OPHTHPAC

American Academy of Ophthalmology, Inc.
Political Committee

Apr 24 9 31 AM '95

Federal Election Commission
Washington, D.C. 20463

March 20, 1995

Re: American Academy of Ophthalmology, Inc. Political Committee ("OPHTHPAC") ID# C00196146, (11/28/94-12/31/94).

Dear Mr. Averett:

Enclosed, please find a copy of Page 11 of FEC Schedule A to support the entry reported on Line 11(a)(i)[$47,275] of the Detailed Summary Page for the period 11/29/94-12/31/94. The first entry for Hollander, MD Edward M is a negative $300.00. Unfortunately, this was not clear on the copy we originally filed. The donor withdrew his payment by a credit request that he initiated through his credit card company. The year to date amount is a positive $300.00 since the donor did contribute $300.00 previously during this calender year. We regret any inconvenience that this may have caused.

If there are any further questions, please contact me at 415/~~621~~-8500.
561

Sincerely,

Paula Lent

Paula Lent
Treasurer

P.O. Box 7424 San Francisco, CA 94120-7424 • 1101 Vermont Ave. NW, Suite 300 Washington, DC 20005-3521

FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

RQ-5

Paula E. Lent, Treasurer
American Academy of Opthalmology,
Inc. Political Committee
("OPHTHPAC")
655 Beach Street
San Francisco, CA 94109

MAR 31

Identification Number: C00196246

Reference: Year End Report (11/29/94-12/31/94)

Dear Ms. Lent:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. The review raised questions concerning certain information contained in the report(s). An itemization follows:

-Line 11(a)(i) of the Detailed Summary Page of your report discloses a total of $47,275 in itemized contributions from individuals. The sum of the entries itemized on Schedule A, however, indicates the total to be $47,875. Please amend your report to clarify the discrepancy.

Any amendment or clarification should be filed with the Federal Election Commission. If you need assistance, please feel free to contact me on our toll-free number, (800) 424-9530. My local number is (202) 219-3580.

Sincerely,

Donald L. Averett
Senior Reports Analyst
Reports Analysis Division

224

CONTRIBUTIONS FROM INDIVIDUALS OTHER THAN POLITICAL COMMITTEES
SCHEDULE A
FROM 12/01/94 TO 12/31/94

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME AND ADDRESS	EMPLOYER/OCCUPATION	DATE	RECEIPT AMOUNT	YTD AMOUNT
Hollander MD*Edward H Suite 202 522 North Elam Street Greensboro NC 27403	Self-Employed PHYSICIAN	12/15/94	(300.00)	300.00
Koop MD*Richard H 2000 Regency Court Toledo OH 43623	Self-Employed OPHTHALMOLOGIST	12/30/94	300.00	800.00
Schinazi MD*V Jacob 265 Waterman Street Providence RI 02906	Self-Employed OPHTHALMOLOGIST	12/27/94	100.00	400.00
Wilson MD*M Edward Medical Univ of South Carolina Storm Eye Inst/171 Ashley Ave Charleston SC 29425-0950	MED UNIV OF S.C. OPHTHALMOLOGIST	12/30/94	300.00	300.00
Nistein MD*Ricardo D Suite D 6564 Professional Place Riverdale GA 30274	Self-Employed PHYSICIAN	12/08/94	300.00	300.00
Barker MD*Barbara Ann 91 East 86th Street Ground Floor New York NY 10028	Self-Employed OPHTHALMOLOGIST	12/20/94	100.00	500.00
Civiletto MD*Steven E 120 West Main Suite 211 Mesquite TX 75149-4224	Self-Employed PHYSICIAN	12/08/94	300.00	300.00
Cranston MD*Russell B 130 Center Way Corning NY 14830	GUTHRIE CLINIC OPHTHALMOLOGIST	12/07/94	100.00	800.00
		SUBTOTAL	1200.00	

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

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

☐	Hand Delivered	DATE OF RECEIPT
☑	First Class Mail	POSTMARKED 4-21-95
☐	Registered/Certified Mail	POSTMARKED
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House Office of Records and Registration	DATE OF RECEIPT
☐	Received from the Senate Office of Public Records	DATE OF RECEIPT
☐	Other (Specify):	POSTMARKED and/or DATE OF RECEIPT

SHY.
PREPARER

4-24-95
DATE PREPARED

FEC FORM 70-2 (12/92)