794080509023749457
Date of Disbursement: 09 / 06 / 2005

Amount of Each Disbursement this Period: 1000.00

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 Sherrod Brown

Mailing Address 607 14th Street Northwest
Suite 800

City: Washington | State: DC | Zip Code: 20005

Purpose of Disbursement: 2006 Primary

Candidate Name: Brown Sherrod

Category/ Type

Office Sought: ☒ House ☐ Senate ☐ President
State: OH District: 13

Disbursement For: 2006
☒ Primary ☐ General ☐ Other (specify)

Transaction ID: B8548605091546746B0
Date of Disbursement: 09 / 19 / 2005

Amount of Each Disbursement this Period: 2500.00

B. Full Name (Last, First, Middle Initial)
Hatch Election Committee Inc

Mailing Address 175 South West Temple Suite 650

City: Salt Lake City | State: UT | Zip Code: 84101

Purpose of Disbursement: 2006 Primary

Candidate Name: Hatch Orrin

Category/ Type

Office Sought: ☐ House ☒ Senate ☐ President
State: UT District: 00

Disbursement For: 2006
☒ Primary ☐ General ☐ Other (specify)

Transaction ID: 50074805090238511B7
Date of Disbursement: 09 / 06 / 2005

Amount of Each Disbursement this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
Hulshof for Congress

Mailing Address Post Office Box 1621

City: Columbia | State: MO | Zip Code: 65010

Purpose of Disbursement: 2006 Primary

Candidate Name: Hulshof Kenny

Category/ Type

Office Sought: ☒ House ☐ Senate ☐ President
State: MO District: 09

Disbursement For: 2006
☒ Primary ☐ General ☐ Other (specify)

Transaction ID: 8191230509154862292
Date of Disbursement: 09 / 19 / 2005

Amount of Each Disbursement this Period: 2000.00

SUBTOTAL of Disbursements This Page (optional) ▶ **5500.00**

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)
Mark Kennedy 06

Mailing Address PO Box 49333

City: Blaine | State: MN | Zip Code: 55449

Purpose of Disbursement: 2006 Primary

Candidate Name: Kennedy Mark

Category/ Type

Office Sought: X House / Senate / President
State: MN District: 06

Disbursement For: 2006
X Primary / General / Other (specify)

Transaction ID: 918346050892159026 46
Date of Disbursement: 09 / 22 / 2005

Amount of Each Disbursement this Period: 1000.00

B.
Full Name (Last, First, Middle Initial)
Mark Kennedy 06

Mailing Address PO Box 49333

City: Blaine | State: MN | Zip Code: 55449

Purpose of Disbursement: 2006 Primary

Candidate Name: Kennedy Mark

Category/ Type

Office Sought: X House / Senate / President
State: MN District: 06

Disbursement For: 2006
X Primary / General / Other (specify)

Transaction ID: B65686050892852897 87
Date of Disbursement: 09 / 29 / 2005

Amount of Each Disbursement this Period: 2000.00

C.
Full Name (Last, First, Middle Initial)
Mark Kennedy 06

Mailing Address PO Box 49333

City: Blaine | State: MN | Zip Code: 55449

Purpose of Disbursement: 2006 Primary

Candidate Name: Kennedy Mark

Category/ Type

Office Sought: X House / Senate / President
State: MN District: 06

Disbursement For: 2006
X Primary / General / Other (specify)

Transaction ID: 967491050902984078 4
Date of Disbursement: 09 / 06 / 2005

Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶ **4000.00**

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)
Matheson for Congress

Mailing Address 677 South 200 West
Suite A

City: Salt Lake City | State: UT | Zip Code: 84101

Purpose of Disbursement: 2006 Primary

Candidate Name: Matheson Jim

Category/ Type:

Office Sought: X House / Senate / President
State: UT District: 02

Disbursement For: 2006
X Primary / General / Other (specify)

