REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

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USE FEC MAILING LABEL OR TYPE OR PRINT

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

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

CITY, STATE and ZIP CODE
SAN FRANCISCO CA 94109

2. FEC IDENTIFICATION NUMBER
C00196246

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

4. TYPE OF REPORT

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

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

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

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

(b) Is this Report an Amendment? ☐ YES [XX] NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 10/1/97 through 10/31/97		
6. (a) Cash on Hand January 1, 19 97		$ 189,584.53
(b) Cash on Hand at Beginning of Reporting Period	$ 221,824.93	
(c) Total Receipts (from Line 19)	$ 15,919.25	$ 268,455.60
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 237,744.18	$ 458,040.13
7. Total Disbursements (from Line 30)	$ 570.38	$ 220,866.33
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 237,173.80	$ 237,173.80
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$ 0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$ 0	

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

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

Type or Print Name of Treasurer
PAULA E. LENT

Signature of Treasurer
Paula Lent Treasurer

Date
11/19/97

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

FEC FORM 3X
(revised 9/93)

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

(revised 1/1/91)

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

REPORT COVERING PERIOD FROM 10/1/97 TO: 10/31/97

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year	
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	14,650.00	233,686.25	11
ii. Unitemized	800.00	33,592.82	11
iii. Total (add i and ii) ➤	15,450.00	267,279.07	11
b. Political Party Committees	0	0	11
c. Other Political Committees (such as PACs)	0	0	11
d. Total Contributions (add a iii, b and c) ➤	15,450.00	267,279.07	11
12. Transfers From Affiliated/Other Party Committees	0	0	12
13. All Loans Received	0	0	13
14. Loan Repayments Received	0	0	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0	0	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0	0	16
17. Other Federal Receipts (Dividends, Interest, etc.)	469.25	1,176.53	17
18. Transfers from Nonfederal Account for Joint Activity	0	0	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	15,919.25	268,455.60	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	15,919.25	268,455.60	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	0	938.81	21(a
ii. Non-Federal Share	0	267.00	21(a
b. Other Federal Operating Expenditures	70.38	1,910.52	21(b
c. Total Operating Expenditures (add a i, a ii, and b) ➤	70.38	3,116.33	21(c
22. Transfers to Affiliated/Other Party Committees	0	0	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	500.00	217,750.00	23
24. Independent Expenditures (use Schedule E)	0	0	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0	0	25
26. Loan Repayments Made	0	0	26
27. Loans Made	0	0	27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees	0	0	28(a
b. Political Party Committees	0	0	28(b
c. Other Political Committees (such as PACs)	0	0	28(c
d. Total Contribution Refunds (add a, b and c) ➤	0	0	28(d
29. Other Disbursements	0	0	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	570.38	220,866.33	30
31. Total Federal Disbursements (subtract line 21 a i from line 30) ➤	570.38	220,599.33	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	15,450.00	267,279.07	32
33. Total Contribution Refunds (from line 28d)	0	0	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	15,450.00	267,279.07	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	70.38	3,548.17	35
36. Offsets to Operating Expenditures (from line 15)	0	0	36
37. Net Operating Expenditures (subtract line 36 from 35) ➤	70.38	3,548.17	37

SCHEDULE A | **ITEMIZED RECEIPTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 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)

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
A. UNION BANK 350 CALIFORNIA STREET SAN FRANCISCO CA 94104	N/A	10/3/97	469.25
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: N/A Aggregate Year-to-Date > $		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date > $		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date > $		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date > $		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date > $		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date > $		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date > $		

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

TOTAL This Period (last page this line number only) ..... > 469.25

97.03.253.1413

11/18/97

American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)
Itemized Receipts
Contributions from Individuals Other than Political Committees
SCHEDULE A
From 10/01/97 To 10/31/97

