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)

CITY	STATE	ZIPCODE
San Francisco	CA	94109

2. **FEC IDENTIFICATION NUMBER**

C00196246

3. IS THIS REPORT — NEW (N) **OR** X 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)	X Jul 20 (M7)	Oct 20 (M10)	Jan 31 (YE)

(c) 12-Day **PRE**-Election Report for the: Primary (12P) | General (12G) | Runoff (12R) | Convention (12C) | Special (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 06 01 2004 through 06 30 2004

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: Steven Rausch

Signature of Treasurer: Electronically Filed by Steven Rausch Date 07 21 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							

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: 06 01 2004 To: 06 30 2004

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2004		446169.67
(b) Cash on Hand at Begining of Reporting Period	275987.46	
(c) Total Receipts (from Line 19)	85413.35	250517.38
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	361400.81	696687.05
7. Total Disbursements (from Line 31)	83302.88	418589.12
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	278097.93	278097.93
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

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)

Report Covering the Period: From: 06 01 2004 To: 06 30 2004

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)	64805.00	205761.26
(ii) Unitemized	20548.16	42506.47
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	85353.16	248267.73
(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) ▶	85353.16	248267.73
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.)	60.19	2249.65
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))	85413.35	250517.38
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	85413.35	250517.38

DETAILED SUMMARY PAGE
of Disbursements

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	2802.88	6620.37
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)) ▶	2802.88	6620.37
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	79500.00	374500.00
24. Independent Expenditure (use Schedule E)	0.00	27900.00
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	1000.00	9568.75
(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)) ▶	1000.00	9568.75
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))	83302.88	418589.12
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)	83302.88	418589.12

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)	85353.16	248267.73
34. Total Contribution Refunds (from Line 28(d))	1000.00	9568.75
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	84353.16	238698.98
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	2802.88	6620.37
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2802.88	6620.37

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 74
(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)
John Alappatt
Mailing Address Apt. 1130
5454 Newcastle Drive
City: Houston | State: TX | Zip Code: 77081-2245
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: 06 29 2004
Transaction ID: AEIMC64FMSB77
Amount of Each Receipt this Period: 500.00
PACWEB GENERATED CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
Barbara Arnold
Mailing Address Suite 201
7275 East Southgate Drive
City: Sacramento | State: CA | Zip Code: 95823-2628
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: 06 07 2004
Transaction ID: 0000436123
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Mark Bellis
Mailing Address 100 Foden Road
City: South Portland | State: ME | Zip Code: 04106-2319
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: 06 03 2004
Transaction ID: D6072D0427C449D0
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ **1500.00**

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 7 / 74
(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)
Wayne Barber
Mailing Address 295 Stoner Avenue Suite 201
City: Westminster | State: MD | Zip Code: 21157-5637
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: 06 03 2004
Transaction ID: 0607200427C44890
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
Vineet Bafna
Mailing Address Suite 204
433 Estudillo Avenue
City: San Leandro | State: CA | Zip Code: 94577-4915
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: 06 30 2004
Transaction ID: 177BSNDNQXY3FA
Amount of Each Receipt this Period: 365.00
PAC/WEB GENERATED CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
Robert Bergren
Mailing Address Retina Vitreous Cnslts
3501 Forbes Avenue
City: Pittsburgh | State: PA | Zip Code: 15213-3317
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: 06 07 2004
Transaction ID: D0068811045
Amount of Each Receipt this Period: 365.00

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 8 / 74
(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)
Terry Bergstrom
Mailing Address Wk Kellogg Eye Center
1000 Wall Street Room 649
City: Ann Arbor | State: MI | Zip Code: 48105-1912
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: 06 24 2004
Transaction ID: 07508-62949770689011
Amount of Each Receipt this Period: 365.00

B. Full Name (Last, First, Middle Initial)
Michael Blooma
Mailing Address Houston Eye Associates
2855 Gramercy Street
City: Houston | State: TX | Zip Code: 77025-1625
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: 375.00

Date of Receipt: 06 15 2004
Transaction ID: A66IZO4H2SB71
Amount of Each Receipt this Period: 125.00
PAC/WEB GENERATED CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
Paul Brailsford
Mailing Address Suite 303
801 N Tustin Avenue
City: Santa Ana | State: CA | Zip Code: 92705-3812
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: 750.00

Date of Receipt: 06 01 2004
Transaction ID: D0035124-1494
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ **740.00**

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 / 74
(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 Branch
Mailing Address 224 Town Run Lane
City: Winston Salem | State: NC | Zip Code: 27101-3811
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: 06 02 2004
Transaction ID: 0607200427C44861
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
James Brandt
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: 06 02 2004
Transaction ID: 0607200427C44857
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Sheldon Braverman
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: 06 25 2004
Transaction ID: AC4SWSKIGSB76
Amount of Each Receipt this Period: 500.00
PACWEB GENERATED CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **1500.00**

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 / 74
(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)
Charles Campbell

Mailing Address Suite 200
5540 Saratoga Boulevard

City: Corpus Christi | State: TX | Zip Code: 78413-2853

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: 06 15 2004

Transaction ID: A66IFEMD2SB76

Amount of Each Receipt this Period: 1000.00

PACWEB GENERATED CONTRIBUTION

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: 06 29 2004

Transaction ID: 59561-18677920103073

Amount of Each Receipt this Period: 365.00

C. Full Name (Last, First, Middle Initial)
M Gary Carter

Mailing Address Carter Eye Center
1867 Forsyth Street

City: Macon | State: GA | Zip Code: 31201-1168

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: 06 14 2004

Transaction ID: 57005-87446535B2573D

Amount of Each Receipt this Period: 500.00

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 11 / 74
(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)
Craig Cassidy
Mailing Address 7465 E San Miguel
City: Scottsdale | State: AZ | Zip Code: 85250-6465
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: 06 01 2004
Transaction ID: 00015779-1521
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Hashmat Chaudhry
Mailing Address 608 Jackson Street
City: Roanoke Rapids | State: NC | Zip Code: 27870-2600
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: 06 14 2004
Transaction ID: A5L1YHGN0SB74
Amount of Each Receipt this Period: 100.00
PAC/WEB GENERATED CONTRIBUTION

C.
Full Name (Last, First, Middle Initial)
Fannin Chou
Mailing Address 1 Doctors Drive
City: Greenville | State: SC | Zip Code: 29605-4268
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: 06 28 2004
Transaction ID: ADX4IPA7JSB79
Amount of Each Receipt this Period: 500.00
PAC/WEB GENERATED CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **850.00**

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 12 / 74
(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)
(illegible) Andrew Cies
Mailing Address Suite 404
400 Newport Center Drive
City: Newport Beach | State: CA | Zip Code: 92660-7601
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: 06 22 2004
Transaction ID: AACJ05XLBSB75
Amount of Each Receipt this Period: 365.00
PACWEB GENERATED CONTRIBUTION

B.
Full Name (Last, First, Middle Initial)
Franklin Cignetti
Mailing Address 2545 Mosside Boulevard
City: Monroeville | State: PA | Zip Code: 15146-3520
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: 06 02 2004
Transaction ID: 0607200427C44859
Amount of Each Receipt this Period: 365.00

C.
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: 365.00

Date of Receipt: 06 25 2004
Transaction ID: D7953-38442629575729
Amount of Each Receipt this Period: 365.00

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 13 / 74
(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 Craig

Mailing Address PO Box 660
1600 Highway 79 South

City: Henderson | State: TX | Zip Code: 75653-0660

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: 06 08 2004

Transaction ID: 00000396-1

Amount of Each Receipt this Period: 365.00

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

Mailing Address 3400 W 16th Street
Suite O

City: Greeley | State: CO | Zip Code: 80634-6662

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: 06 14 2004

Transaction ID: A5L2T0WT0SB79

Amount of Each Receipt this Period: 500.00

PAC/WEB GENERATED CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
Theodore Cryer

Mailing Address 1847 E Main Street

City: Waynesboro | State: PA | Zip Code: 17268-1874

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: 06 22 2004

Transaction ID: B6898-590297877788S4

Amount of Each Receipt this Period: 500.00

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 14 / 74
(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 Davenport
Mailing Address 2424 South 90th Street Suite 204
City: West Allis | State: WI | Zip Code: 53227-2455
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: 06 23 2004
Transaction ID: AAY1QZRZDSB71
Amount of Each Receipt this Period: 365.00
PACWEB GENERATED CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
John De Carlo
Mailing Address 2500 N Mayfair Road
City: Milwaukee | State: WI | Zip Code: 53226-1409
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: 06 03 2004
Transaction ID: 0607200427C44869
Amount of Each Receipt this Period: 365.00