Transaction ID: 5491720509023811162
Date of Disbursement: 09 / 06 / 2005

Amount of Each Disbursement this Period: 1000.00

B.
Full Name (Last, First, Middle Initial)
Mike Bilirakis for Congress

Mailing Address PO Box 1077

City: Tarpon Springs | State: FL | Zip Code: 34688

Purpose of Disbursement: 2006 Primary

Candidate Name: Bilirakis Michael

Category/ Type:

Office Sought: X House / Senate / President
State: FL District: 09

Disbursement For: 2006
X Primary / General / Other (specify)

Transaction ID: D619250509215780621
Date of Disbursement: 09 / 14 / 2005

Amount of Each Disbursement this Period: -2500.00

Uncashed Contribution

C.
Full Name (Last, First, Middle Initial)
Mike Bilirakis for Congress

Mailing Address PO Box 1077

City: Tarpon Springs | State: FL | Zip Code: 34688

Purpose of Disbursement: 2006 Primary

Candidate Name: Bilirakis Michael

Category/ Type:

Office Sought: X House / Senate / President
State: FL District: 09

Disbursement For: 2006
X Primary / General / Other (specify)

Transaction ID: 28874705091548 14313
Date of Disbursement: 09 / 19 / 2005

Amount of Each Disbursement this Period: 2500.00

SUBTOTAL of Disbursements This Page (optional) ▶ **1000.00**

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)
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☐ 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)
Mike Dewine for Us Senate

Mailing Address PO Box 340188

City: Columbus | State: OH | Zip Code: 43234

Purpose of Disbursement: 2006 Primary

Candidate Name: DeWine Mike

Category/ Type:

Office Sought: House / X Senate / President — State: OH — District: 00

Disbursement For: 2006 — X Primary / General / Other (specify)

Transaction ID: D5708205090285297337
Date of Disbursement: 09 / 29 / 2005

Amount of Each Disbursement this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
Norwood for Congress

Mailing Address PO Box 499
PO Box 499

City: Evans | State: GA | Zip Code: 30809

Purpose of Disbursement: 2006 Primary

Candidate Name: Norwood Charlie

Category/ Type:

Office Sought: X House / Senate / President — State: GA — District: 09

Disbursement For: 2006 — X Primary / General / Other (specify)

Transaction ID: 2158580509154826758
Date of Disbursement: 09 / 19 / 2005

Amount of Each Disbursement this Period: 5000.00

C. Full Name (Last, First, Middle Initial)
Pete Sessions for Congress 2006

Mailing Address Post Office Box 38585

City: Dallas | State: TX | Zip Code: 75238

Purpose of Disbursement: 2006 Primary

Candidate Name: Sessions Pete

Category/ Type:

Office Sought: X House / Senate / President — State: TX — District: 32

Disbursement For: 2006 — X Primary / General / Other (specify)

Transaction ID: 4998040509023729090
Date of Disbursement: 09 / 06 / 2005

Amount of Each Disbursement this Period: 1000.00

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)

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☐ 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)
Republican National Committee

Mailing Address 310 First Street Southeast

City: Washington | State: DC | Zip Code: 20003

Purpose of Disbursement: 2005 Contribution

Candidate Name:

Category/ Type:

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Transaction ID: 4543130509215816200
Date of Disbursement: 09 / 22 / 2005

Amount of Each Disbursement this Period: 5000.00

B. Full Name (Last, First, Middle Initial)
Rogers for Congress

Mailing Address Post Office Box 581
Post Office Box 581

City: Brighton | State: MI | Zip Code: 48116

Purpose of Disbursement: 2006 Primary

Candidate Name: Rogers Mike

Category/ Type:

Office Sought: ☒ House ☐ Senate ☐ President
State: MI District: 08

Disbursement For: 2006 ☒ Primary ☐ General ☐ Other (specify)

Transaction ID: D0037105092852813B4
Date of Disbursement: 09 / 29 / 2005

Amount of Each Disbursement this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
Roskam for Congress Committee