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NAME and ADDRESS	EMPLOYER/OCCUPATION	YTD AMOUNT	DATE	RECEIPT AMOUNT
Podos Steven M Mt Sinai Med Ctr Box 1183 1 Gustave Levy Place New York NY 10029	MT SINAI Ophthalmologist	300.00	10/01/97	300.00
Meyer Roger J Florida Eye Institute 2750 Indian River Blvd Vero Beach FL 32960	FLORIDA EYE INST Ophthalmologist	300.00	10/01/97	300.00
Margherio Raymond R 632 William Beaumont Med Bldg 3535 West 13 Mile Road Royal Oak MI 48073	o Ophthalmologist	300.00	10/02/97	300.00
Wells Craig G Vitreoretinal Associates 1220 Madison St Ste 1002 Seattle WA 98104	UNIV OF WASHINGTON Ophthalmologist	300.00	10/02/97	300.00
Schwenk Gordon C Suite 106 1500 South Magnolia Extension Ocala FL 34471	Self-Employed Ophthalmologist	300.00	10/02/97	300.00
Brinton Gregory S #210 359 8th Avenue Salt Lake City UT 84103	Self-Employed Ophthalmologist	300.00	10/02/97	300.00

Subtotal: 1,800.00

11/18/97

American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)
Itemized Receipts
Contributions from Individuals Other than Political Committees
SCHEDULE A
From 10/01/97 To 10/31/97

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NAME and ADDRESS	EMPLOYER/OCCUPATION	YTD AMOUNT	DATE	RECEIPT AMOUNT
Petersen Walter C Suite 623 801 Broadway Seattle WA 98122	self employed Ophthalmologist	300.00	10/02/97	300.00
Smiddy William E PO Box 016880 Miami FL 33101	U OF MIAMI Ophthalmologist	300.00	10/02/97	300.00
Matthews G Philip 5421 La Sierra Drive Dallas TX 75231	ECSC Retina II Ophthalmologist	300.00	10/02/97	300.00
Goldberg Morton F Johns Hopkins University 600 N Wolfe St/Maumenee 727 Baltimore MD 21287-9278	Ophthalmologist	300.00	10/02/97	300.00
Holcomb William E 207 4th Avenue SE Cullman AL 35055	SELF-EMPLOYED Ophthalmologist	300.00	10/02/97	300.00
Arnold Barbara J Suite 201 7275 East Southgate Drive Sacramento CA 95823	Self-Employed Ophthalmologist	300.00	10/02/97	300.00

Subtotal: 1,800.00

97.03.253.1415

11/18/97

American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)
Itemized Receipts
Contributions from Individuals Other than Political Committees
SCHEDULE A
From 10/01/97 To 10/31/97

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NAME and ADDRESS	EMPLOYER/OCCUPATION	YTD AMOUNT	DATE	RECEIPT AMOUNT
Avera C Blake 1704 11th Street Wichita Falls TX 76301	Texas Tech Univ HSC Ophthalmologist	300.00	10/02/97	300.00
Horbin Thomas S Jr Eye Consultants of Atlanta 95 Collier Road NW Suite 3000 Atlanta GA 30309-1604	Eye Consultants of Atlanta Ophthalmologist	300.00	10/06/97	300.00
Edwin Russell L Physician Professional Center 1300-28th Street South Great Falls MT 59405	Self-Employed Ophthalmologist	300.00	10/07/97	300.00
Rabb Maurice F Apartment 34-A 161 East Chicago Avenue Chicago IL 60611	Self-Employed Ophthalmologist	300.00	10/07/97	300.00
Wilson M Edward Jr Medical Univ of South Carolina Storm Eye Inst/171 Ashley Ave Charleston SC 29425-0950	MED UNIV OF S.C. Ophthalmologist	300.00	10/07/97	300.00
Abel Robert Jr Concord Plaza Naamans Building 3501 Silverside Road Wilmington DE 19810	DE Ophth Consultants Ophthalmologist	300.00	10/07/97	300.00