C. Full Name (Last, First, Middle Initial)
Anna Luisa Di Lorenzo
Mailing Address Suite B
2877 Crooks Road
City: Troy | State: MI | Zip Code: 48084-4717
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: 06 01 2004
Transaction ID: D0061128-1498
Amount of Each Receipt this Period: 250.00

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 15 / 74
(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)
James Dowling
Mailing Address #26D
112 La Casa Viaduct
City: Walnut Creek | State: CA | Zip Code: 94598-3091
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: 06 18 2004
Transaction ID: A7YSJCSZ7SB70
Amount of Each Receipt this Period: 365.00
PAC/WEB GENERATED CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
Barry Drucker
Mailing Address 21008 Northern Boulevard Suite 3
City: Bayside | State: NY | Zip Code: 11361-3211
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: 06 28 2004
Transaction ID: ADX4GEP5JSB74
Amount of Each Receipt this Period: 500.00
PAC/WEB GENERATED CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
Daniel Drysdale
Mailing Address 3845 S Main Street
City: Blacksburg | State: VA | Zip Code: 24060-7018
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: 06 29 2004
Transaction ID: 59799-48533268782761
Amount of Each Receipt this Period: 250.00

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 16 / 74
(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)
Tina Eckhardt
Mailing Address 8920 28th Street Court
City: Milan | State: IL | Zip Code: 61264-3548
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: 06 22 2004
Transaction ID: 96937-08967226749698
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
William Ehlers
Mailing Address 125 Secret Lake Road
City: Avon | State: CT | Zip Code: 06001-3465
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: 06 22 2004
Transaction ID: 8719580406236903069
Amount of Each Receipt this Period: 250.00
PAC CONTRIBUTION VIA PACWEB WEBSITE

C. Full Name (Last, First, Middle Initial)
Mary Katherine Ellis
Mailing Address 915 Summit Avenue
City: Oconomowoc | State: WI | Zip Code: 53066-3521
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: 06 21 2004
Transaction ID: A9R34MGZ9SB72
Amount of Each Receipt this Period: 500.00
PACWEB GENERATED CONTRIBUTION

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 17 / 74
(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)
00 Keith Engel
Mailing Address Pediatric Ophthalmology
3900 Park Nicollet Boulevard
City: Minneapolis | State: MN | Zip Code: 55416-2503
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: 06 08 2004
Transaction ID: 000119652
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Thomas Carl Fenzl
Mailing Address 3519 Friendsville Road
City: Wooster | State: OH | Zip Code: 44691-1241
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: 06 01 2004
Transaction ID: 00027527-1501
Amount of Each Receipt this Period: 250.00

C. 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: 06 01 2004
Transaction ID: D0015B53-1517
Amount of Each Receipt this Period: 365.00

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 18 / 74
(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)
Frank Fischer
Mailing Address Suite 200
215 1st St. N
City: Winter Haven | State: FL | Zip Code: 33881-4537
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: 06 08 2004
Transaction ID: 0000484627
Amount of Each Receipt this Period: 365.00

B. 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: 06 22 2004
Transaction ID: 96937-26667422056198
Amount of Each Receipt this Period: 365.00

C. Full Name (Last, First, Middle Initial)
William Forrest
Mailing Address Eye Clinic of Yakima
311 S Tenth Avenue
City: Yakima | State: WA | Zip Code: 98902-3520
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: 250.00

Date of Receipt: 06 08 2004
Transaction ID: D000349319
Amount of Each Receipt this Period: 250.00

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 19 / 74
(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)
Ronald Frenkel
Mailing Address 279 Independence Boulevard
City: Virginia Beach | State: VA | Zip Code: 23462-2603
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: 06 02 2004
Transaction ID: 0607200427C44872
Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
Leonard Friedman
Mailing Address Suite 270
650 Pennsylvania Avenue Southeast
City: Washington | State: DC | Zip Code: 20003-4318
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: 06 02 2004
Transaction ID: 0607200427C44881
Amount of Each Receipt this Period: 365.00

C. Full Name (Last, First, Middle Initial)
Mark Fritz
Mailing Address 212 N Larkin Avenue
City: Joliet | State: IL | Zip Code: 60435-6804
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: 06 21 2004
Transaction ID: A9R4DBY5ASB74
Amount of Each Receipt this Period: 365.00
PACWEB GENERATED CONTRIBUTION

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 20 / 74
(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)
Luther Fry
Mailing Address 310 E Walnut Street
City: Garden City | State: KS | Zip Code: 67846-5560
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: 06 29 2004
Transaction ID: 59530-09119814634329
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
David Gejda
Mailing Address 6228 Yellowstone Road
City: Cheyenne | State: WY | Zip Code: 82009-3432
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: 375.00

Date of Receipt: 06 01 2004
Transaction ID: 00201958-1531
Amount of Each Receipt this Period: 125.00

C. Full Name (Last, First, Middle Initial)
Manuel Gerston
Mailing Address Box 965 Victoria Station
City: Aguadilla | State: PR | Zip Code: 00605-0565
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: 06 22 2004
Transaction ID: B6898-215297877788S4
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ **1125.00**

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 / 74
(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)
C Mitchell Gilbert
Mailing Address Suite 100
499 Farmington Avenue
City: Farmington | State: CT | Zip Code: 06032-1943
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: 06 22 2004
Transaction ID: AACJ10FMBSB72
Amount of Each Receipt this Period: 250.00
PACWEB GENERATED CONTRIBUTION

B.
Full Name (Last, First, Middle Initial)
Ronald Glatzer
Mailing Address Suite 307
5601 N Dixie Highway
City: Fort Lauderdal | State: FL | Zip Code: 33334-4148
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: 06 21 2004
Transaction ID: A9R36440ASB79
Amount of Each Receipt this Period: 365.00
PACWEB GENERATED CONTRIBUTION

C.
Full Name (Last, First, Middle Initial)
Marc Goldberg
Mailing Address Suite 501
2000 S Wheeling Avenue
City: Tulsa | State: OK | Zip Code: 74104-5639
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: 06 03 2004
Transaction ID: D6072D0427C448B6
Amount of Each Receipt this Period: 365.00

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 22 / 74
(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)
Roy Goodart
Mailing Address Suite 200
4400 S 700 E
City: Salt Lake City | State: UT | Zip Code: 84107-3000
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: 06 18 2004
Transaction ID: 95878-48942202329936
Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
Dennis Gormley
Mailing Address 1460 Victory Boulevard
City: Staten Island | State: NY | Zip Code: 10301-3914
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: 06 02 2004
Transaction ID: 0607200427C44854
Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
Dana Gratchan
Mailing Address 58 Durrells Woods Road
City: Arundel | State: ME | Zip Code: 04046-7503
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: 06 22 2004
Transaction ID: AACJ1XQMBSB79
Amount of Each Receipt this Period: 365.00

PAC/WEB GENERATED CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **2365.00**

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 23 / 74
(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)
Mary Trotter Green
Mailing Address Suite 2105
6624 Fannin Street
City: Houston | State: TX | Zip Code: 77030-2312
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: 06 08 2004
Transaction ID: 00011077-3
Amount of Each Receipt this Period: 365.00

B. Full Name (Last, First, Middle Initial)
Kevin Greenidge
Mailing Address 451 Clarkson Avenue
Suite B511D
City: Brooklyn | State: NY | Zip Code: 11203-2057
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: 06 14 2004
Transaction ID: 57005-23704165220260
Amount of Each Receipt this Period: 365.00
PAC

C. Full Name (Last, First, Middle Initial)
Erich Bryan Groos
Mailing Address Cornea Consultants of Nashville
2011 Murphy Avenue Suite 602
City: Nashville | State: TN | Zip Code: 37203-2023
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: 06 01 2004
Transaction ID: D0082683-1495
Amount of Each Receipt this Period: 250.00