Mailing Address 1919 Briarcliffe Boulevard

City: Wheaton | State: IL | Zip Code: 60187-8573

Purpose of Disbursement: 2006 Primary

Candidate Name: Roskam Peter

Category/ Type:

Office Sought: ☒ House ☐ Senate ☐ President
State: IL District: 13

Disbursement For: 2006 ☒ Primary ☐ General ☐ Other (specify)

Transaction ID: 1638520509023713598
Date of Disbursement: 09 / 06 / 2005

Amount of Each Disbursement this Period: 1000.00

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)

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

A. Full Name (Last, First, Middle Initial)
Schwarz for Congress

Mailing Address Post Office Box 2063

City: Battle Creek | State: MI | Zip Code: 49016

Purpose of Disbursement: 2006 Primary

Candidate Name: Schwarz John

Category/ Type:

Office Sought: X House / Senate / President

Disbursement For: 2006 X Primary / General / Other (specify)

State: MI District: 07

Transaction ID: 8672440509154651342
Date of Disbursement: 09 / 19 / 2005

Amount of Each Disbursement this Period: 1500.00

B. Full Name (Last, First, Middle Initial)
Texans for Henry Cuellar Congressional Campaign

Mailing Address 1519 Washington Street
2nd Floor Suite 200

City: Laredo | State: TX | Zip Code: 78042

Purpose of Disbursement: 2006 Primary

Candidate Name: Cuellar Henry

Category/ Type:

Office Sought: X House / Senate / President

Disbursement For: 2006 X Primary / General / Other (specify)

State: TX District: 28

Transaction ID: 2140010509154882983
Date of Disbursement: 09 / 19 / 2005

Amount of Each Disbursement this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
Tiberi for Congress

Mailing Address 2021 E Dublin Granville Road
Suite 2000

City: Columbus | State: OH | Zip Code: 43229

Purpose of Disbursement: 2006 Primary

Candidate Name: Tiberi Pat

Category/ Type:

Office Sought: X House / Senate / President

Disbursement For: 2006 X Primary / General / Other (specify)

State: OH District: 12

Transaction ID: 3937240509029826723
Date of Disbursement: 09 / 06 / 2005

Amount of Each Disbursement this Period: 1000.00

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)
Tim Murphy for Congress

Mailing Address PO Box 24551

City: Pttsburgh | State: PA | Zip Code: 15234

Purpose of Disbursement: 2006 Primary

Candidate Name: Murphy Timothy

Category/ Type

Office Sought: X House / Senate / President

State: PA District: 18

Disbursement For: 2006 X Primary / General / Other (specify)

Transaction ID: 23043705090238338637
Date of Disbursement: 09 / 06 / 2005

Amount of Each Disbursement this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
Volunteers for Shimkus

Mailing Address PO Box 5458
PO Box 5458

City: Springfield | State: IL | Zip Code: 62705

Purpose of Disbursement: 2006 Primary

Candidate Name: Shimkus John

Category/ Type

Office Sought: X House / Senate / President

State: IL District: 19

Disbursement For: 2006 X Primary / General / Other (specify)

Transaction ID: 71383005090238804483
Date of Disbursement: 09 / 06 / 2005

Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶	2000.00
TOTAL This Period (last page this line number only) ▶	50000.00

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)

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

A. Full Name (Last, First, Middle Initial)
W. Jackson Iliff

Mailing Address Suite 7
4 W Rolling Crossroads

City: Catonsville
State: MD
Zip Code: 21228-6280

Purpose of Disbursement: PAC refund

Candidate Name

Category/ Type

Office Sought: House / Senate / President
State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: 46940-4467268328667

Date of Disbursement: 09 / 08 / 2005

Amount of Each Disbursement this Period: 500.00

SUBTOTAL of Disbursements This Page (optional) ▶	500.00
TOTAL This Period (last page this line number only) ▶	500.00