Subtotal: 1,800.00

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NAME and ADDRESS	EMPLOYER/OCCUPATION	YTD AMOUNT	DATE	RECEIPT AMOUNT
Hanner Mark E 2522 West Jetton Tampa FL 33629-5323	Self-Employed Ophthalmologist	300.00	10/07/97	300.00
Miller Kevin M Jules Stein Eye Institute 100 Stein Plaza, UCLA Los Angeles CA 90095-7002	SELF EMPLOYED Ophthalmologist	300.00	10/07/97	300.00
Weisenthal Robert W PO Box 48 5770 Commons Park Dewitt NY 13214-0048	Self-Employed Ophthalmologist	300.00	10/07/97	300.00
Bersani Thomas A 1810 Erie Boulevard East Syracuse NY 13210-1230	Self Employed Ophthalmologist	300.00	10/08/97	300.00
Orth David H Suite 301 25 East Washington Chicago IL 60602	SELF EMPLOYED Ophthalmologist	300.00	10/08/97	300.00
Fellman Ronald Leigh Greenville Med Tower Ste 300 7150 Greenville Ave Dallas TX 75231	Glaucoma Assoc of Texas Ophthalmologist	300.00	10/08/97	300.00

Subtotal: 1,800.00

11/18/97

American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)
Itemized Receipts
Contributions from Individuals Other than Political Committees
SCHEDULE A
From 10/01/97 to 10/31/97

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NAME and ADDRESS	EMPLOYER/OCCUPATION	YTD AMOUNT	DATE RECEIPT	AMOUNT
Haines Carroll F Suite A 515 Thompson Street Eden NC 27288	Self-Employed Ophthalmologist	300.00	10/08/97	300.00
McCanna Peter 1025 Regent Street Madison WI 53715	Davis-Duehr Clnc SC Ophthalmologist	300.00	10/08/97	300.00
Biglan Albert W 3518 Fifth Avenue Pittsburgh PA 15213-3387	RED OPHTH STRAB INC Ophthalmologist	300.00	10/08/97	300.00
Sutphin John E Jr Univ of Iowa Hosp Ophth Dept 200 Hawkins Dr Iowa City IA 52242-1091	U S Navy Ophthalmologist	300.00	10/09/97	300.00
Meredith Travis A Suite 17413 East Pavilion One Barnes Hospital Plaza St Louis MO 63110	Retina Consultants Ophthalmologist	300.00	10/09/97	300.00
Wilkinson Charles P Greater Baltimore MC/Ste 505 6569 North Charles Street Baltimore MD 21204	MAGEE EYE CLINIC Ophthalmologist	300.00	10/09/97	300.00

Subtotal: 1,800.00

11/18/97

American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)
Itemized Receipts
Contributions from Individuals Other than Political Committees
SCHEDULE A
From 10/01/97 To 10/31/97

Line Number 11a 1

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NAME and ADDRESS	EMPLOYER/OCCUPATION	YTD AMOUNT	DATE	RECEIPT AMOUNT
Stokes D Parker 602 East Cheves Street PO Box 100534 Florence SC 29501-0534	STOKE REG EYE CENTER Physician	300.00	10/09/97	300.00
Ewing Madeleine Q Suite 100 700 Spruce Steet Philadelphia PA 19106-4015	Self-Employed Ophthalmologist	300.00	10/09/97	300.00
Maloney Robert Keller Jules Stein Eye Institute 100 Stein Plaza/UCLA Los Angeles CA 90095-7003	EMORY UNIVERSITY Ophthalmologist	300.00	10/09/97	300.00
Barber Laurie Gray UAMS Dept Ophthalmology 4301 W Markham Slot 523 Little Rock AR 72205	UNIV OF KANSAS FOR M Ophthalmologist	300.00	10/16/97	300.00
Uhr Barry W 3600 Gaston Ave LB 120 Ste 609 Dallas TX 75246	Baylor Eye Assoc Ophthalmologist	300.00	10/16/97	300.00
Scholes Gary N 420 Lilly Road Northeast Olympia WA 98596	SELF-EMPLOYED Ophthalmologist	400.00	10/16/97	200.00