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 24 / 74
(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)
Christopher Guettieri
Mailing Address Suite 301
3969 4th Avenue
City: San Diego | State: CA | Zip Code: 92103-3165
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: 06 28 2004
Transaction ID: 58989-08559817075729
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
David Guyette
Mailing Address 600 Main Street
City: Malden | State: MA | Zip Code: 02148-3919
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: 06 16 2004
Transaction ID: 57878-85747927427292
Amount of Each Receipt this Period: 500.00
PAC

C. Full Name (Last, First, Middle Initial)
Leslie Hale
Mailing Address White Wilson Medical Center
1005 Mar Walt Drive
City: Fort Walton Be | State: FL | Zip Code: 32547-6707
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: 375.00

Date of Receipt: 06 01 2004
Transaction ID: D0007D38-1534
Amount of Each Receipt this Period: 125.00

SUBTOTAL of Receipts This Page (optional) ▶ **1125.00**

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 25 / 74
(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)
Jean Hausheer
Mailing Address 4322 N Hickory Lane
City: Kansas City | State: MO | Zip Code: 64116-1664
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: 06 01 2004
Transaction ID: 00035269-1519
Amount of Each Receipt this Period: 125.00

B. Full Name (Last, First, Middle Initial)
James Hazlehurst
Mailing Address 605 W East Avenue
City: Chico | State: CA | Zip Code: 95926-7201
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: 06 01 2004
Transaction ID: 00053339-1518
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Jeffrey Heier
Mailing Address Ophthalmic Consultants of Boston
50 Staniford Street Suite 800
City: Boston | State: MA | Zip Code: 02114-2539
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: 06 13 2004
Transaction ID: A4ZLHDXPZRB7N
Amount of Each Receipt this Period: 500.00

PAC/WEB GENERATED CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **1125.00**

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 / 74
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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

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

A. Full Name (Last, First, Middle Initial)
Joe Hester
Mailing Address 2713 Chaffin Lane
City: Magnolia | State: AR | Zip Code: 71753-4329
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: 06 15 2004
Transaction ID: 57536-61829775571829
Amount of Each Receipt this Period: 500.00
PAC

B. Full Name (Last, First, Middle Initial)
Timothy Holekamp
Mailing Address 500 Keene Street Suite 102
City: Columbia | State: MO | Zip Code: 65201-8104
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: 06 24 2004
Transaction ID: 07508-32535952329635
Amount of Each Receipt this Period: 365.00

C. Full Name (Last, First, Middle Initial)
Michael Holmes
Mailing Address Suite 200
391 Serpentine Drive
City: Spartanburg | State: SC | Zip Code: 29303-3068
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: 06 02 2004
Transaction ID: 86185-51441591878073
Amount of Each Receipt this Period: 365.00

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 27 / 74
(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)
Francis Hurite

Mailing Address Forbes Stevenson Building
1401 Forbes Avenue 3rd

City: Pittsburgh | State: PA | Zip Code: 15219-5125

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: 06 25 2004

Transaction ID: AC4SZL7JGSB78

Amount of Each Receipt this Period: 500.00

PACWEB GENERATED CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
Ivan Ireland

Mailing Address Stop 8
18110 W Bluemound Road

City: Brookfield | State: WI | Zip Code: 53045-2917

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: 06 22 2004

Transaction ID: 96898-00167319517135

Amount of Each Receipt this Period: 365.00

C. Full Name (Last, First, Middle Initial)
Ivan Jacobs

Mailing Address 10 Mountain Boulevard

City: Warren | State: NJ | Zip Code: 07059-5614

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: 06 14 2004

Transaction ID: 57005-70829409360886

Amount of Each Receipt this Period: 1000.00

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 28 / 74
(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)
Edward Jaeger
Mailing Address 1098 W Baltimore Park
Suite 3302
City: Media | State: PA | Zip Code: 19063-5139
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: 06 22 2004
Transaction ID: 98898-11950320005416
Amount of Each Receipt this Period: 900.00

B. 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: 06 01 2004
Transaction ID: 00002655-1516
Amount of Each Receipt this Period: 365.00

C. Full Name (Last, First, Middle Initial)
Michael Kelly
Mailing Address Suite 104
4201 Lake Boone Trail
City: Raleigh | State: NC | Zip Code: 27607-7512
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: 365.00

Date of Receipt: 06 03 2004
Transaction ID: D6072D0427C448B4
Amount of Each Receipt this Period: 365.00

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) or each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 74
(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 Kelly
Mailing Address PO Box 1727
City: Brownwood | State: TX | Zip Code: 76804-1727
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: 1000.00

Date of Receipt: 06 21 2004
Transaction ID: 96428-S8193606138229
Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
George Khouri
Mailing Address Palm Beach Eye Center
1411 N Flagler Drive Suite 8
City: West Palm Beac | State: FL | Zip Code: 33401-3404
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: 06 25 2004
Transaction ID: AC4SY3TIGSB72
Amount of Each Receipt this Period: 365.00
PAC/WEB GENERATED CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
Dennis Khoury
Mailing Address 8118 Bustleton Avenue
City: Philadelphia | State: PA | Zip Code: 19152-2803
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: 06 02 2004
Transaction ID: D6072D0427C44863
Amount of Each Receipt this Period: 250.00

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) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 74
(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)
Kianoush Kian
Mailing Address Suite 104
3303 E Baseline Road
City: Gilbert | State: AZ | Zip Code: 85234-2738
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: 06 14 2004
Transaction ID: 57005-58553286314011
Amount of Each Receipt this Period: 500.00
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: 06 24 2004
Transaction ID: 07508-74868410825730
Amount of Each Receipt this Period: 365.00

C. Full Name (Last, First, Middle Initial)
Spero Kinnas
Mailing Address 539 80th Place
City: Burr Ridge | State: IL | Zip Code: 60527-5187
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: 06 02 2004
Transaction ID: 86185-88738955259323
Amount of Each Receipt this Period: 250.00

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 31 / 74
(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)
Jane Kivlin
Mailing Address Eye Institute
925 N 87th Street
City: Milwaukee | State: WI | Zip Code: 53226-4812
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: 06 28 2004
Transaction ID: 58989-70748537778855
Amount of Each Receipt this Period: 365.00

B. Full Name (Last, First, Middle Initial)
Robert Knox
Mailing Address 3000 Rogers Avenue
City: Fort Smith | State: AR | Zip Code: 72901-4232
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: 06 15 2004
Transaction ID: 57536-13663882017135
Amount of Each Receipt this Period: 500.00
PAC

C. Full Name (Last, First, Middle Initial)
Peter Kohler
Mailing Address Suite 1
40 Airport Road
City: Waterville | State: ME | Zip Code: 04901-4501
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: 06 08 2004
Transaction ID: D0078485-B
Amount of Each Receipt this Period: 365.00

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 32 / 74
(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)
John Kunesh
Mailing Address Kunesh Eye Center
2601 Far Hills Avenue
City: Dayton | State: OH | Zip Code: 45419-1634
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: 3000.00

Date of Receipt: 06 01 2004
Transaction ID: 00204624-1490
Amount of Each Receipt this Period: 3000.00

B.
Full Name (Last, First, Middle Initial)
Bernd Kuleseher
Mailing Address 172 32nd Avenue
City: San Francisco | State: CA | Zip Code: 94121-1012
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: 06 16 2004
Transaction ID: A6S0BNZ54SB70
Amount of Each Receipt this Period: 365.00
PAC/WEB GENERATED CONTRIBUTION

C.
Full Name (Last, First, Middle Initial)
Robert Lacy
Mailing Address 696 Main Street
City: Weymouth | State: MA | Zip Code: 02190-1842
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: 06 07 2004
Transaction ID: D001957868
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ **3615.00**

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 33 / 74
(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)
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: self
Occupation: Ophthalmologist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 06 24 2004
Transaction ID: 07508-31858482095260
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Paul Lee
Mailing Address Duke Eye Center
Box 3802 Erwin Road
City: Durham | State: NC | Zip Code: 27705-5018
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: 06 01 2004
Transaction ID: 00054722-1527
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
Daniel Lanelink
Mailing Address 3190 Churn Creek Road
City: Redding | State: CA | Zip Code: 96002-2122
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: 06 14 2004
Transaction ID: 57005-70008960830417
Amount of Each Receipt this Period: 500.00

PAC

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

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 34 / 74
(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)
Daniel Levin
Mailing Address 2468 State Route 19 N
City: Warsaw | State: NY | Zip Code: 14569-9336
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: 06 07 2004
Transaction ID: 0000266215
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
Robert Lindberg
Mailing Address Suite B
752 Brookshire Drive
City: Hermitage | State: PA | Zip Code: 16148-4510
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: 06 02 2004
Transaction ID: 0607200427C44882
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Douglas Litchfield
Mailing Address 823 Munich Drive
City: Bismarck | State: ND | Zip Code: 58504-7043
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: 06 29 2004
Transaction ID: 59530-83536928892136
Amount of Each Receipt this Period: 365.00

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

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

A. Full Name (Last, First, Middle Initial)
Reginald Lowe
Mailing Address Suite 100
1731 Memorial Drive
City: Clarksville | State: TN | Zip Code: 37043-4523
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: 06 02 2004
Transaction ID: 0607200427C44860
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Mary Gerard Lynch
Mailing Address 3845 Club Drive
City: Atlanta | State: GA | Zip Code: 30319-1109
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: 06 08 2004
Transaction ID: 0003152078
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Richard Mackool
Mailing Address 31-27 41st Street
City: Astoria | State: NY | Zip Code: 11103-3501
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: 06 21 2004
Transaction ID: A9R3G1R2ASB73
Amount of Each Receipt this Period: 365.00

PAC/WEB GENERATED CONTRIBUTION

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) or each category of the Detailed Summary Page

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

A. Full Name (Last, First, Middle Initial)
Timothy Malone
Mailing Address 731-F Walker Road
City: Great Falls | State: VA | Zip Code: 22066-2834
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: 06 24 2004
Transaction ID: 07508-20878237485885
Amount of Each Receipt this Period: 365.00

B. Full Name (Last, First, Middle Initial)
Mark Christophe Mavis
Mailing Address 150 Quail Lane
City: Lebanon | State: PA | Zip Code: 17042-9403
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: 06 01 2004
Transaction ID: 00039854-1528
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
Malcolm Meadow
Mailing Address 2855 Gramercy
City: Houston | State: TX | Zip Code: 77025-1635
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: 06 08 2004
Transaction ID: D00134796
Amount of Each Receipt this Period: 250.00

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 37 / 74
(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 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: 06 07 2004
Transaction ID: 0002874989
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
Bobby McCullen
Mailing Address 2325 Aberdeen Boulevard Suite A
City: Gastonia | State: NC | Zip Code: 28054-0614
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: 06 22 2004
Transaction ID: AACIUANJBSB71
Amount of Each Receipt this Period: 1000.00
PAC/WEB GENERATED CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
Wallace McLeod
Mailing Address 1330 Interstate Pkkwy
City: Augusta | State: GA | Zip Code: 30909-5625
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: 385.00

Date of Receipt: 06 22 2004
Transaction ID: B6898-5556804266166?
Amount of Each Receipt this Period: 385.00

SUBTOTAL of Receipts This Page (optional) ▶ **1885.00**

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 38 / 74
(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)
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: 365.00

Date of Receipt: 06 02 2004
Transaction ID: D607200427C44874
Amount of Each Receipt this Period: 365.00

B. Full Name (Last, First, Middle Initial)
Michael Edward Miglori
Mailing Address 690 Eddy Street
City: Providence | State: RI | Zip Code: 02903-4928
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: 06 01 2004
Transaction ID: 00011623-1496
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
Calvin Miller
Mailing Address 19626 McCray Drive
City: Abingdon | State: VA | Zip Code: 24211-6918
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: 06 03 2004
Transaction ID: D607200427C44889
Amount of Each Receipt this Period: 300.00

SUBTOTAL of Receipts This Page (optional) ▶ **915.00**

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 39 / 74
(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)
Ken Mishler
Mailing Address 988 Hamburg Turnpike
City: Wayne | State: NJ | Zip Code: 07470-3225
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: 06 01 2004
Transaction ID: 00003022-1590
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
James Mishel
Mailing Address Ophthalmology Pa
3100 W 70th Street
City: Edina | State: MN | Zip Code: 55435-4227
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: 06 24 2004
Transaction ID: ABJE88N4FSB71
Amount of Each Receipt this Period: 500.00
PAC/WEB GENERATED CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
Kenneth Mitchell
Mailing Address Suite 105
6894 Lake Worth Road
City: Lake Worth | State: FL | Zip Code: 33467-2564
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: 06 29 2004
Transaction ID: 59561-79200381D40573
Amount of Each Receipt this Period: 250.00

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

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 40 / 74
(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 Mobley
Mailing Address Lakeside Ophthalmology
42524 Hayes Road Suite 400
City: Clinton Townsh | State: MI | Zip Code: 48038-3643
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: 06 21 2004
Transaction ID: 96428-28301638964792
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
Dugald Munro
Mailing Address 1525 Wampanoag Trail Ste# 105
City: East Providenc | State: RI | Zip Code: 02915-1038
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: 06 16 2004
Transaction ID: 57878-50701540708542
Amount of Each Receipt this Period: 500.00
PAC

C. Full Name (Last, First, Middle Initial)
Benton Murphy
Mailing Address Rocky Mount Eye Center
27 Montebello
City: Pueblo | State: CO | Zip Code: 81001-1238
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: 06 02 2004
Transaction ID: D6072D0427C44876
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ **1500.00**

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 41 / 74
(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)
Mary Napoleon
Mailing Address 1210 Driving Park Avenue
City: Newark | State: NY | Zip Code: 14513-1057
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: 500.00

Date of Receipt: 06 21 2004
Transaction ID: 96428-40798586806979
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
Catherine Newton
Mailing Address 8420 Dutchmans Parkway Suite 170
City: Louisville | State: KY | Zip Code: 40205-3353
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: 06 29 2004
Transaction ID: AEIMGE2GMSB73
Amount of Each Receipt this Period: 500.00
PAC/WEB GENERATED CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
Carolyn Oesterle
Mailing Address 2015 N Main Street
City: Wheaton | State: IL | Zip Code: 60187-3152
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: 06 02 2004
Transaction ID: B6185-01667422D5819B
Amount of Each Receipt this Period: 365.00

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 42 / 74
(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 Orloff
Mailing Address 178 E 71st Street
City: New York | State: NY | Zip Code: 10021-5119
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: 06 01 2004
Transaction ID: 00025989-1499
Amount of Each Receipt this Period: 125.00

B. Full Name (Last, First, Middle Initial)
Stephen Orr
Mailing Address Spectrum Eye Care Inc.
1920 S Main St. Suite B
City: Findlay | State: OH | Zip Code: 45840-1232
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: 06 14 2004
Transaction ID: A5L2V8NU0SB75
Amount of Each Receipt this Period: 250.00
PAC/WEB GENERATED CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
David Parke
Mailing Address Dean A McGee Eye Inst
608 Stanton L Young Blv
City: Oklahoma City | State: OK | Zip Code: 73104-5014
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: 500.00

Date of Receipt: 06 01 2004
Transaction ID: D0018D05-1503
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ **625.00**

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 43 / 74
(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 Parmet
Mailing Address 9830 Kenton Avenue
City: Skokie | State: IL | Zip Code: 60076-1216
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: 06 30 2004
Transaction ID: 1E7BSNEBUXY3FA
Amount of Each Receipt this Period: 365.00
PACWEB GENERATED CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
Jonathan Pinsker
Mailing Address 33 Corsica Drive
City: Newport Beach | State: CA | Zip Code: 92660-3234
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: 06 02 2004
Transaction ID: 0607200427C44864
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Michael Power
Mailing Address Ophthalmic Assoc of Billings
1232 North 30th Street
City: Billings | State: MT | Zip Code: 59101-0139
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: 06 15 2004
Transaction ID: 57536-04686291685104
Amount of Each Receipt this Period: 500.00
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 44 / 74
(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 Ranz
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: 06 08 2004
Transaction ID: 0005085236
Amount of Each Receipt this Period: 365.00

B. Full Name (Last, First, Middle Initial)
Annella Reda
Mailing Address Virginia Ophth Assoc
885 Kempsville Rd.; Amel
City: Norfolk | State: VA | Zip Code: 23502
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: 06 01 2004
Transaction ID: 00003049-1489
Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
Syamala H Reddy
Mailing Address Suite 3A
200 Medical Center Drive
City: Hazard | State: KY | Zip Code: 41701-9468
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: 06 08 2004
Transaction ID: D0017D6965
Amount of Each Receipt this Period: 365.00

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 45 / 74
(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)
Harvey Reiser
Mailing Address 945 Lantern Hill Road
City: Shavertown | State: PA | Zip Code: 18708-9474
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: 06 21 2004
Transaction ID: 96428-800980885601O5
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Mike Reynolds
Mailing Address Suite 106
1301 W 12th Avenue
City: Emporia | State: KS | Zip Code: 66801-2597
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: 06 22 2004
Transaction ID: 96898-285534083843Z3
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Byron Riegel
Mailing Address 2830 West Main Street
City: Visalia | State: CA | Zip Code: 93291-4331
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: 06 18 2004
Transaction ID: B5878-99770754575730
Amount of Each Receipt this Period: 500.00

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) 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)
Catherine Rommel
Mailing Address Manning and Rommel Associates
2128 Embassy Drive
City: Lancaster | State: PA | Zip Code: 17603-2385
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: 06 25 2004
Transaction ID: 07953-08731814146041
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
Gerald Roper
Mailing Address Roper Advanced Eye Care
1049 State Road 229 Nor
City: Batesville | State: IN | Zip Code: 47006
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: 06 28 2004
Transaction ID: 1M7BSIGR6P3XDA
Amount of Each Receipt this Period: 500.00
PAC/WEB GENERATED CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
William Rosenberger
Mailing Address 408 S Sycamore Street
City: Petersburg | State: VA | Zip Code: 23803-5043
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: 06 28 2004
Transaction ID: 58989-80804079771042
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ **1500.00**

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)

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)
Jeffrey Rubin
Mailing Address 1660 E 14th Street Suite LI1
City: Brooklyn | State: NY | Zip Code: 11229-1171
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: 06 25 2004
Transaction ID: AC4T47GKGSB78
Amount of Each Receipt this Period: 250.00
PACWEB GENERATED CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
Herman Rundle
Mailing Address 1125 E 17th Street Suite E204
City: Santa Ana | State: CA | Zip Code: 92701-2201
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: 365.00

Date of Receipt: 06 04 2004
Transaction ID: 0000457724
Amount of Each Receipt this Period: 365.00

C. Full Name (Last, First, Middle Initial)
Bradley Sandler
Mailing Address 1710 Pennsylvania Avenue Suite B
City: Fairfield | State: CA | Zip Code: 94533-3549
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: 06 14 2004
Transaction ID: A5L2ZXVW0SB71
Amount of Each Receipt this Period: 1000.00
PACWEB GENERATED CONTRIBUTION

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) 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

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

A.
Full Name (Last, First, Middle Initial)
Gary Scholes
Mailing Address 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: 06 07 2004
Transaction ID: 00059584-8
Amount of Each Receipt this Period: 250.00

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: 06 15 2004
Transaction ID: A66HODO82SB75
Amount of Each Receipt this Period: 365.00
PAC/WEB GENERATED CONTRIBUTION

C.
Full Name (Last, First, Middle Initial)
Elizabeth Sharpe
Mailing Address Suite 102
735 Johnnie Dodds Boulevard
City: Mount Pleasant | State: SC | Zip Code: 29464-3058
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: 06 24 2004
Transaction ID: ABJERPWBFSB75
Amount of Each Receipt this Period: 250.00
PAC/WEB GENERATED CONTRIBUTION

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 49 / 74
(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 Springer
Mailing Address 1 Erie Court Suite 6140
City: Oak Park | State: IL | Zip Code: 60302-2510
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: 06 03 2004
Transaction ID: 0607200427C44898
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
Jeffrey Starkey
Mailing Address 31 Conservatory Drive
City: Barberton | State: OH | Zip Code: 44203-4281
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: 06 29 2004
Transaction ID: 59530-959926784038655
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
John Stachechulla
Mailing Address 282 Neil Avenue
City: Columbus | State: OH | Zip Code: 43215-2362
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: 375.00

Date of Receipt: 06 15 2004
Transaction ID: A66IDRVC2SB79
Amount of Each Receipt this Period: 125.00
PACWEB GENERATED CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **875.00**

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 Steinemann
Mailing Address 2703 Cranlyn Road
City: Shaker Heights | State: OH | Zip Code: 44122-2003
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: 06 07 2004
Transaction ID: 0005199939
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Mark Sasl
Mailing Address Concord Eye Care; Pc
248 Pleasant Street Suite 160
City: Concord | State: NH | Zip Code: 03301-2598
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: 06 04 2004
Transaction ID: 0009040195
Amount of Each Receipt this Period: 365.00

C. 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: 365.00

Date of Receipt: 06 21 2004
Transaction ID: B6428-574D0149108979
Amount of Each Receipt this Period: 365.00

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 51 / 74
(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 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: 06 22 2004
Transaction ID: 98898-92409914731980
Amount of Each Receipt this Period: 365.00

B. Full Name (Last, First, Middle Initial)
George Tate
Mailing Address 3329 River Landing Road
City: Johns Island | State: SC | Zip Code: 29455-7235
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: 750.00

Date of Receipt: 06 01 2004
Transaction ID: 00002712-1520
Amount of Each Receipt this Period: 250.00

C. 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: 365.00

Date of Receipt: 06 01 2004
Transaction ID: D0005B02-44318
Amount of Each Receipt this Period: 365.00

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 52 / 74
(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)
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: 06 15 2004
Transaction ID: 57536-89786928892136
Amount of Each Receipt this Period: 365.00
PAC

B.
Full Name (Last, First, Middle Initial)
John Thayer
Mailing Address Suite 102
94 N Elm Street
City: Westfield | State: MA | Zip Code: 01085-1647
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: 2000.00

Date of Receipt: 06 01 2004
Transaction ID: 00201706-1491
Amount of Each Receipt this Period: 1000.00

C.
Full Name (Last, First, Middle Initial)
Gerard Hendarik Van Rens
Mailing Address 1801 Nh Medical Park Drive
City: Wilmington | State: NC | Zip Code: 28403-5351
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: 06 01 2004
Transaction ID: D0053752-1488
Amount of Each Receipt this Period: 365.00

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 53 / 74
(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 Varley
Mailing Address 1741 Woodvale Drive
City: Charleston | State: WV | Zip Code: 25314-2544
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: 06 15 2004
Transaction ID: 57536-43890017271042
Amount of Each Receipt this Period: 365.00
PAC

B. Full Name (Last, First, Middle Initial)
Sara Vegh
Mailing Address Suite 105
1880 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: 06 01 2004
Transaction ID: 00050483-1523
Amount of Each Receipt this Period: 365.00

C. Full Name (Last, First, Middle Initial)
Roland Walters
Mailing Address 5701 North Portland Suite 101
City: Oklahoma City | State: OK | Zip Code: 73112-1670
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: 06 21 2004
Transaction ID: B6428-37572878599167
Amount of Each Receipt this Period: 250.00

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 54 / 74
(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)
Wi Lee Wan
Mailing Address 1700 N Rose Avenue Suite 200
City: Oxnard | State: CA | Zip Code: 93030-3791
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: 06 25 2004
Transaction ID: AC4T1J0KGSB71
Amount of Each Receipt this Period: 365.00
PACWEB GENERATED CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
Robert Werner
Mailing Address 330 Straight Street Suite 201
City: Cincinnati | State: OH | Zip Code: 45219-1067
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: 06 24 2004
Transaction ID: 07508-90079897642136
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
Amos Wilkinson
Mailing Address PO Box 238
City: Bridgeport | State: WV | Zip Code: 26330-0238
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: 06 03 2004
Transaction ID: D6072D0427C448B7
Amount of Each Receipt this Period: 365.00

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 55 / 74
(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 Wilson
Mailing Address Wills Eye Hospital
840 Walnut Street Suite 1120
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: 375.00

Date of Receipt: 06 22 2004
Transaction ID: 04285304062369 10453
Amount of Each Receipt this Period: 125.00
PAC CONTRIBUTION VIA PACWEB WEBSITE

B. Full Name (Last, First, Middle Initial)
Robert Wing
Mailing Address 415 Medical Dr. Suite C-201
City: Bountiful | State: UT | Zip Code: 84010-4974
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: 06 18 2004
Transaction ID: 95878-34385317564010
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Brian Wnorowski
Mailing Address 202 State Highway 37 West
City: Toms River | State: NJ | Zip Code: 08755-6055
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: 06 15 2004
Transaction ID: A66HQ02B2SB74
Amount of Each Receipt this Period: 500.00
PACWEB GENERATED CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **1125.00**

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 56 / 74
(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)
Sheila Wright-Scott
Mailing Address Suite 1D
43845 10th Street West
City: Lancaster | State: CA | Zip Code: 93534-4800
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: 06 29 2004
Transaction ID: ADX8R9L5KSB70
Amount of Each Receipt this Period: 250.00
PAC/WEB GENERATED CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
Matthew Yeomans
Mailing Address 1287 Silverwood Drive
City: Okemos | State: MI | Zip Code: 48864-3093
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: 06 01 2004
Transaction ID: 00083717-1525
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
Chi-Wah (Rudy) Yung
Mailing Address 5124 Green Braes East Drive
City: Indianapolis | State: IN | Zip Code: 46234-2915
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: 06 25 2004
Transaction ID: AC4T2D8KGSB77
Amount of Each Receipt this Period: 250.00
PAC/WEB GENERATED CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **750.00**

TOTAL This Period (last page this line number only) ▶ **64805.00**

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)

[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)
American Academy of Ophthamology Admin Account

Mailing Address 655 Beach St.

City: San Francisco | State: CA | Zip Code: 94109

Purpose of Disbursement:
PAC Admin checks deposited in error

Candidate Name

Category/ Type

Office Sought: House / Senate / President
State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: 5303560407205750627
Date of Disbursement: 06 / 04 / 2004

Amount of Each Disbursement this Period: 1400.00

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 6/04

Candidate Name

Category/ Type

Office Sought: House / Senate / President
State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: 95955-38924807310104
Date of Disbursement: 06 / 30 / 2004

Amount of Each Disbursement this Period: 1346.88

SUBTOTAL of Disbursements This Page (optional) ▶	2746.88
TOTAL This Period (last page this line number only) ▶	2746.88

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 9089 Conquista Court

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

Purpose of Disbursement: 2004 Primary

Candidate Name: Berkley Shelley

Category/ Type:

Office Sought: X House / Senate / President

State: NV District: 01

Disbursement For: 2004 X Primary / General / Other (specify)

Transaction ID: 95115-9184839129446
Date of Disbursement: 06 / 10 / 2004

Amount of Each Disbursement this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
Bill McCollum for Us Senate

Mailing Address PO Box 532015

City: Orlando | State: FL | Zip Code: 32853

Purpose of Disbursement: Primary

Candidate Name: Mccollum Bill

Category/ Type:

Office Sought: House / X Senate / President

State: FL District: 00

Disbursement For: 2004 X Primary / General / Other (specify)

Transaction ID: 3852
Date of Disbursement: 06 / 10 / 2004

Amount of Each Disbursement this Period: 2500.00

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

Mailing Address PO Box 501

City: Wheat Ridge | State: CO | Zip Code: 80034

Purpose of Disbursement: 2004 Primary

Candidate Name: Beauprez Bob

Category/ Type:

Office Sought: X House / Senate / President

State: CO District: 07

Disbursement For: 2004 X Primary / General / Other (specify)

Transaction ID: 95160-9198419451713
Date of Disbursement: 06 / 04 / 2004

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)
Boucher for Congress Committee

Mailing Address PO Box 2000

City: Abingdon | State: VA | Zip Code: 24212

Purpose of Disbursement: 2004 General

Candidate Name: Boucher Rick

Category/ Type:

Office Sought: X House / Senate / President

State: VA District: 09

Disbursement For: 2004 — Primary / X General / Other (specify)

Transaction ID: 95115-0059015154836
Date of Disbursement: 06 / 10 / 2004

Amount of Each Disbursement this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
Charles Boustany Jr. for Congress

Mailing Address Post Office Box 80126

City: Lafayette | State: LA | Zip Code: 70508

Purpose of Disbursement: 2004 Primary

Candidate Name: Boustany Charles

Category/ Type:

Office Sought: X House / Senate / President

State: LA District: 07

Disbursement For: 2004 — X Primary / General / Other (specify)

Transaction ID: 95115-7293359637280
Date of Disbursement: 06 / 10 / 2004

Amount of Each Disbursement this Period: 2500.00

C. Full Name (Last, First, Middle Initial)
Citizens for Arlen Specter

Mailing Address 111 S 15th Street
Packard Building 7th Floor

City: Philadelphia | State: PA | Zip Code: 19102-2625

Purpose of Disbursement: 2004 General

Candidate Name: Specter Arlen

Category/ Type:

Office Sought: House / X Senate / President

State: PA District: 00

Disbursement For: 2004 — Primary / X General / Other (specify)

Transaction ID: 07553-4904596209526
Date of Disbursement: 06 / 24 / 2004

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)
Citizens for Arlen Specter

Mailing Address 111 S 15th Street
Packard Building 7th Floor

City: Philadelphia | State: PA | Zip Code: 19102-2825

Purpose of Disbursement: 2004 GENERAL

Candidate Name: Specter Arlen

Category/ Type

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

Disbursement For: 2004 — Primary — X General — Other (specify)

Transaction ID: 59973-08946863D7182
Date of Disbursement: 06 / 30 / 2004

Amount of Each Disbursement this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
Committee To Reelect Congressman Chris Smith

Mailing Address PO Box 3184
PO Box 3184

City: Hamilton | State: NJ | Zip Code: 08619

Purpose of Disbursement: 2004 GENERAL

Candidate Name: Smith Christopher

Category/ Type

Office Sought: X House / Senate / President — State: NJ — District: 04

Disbursement For: 2004 — Primary — X General — Other (specify)

Transaction ID: 59973-2376977BD1322
Date of Disbursement: 06 / 30 / 2004

Amount of Each Disbursement this Period: 2500.00

C. Full Name (Last, First, Middle Initial)
Committee To Re-Elect Congressman Duncan Hunter

Mailing Address 9340 Fuerte Drive Suite 302
9340 Fuerte Drive Suite 302

City: La Mesa | State: CA | Zip Code: 91941

Purpose of Disbursement: General

Candidate Name: Hunter Duncan

Category/ Type

Office Sought: X House / Senate / President — State: CA — District: 52

Disbursement For: 2004 — Primary — X General — Other (specify)

Transaction ID: 3857
Date of Disbursement: 06 / 10 / 2004

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)
Congressional Majority Committee

Mailing Address PO Box 746

City: Bakersfield | State: CA | Zip Code: 93902

Purpose of Disbursement:

Candidate Name:

Category/ Type:

Office Sought: House / Senate / President

State: District:

Disbursement For: Primary / General / Other (specify)

Transaction ID: 95160-757D764422416
Date of Disbursement: 06 / 04 / 2004

Amount of Each Disbursement this Period: 5000.00

B. Full Name (Last, First, Middle Initial)
Congressman Joe Barton Committee, the

Mailing Address PO Box 1444

City: Ennis | State: TX | Zip Code: 75120

Purpose of Disbursement: 2004 General

Candidate Name: Barton Joe

Category/ Type:

Office Sought: X House / Senate / President

State: TX District: 06

Disbursement For: 2004 Primary / X General / Other (specify)

Transaction ID: D7508-21361941D9916
Date of Disbursement: 06 / 24 / 2004

Amount of Each Disbursement this Period: 1500.00

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

Mailing Address Post Office Box 4657
PO Box 4657

City: Casper | State: WY | Zip Code: 82604

Purpose of Disbursement: 2004 GENERAL

Candidate Name: Cubin Barbara

Category/ Type:

Office Sought: X House / Senate / President

State: WY District: 01

Disbursement For: 2004 Primary / X General / Other (specify)

Transaction ID: 59973-4301111102104
Date of Disbursement: 06 / 30 / 2004

Amount of Each Disbursement this Period: 5000.00

SUBTOTAL of Disbursements This Page (optional) ▶ **11500.00**

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)
Dutch Ruppersberger for Congress

Mailing Address 22 West Padonia Road Suite A307

City: Timonium | State: MD | Zip Code: 21093

Purpose of Disbursement: 2004 General

Candidate Name: Ruppersberger C.A.

Category/ Type:

Office Sought: X House / Senate / President

State: MD District: 02

Disbursement For: 2004 — Primary / X General / Other (specify)

Transaction ID: 95197-513B513445854
Date of Disbursement: 06 / 04 / 2004

Amount of Each Disbursement this Period: 1000.00

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

Mailing Address 462 California Road

City: Bronxville | State: NY | Zip Code: 10708

Purpose of Disbursement: 2004 Primary

Candidate Name: Engel Eliot

Category/ Type:

Office Sought: X House / Senate / President

State: NY District: 17

Disbursement For: 2004 — X Primary / General / Other (specify)

Transaction ID: 95115-291301908108B
Date of Disbursement: 06 / 10 / 2004

Amount of Each Disbursement this Period: 3000.00

C. Full Name (Last, First, Middle Initial)
Every Republican Is Crucial (ERICPAC)

Mailing Address 25 East Main Street Suite 200

City: Richmond | State: VA | Zip Code: 23219

Purpose of Disbursement: Primary

Candidate Name:

Category/ Type:

Office Sought: House / Senate / President

State: District:

Disbursement For: Primary / General / Other (specify)

Transaction ID: 3868
Date of Disbursement: 06 / 10 / 2004

Amount of Each Disbursement this Period: 2500.00

SUBTOTAL of Disbursements This Page (optional) ▶ **6500.00**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

☐ 21b	☐ 22	☒ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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

A.
Full Name (Last, First, Middle Initial)
Feinstein for Senate

Mailing Address 601 S. Glenoaks Blvd.; Suite 208

City: Burbank | State: CA | Zip Code: 91502

Purpose of Disbursement: 2004 Primary

Candidate Name: Feinstein Dianne

Category/ Type:

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

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

Transaction ID: 95160-1532861590385
Date of Disbursement: 06 / 04 / 2004

Amount of Each Disbursement this Period: 1000.00

B.
Full Name (Last, First, Middle Initial)
Friends of Blanche Lincoln

Mailing Address PO Box 3187

City: Little Rock | State: AR | Zip Code: 72203

Purpose of Disbursement: 2004 General

Candidate Name: Lincoln Blanche

Category/ Type:

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

Disbursement For: 2004 — Primary / X General / Other (specify)

Transaction ID: D7553-1639825701713
Date of Disbursement: 06 / 24 / 2004

Amount of Each Disbursement this Period: 1000.00

C.
Full Name (Last, First, Middle Initial)
Friends of Connie Mack

Mailing Address PO Box 60004
Pmb 388

City: Fort Myers | State: FL | Zip Code: 33906

Purpose of Disbursement: 2004 Primary

Candidate Name: Mack Connie

Category/ Type:

Office Sought: X House / Senate / President — State: FL District: 14

Disbursement For: 2004 — X Primary / General / Other (specify)

Transaction ID: 95197-7865716814994
Date of Disbursement: 06 / 04 / 2004

Amount of Each Disbursement this Period: 2500.00

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)
Friends of Duke Cunningham

Mailing Address 4710 Fourth Street #100

City: La Mesa | State: CA | Zip Code: 91941

Purpose of Disbursement: 2004 General

Candidate Name: Cunningham Randy

Category/Type

Office Sought: X House / Senate / President

State: CA District: 50

Disbursement For: 2004 Primary X General Other (specify)

Transaction ID: 95160-6015283465385
Date of Disbursement: 06 04 2004

Amount of Each Disbursement this Period: 1000.00

B.
Full Name (Last, First, Middle Initial)
Friends of Jim Saxton

Mailing Address PO Box 795

City: Mount Holly | State: NJ | Zip Code: 08060

Purpose of Disbursement: General

Candidate Name: Saxton Jim

Category/Type

Office Sought: X House / Senate / President

State: NJ District: 03

Disbursement For: 2004 Primary X General Other (specify)

Transaction ID: 3858
Date of Disbursement: 06 10 2004

Amount of Each Disbursement this Period: 1000.00

C.
Full Name (Last, First, Middle Initial)
Friends of Joe Pitts

Mailing Address PO Box 775

City: Unionville | State: PA | Zip Code: 19375

Purpose of Disbursement: 2004 General

Candidate Name: Pitts Joseph

Category/Type

Office Sought: X House / Senate / President

State: PA District: 16

Disbursement For: 2004 Primary X General Other (specify)

Transaction ID: 95197-1787683367729
Date of Disbursement: 06 04 2004

Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **3000.00**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

☐ 21b	☐ 22	☒ 23	☐ 24	☐ 25	☐ 26	
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b	

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

A. Full Name (Last, First, Middle Initial)
Friends of Lois Capps

Mailing Address PO Box 23940

City: Santa Barbara | State: CA | Zip Code: 93121

Purpose of Disbursement: General

Candidate Name: Capps Lois

Category/ Type

Office Sought: X House / Senate / President

State: CA District: 23

Disbursement For: 2004 / Primary / X General / Other (specify)

Transaction ID: D8072D0428E3826
Date of Disbursement: 06 04 2004

Amount of Each Disbursement this Period: 1000.00

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

Mailing Address 645 South Main Street

City: Wolfeboro | State: NH | Zip Code: 03894

Purpose of Disbursement: 2004 Primary

Candidate Name: Bradley Joseph

Category/ Type

Office Sought: X House / Senate / President

State: NH District: 01

Disbursement For: 2004 / X Primary / General / Other (specify)

Transaction ID: 95180-20225181131401
Date of Disbursement: 06 04 2004

Amount of Each Disbursement this Period: 2000.00

C. Full Name (Last, First, Middle Initial)
Jerry Weller for Congress Inc.

Mailing Address PO Box 15283

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

Purpose of Disbursement: General

Candidate Name: Weller Gerald

Category/ Type

Office Sought: X House / Senate / President

State: IL District: 11

Disbursement For: 2004 / Primary / X General / Other (specify)

Transaction ID: 3853
Date of Disbursement: 06 10 2004

Amount of Each Disbursement this Period: 2000.00

SUBTOTAL of Disbursements This Page (optional) ▶ **5000.00**

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)
John Lewis for Congress

Mailing Address 1520 Pinehurst Drive Southwest

City: Atlanta | State: GA | Zip Code: 30311

Purpose of Disbursement: 2004 Primary

Candidate Name: Lewis John

Category/ Type:

Office Sought: X House / Senate / President

State: GA District: 05

Disbursement For: 2004 X Primary / General / Other (specify)

Transaction ID: D7508-8005487322807
Date of Disbursement: 06 / 24 / 2004

Amount of Each Disbursement this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
John Shadeggs Friends

Mailing Address PO Box 45444

City: Phoenix | State: AZ | Zip Code: 85064

Purpose of Disbursement: 2004 Primary

Candidate Name: Shadegg John

Category/ Type:

Office Sought: X House / Senate / President

State: AZ District: 03

Disbursement For: 2004 X Primary / General / Other (specify)

Transaction ID: 95224-8834149432182
Date of Disbursement: 06 / 04 / 2004

Amount of Each Disbursement this Period: 2000.00

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

Mailing Address PO Box 1453

City: Orlando | State: FL | Zip Code: 32802

Purpose of Disbursement: 2004 Primary

Candidate Name: Keller Ric

Category/ Type:

Office Sought: X House / Senate / President

State: FL District: 08

Disbursement For: 2004 X Primary / General / Other (specify)

Transaction ID: 95115-0843579363822
Date of Disbursement: 06 / 10 / 2004

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)
Lisa Murkowski for Us Senate

Mailing Address PO Box 100847

City: Anchorage | State: AK | Zip Code: 99510

Purpose of Disbursement: 2004 general

Candidate Name: Murkowski Lisa

Category/ Type

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

Disbursement For: 2004 — Primary — X General — Other (specify)

Transaction ID: 95197-4441797137260
Date of Disbursement: 06 / 04 / 2004

Amount of Each Disbursement this Period: 500.00

B. Full Name (Last, First, Middle Initial)
Lisa Murkowski for Us Senate

Mailing Address PO Box 100847

City: Anchorage | State: AK | Zip Code: 99510

Purpose of Disbursement: 2004 General

Candidate Name: Murkowski Lisa

Category/ Type

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

Disbursement For: 2004 — Primary — X General — Other (specify)

Transaction ID: 95197-1838037371635
Date of Disbursement: 06 / 04 / 2004

Amount of Each Disbursement this Period: 500.00

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

Mailing Address 219-10 South Conduit Avenue
219-10 South Conduit Avenue

City: Springfield Garden | State: NY | Zip Code: 11413

Purpose of Disbursement: 2004 Primary

Candidate Name: Meeks Gregory

Category/ Type

Office Sought: X House / Senate / President — State: NY — District: 06

Disbursement For: 2004 — X Primary — General — Other (specify)

Transaction ID: 95982-5801507830619
Date of Disbursement: 06 / 18 / 2004

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) ▶

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)
Mike Bilirakis for Congress

Mailing Address PO Box 1077

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

Purpose of Disbursement: 2004 General

Candidate Name: Bilirakis Michael

Category/ Type

Office Sought: X House / Senate / President

State: FL District: 09

Disbursement For: 2004 — Primary / X General / Other (specify)

Transaction ID: 95115-17431277D3686
Date of Disbursement: 06 / 10 / 2004

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: 2004 Primary

Candidate Name: Bilirakis Michael

Category/ Type

Office Sought: X House / Senate / President

State: FL District: 09

Disbursement For: 2004 — X Primary / General / Other (specify)

Transaction ID: 95115-13303774S9526
Date of Disbursement: 06 / 10 / 2004

Amount of Each Disbursement this Period: 1500.00

C.
Full Name (Last, First, Middle Initial)
Missourians for Kit Bond

Mailing Address 147 N Meramec Suite 100

City: St. Louis | State: MO | Zip Code: 63105

Purpose of Disbursement: 2004 Primary

Candidate Name: Bond Christopher

Category/ Type

Office Sought: House / X Senate / President

State: MO District: 00

Disbursement For: 2004 — X Primary / General / Other (specify)

Transaction ID: 07508-6071893572807
Date of Disbursement: 06 / 24 / 2004

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)
Napolitano for Congress

Mailing Address 555 Capitol Mall Suite 1425

City: Sacramento | State: CA | Zip Code: 95814

Purpose of Disbursement: 2004 General

Candidate Name: Napolitano Grace

Category/ Type

Office Sought: X House / Senate / President
State: CA District: 38

Disbursement For: 2004 Primary X General Other (specify)

Transaction ID: 95197-849132716857
Date of Disbursement: 06 04 2004

Amount of Each Disbursement this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
Nelson 2006

Mailing Address PO Box 8666

City: Omaha | State: NE | Zip Code: 68103

Purpose of Disbursement: 2004 General

Candidate Name: Nelson Ben

Category/ Type

Office Sought: House / X Senate / President
State: NE District: 00

Disbursement For: 2004 Primary X General Other (specify)

Transaction ID: 95197-18934287759S2
Date of Disbursement: 06 04 2004

Amount of Each Disbursement this Period: 1000.00

C. 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: 2004 General

Candidate Name: Norwood Charlie

Category/ Type

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

Disbursement For: 2004 Primary X General Other (specify)

Transaction ID: 95135-9354822039604
Date of Disbursement: 06 10 2004

Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶ **3000.00**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

☐ 21b	☐ 22	☒ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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

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

Mailing Address PO Box 499
PO Box 499

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

Purpose of Disbursement: 2004 Primary

Candidate Name: Norwood Charlie

Category/ Type:

Office Sought: X House / Senate / President

State: GA District: 09

Disbursement For: 2004 — X Primary / General / Other (specify)

Transaction ID: 95135-73597353699682
Date of Disbursement: 06 / 10 / 2004

Amount of Each Disbursement this Period: 1500.00

B. Full Name (Last, First, Middle Initial)
Pac To the Future

Mailing Address Pmb 3230
268 Bush Street

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

Purpose of Disbursement:

Candidate Name:

Category/ Type:

Office Sought: House / Senate / President

State: District:

Disbursement For: Primary / General / Other (specify)

Transaction ID: 95197-61756533336432
Date of Disbursement: 06 / 04 / 2004

Amount of Each Disbursement this Period: 5000.00

C. Full Name (Last, First, Middle Initial)
People for English

Mailing Address PO Box 1940

City: Erie | State: PA | Zip Code: 16507

Purpose of Disbursement: 2004 General

Candidate Name: English Phil

Category/ Type:

Office Sought: X House / Senate / President

State: PA District: 03

Disbursement For: 2004 — Primary / X General / Other (specify)

Transaction ID: 95115-8982965350151
Date of Disbursement: 06 / 10 / 2004

Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶ **7500.00**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

☐ 21b	☐ 22	☒ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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

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

Mailing Address Post Office Box 38585

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

Purpose of Disbursement: 2004 General

Candidate Name: Sessions Pete

Category/ Type:

Office Sought: X House / Senate / President

State: TX District: 32

Disbursement For: 2004 — Primary / X General / Other (specify)

Transaction ID: 95135-1938355731010
Date of Disbursement: 06 / 10 / 2004

Amount of Each Disbursement this Period: 4000.00

B. Full Name (Last, First, Middle Initial)
Re-Elect McGovern Committee

Mailing Address PO Box 60405
PO Box 60405

City: Worcester | State: MA | Zip Code: 01606

Purpose of Disbursement: 2004 Primary House / D-Ma-3

Candidate Name: McGovern James

Category/ Type:

Office Sought: X House / Senate / President

State: MA District: 03

Disbursement For: 2004 — X Primary / General / Other (specify)

Transaction ID: 95982-69746033533744
Date of Disbursement: 06 / 18 / 2004

Amount of Each Disbursement this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
Richard Burr Committee

Mailing Address Post Office Box 5928

City: Winston-Salem | State: NC | Zip Code: 27113

Purpose of Disbursement: Primary

Candidate Name: Burr Richard

Category/ Type:

Office Sought: House / X Senate / President

State: NC District: 00

Disbursement For: 2004 — X Primary / General / Other (specify)

Transaction ID: 3854
Date of Disbursement: 06 / 10 / 2004

Amount of Each Disbursement this Period: 5000.00

SUBTOTAL of Disbursements This Page (optional) ▶ **10000.00**

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)
Simmons for Congress

Mailing Address PO Box 268 Drawer 271
PO Box 268 Drawer 271

City: Stonington | State: CT | Zip Code: 06378

Purpose of Disbursement: 2004 General

Candidate Name: Simmons Rob

Category/ Type:

Office Sought: X House / Senate / President

State: CT District: 02

Disbursement For: 2004 / Primary / X General / Other (specify)

Transaction ID: 95224-76647585B3041
Date of Disbursement: 06 04 2004

Amount of Each Disbursement this Period: 2000.00

B. Full Name (Last, First, Middle Initial)
Snyder for Congress Campaign Committee

Mailing Address PO Box 250998

City: Little Rock | State: AR | Zip Code: 72225

Purpose of Disbursement: 2004 General

Candidate Name: Snyder Vic

Category/ Type:

Office Sought: X House / Senate / President

State: AR District: 02

Disbursement For: 2004 / Primary / X General / Other (specify)

Transaction ID: D7553-93514651D6010
Date of Disbursement: 06 24 2004

Amount of Each Disbursement this Period: 1500.00

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

Mailing Address 131 North Ludlow Street Suite 317

City: Dayton | State: OH | Zip Code: 45402

Purpose of Disbursement: 2004 General

Candidate Name: Turner Michael

Category/ Type:

Office Sought: X House / Senate / President

State: OH District: 03

Disbursement For: 2004 / Primary / X General / Other (specify)

Transaction ID: 95160-93073061704B3
Date of Disbursement: 06 10 2004

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

A. Full Name (Last, First, Middle Initial)
Wyden for Senate

Mailing Address 123 Northeast 3rd Suite 321

City: Portland
State: OR
Zip Code: 97232

Purpose of Disbursement: 2004 General

Candidate Name: Wyden Ron

Category/ Type

Office Sought: House / X Senate / President
State: OR District: 00

Disbursement For: 2004 / Primary / X General / Other (specify)

Transaction ID: 95160-362713038B213

Date of Disbursement: 06 / 10 / 2004

Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶	1000.00
TOTAL This Period (last page this line number only) ▶	79500.00

Form/Schedule: F3XA

Transaction ID:

This amendment is being filed to correct a disbursement that was reported on Line 29 on the Detailed Summary Page. This disbursement should have been reported on Line 21(b).