Subtotal: 1,700.00

97.03.253.1419

11/18/97

American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)
Itemized Receipts
Contributions from Individuals Other than Political Committees
SCHEDULE A
From 10/01/97 To 10/31/97

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NAME and ADDRESS	EMPLOYER/OCCUPATION	YTD AMOUNT	DATE	RECEIPT AMOUNT
Bacotti Joseph L Jr Suite 100 330 Old Country Road Mineola NY 11501-4145	Self Employed Ophthalmologist	300.00	10/16/97	300.00
Sugar Joel The UIC Eye Center 1855 W Taylor St Rm 3-164 Chicago IL 60612	UNIVERSITY OF IL Ophthalmologist	200.00	10/16/97	200.00
Clark Spurgeon W III 502 Isabelle Street Waycross GA 31501	SELF-EMPLOYED Physician	300.00	10/16/97	300.00
Schuetz Perry M PO Box A 1422 Polk Great Bend KS 67530	Self-Employed Ophthalmologist	300.00	10/16/97	300.00
Mazow Malcolm L 2855 Gramercy Houston TX 77025	SELF-EMPLOYED Ophthalmologist	300.00	10/16/97	300.00
De Blasio Peter F Jr 1532 Smith Street North Providence RI 02911	SELF-EMPLOYED Ophthalmologist	300.00	10/16/97	300.00

Subtotal: 1,700.00

11/18/97

American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)
Itemized Receipts
Contributions from Individuals Other than Political Committees
SCHEDULE A
From 10/01/97 To 10/31/97

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NAME and ADDRESS	EMPLOYER/OCCUPATION	YTD AMOUNT	DATE RECEIPT	AMOUNT
Williams David F Suite 570 6363 France Avenue South Minneapolis MN 55435	vitreoretional surg. Ophthalmologist	300.00	10/20/97	300.00
Dijkstal Dirk 1300 East 20th Street Cheyenne WY 82001-4021	SELF-EMPLOYED Ophthalmologist	300.00	10/20/97	300.00
Davenport Richard D Suite 204 2424 South 90th Street West Allis WI 53227	R D DAVENPORT MD SC Ophthalmologist	250.00	10/20/97	250.00
Masket Samuel Suite 380 7320 Woodlake Avenue West Hills CA 91307	SELF EMPLOYED Ophthalmologist	300.00	10/21/97	300.00
Smith Thomas H 1201 Summit Avenue Fort Worth TX 76102-4413	OPHTHALMOGY ASSOCIAAD Ophthalmologist	300.00	10/21/97	300.00
Kolker Allan E Eye Healthcare Associates 633 Emerson Rd St Louis MO 63141	WASHINGTON UNIV Ophthalmologist	300.00	10/21/97	300.00

Subtotal: 1,750.00

11/18/97

American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)
Itemized Receipts
Contributions from Individuals Other than Political Committees
SCHEDULE A
From 10/01/97 To 10/31/97

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NAME and ADDRESS	EMPLOYER/OCCUPATION	YTD AMOUNT	DATE RECEIPT	AMOUNT
Helveston Eugene M Ped Ophth & Adult Strabismus 702 Rotary Circle Indianapolis IN 46202	Ophthalmologist	500.00	10/22/97	500.00

Subtotal: 500.00

TOTAL: 14,650.00

American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)
Itemized Receipts
Contributions from Individuals Other than Political Committees
SCHEDULE A
From 10/01/97 To 10/31/97

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

NAME and ADDRESS	EMPLOYER/OCCUPATION	DATE	RECEIPT AMOUNT	YTD AMOUNT
Stechschulte John R 103 East Town Street Columbus OH 43215	EYE SURGERY CEN O OH Ophthalmologist	10/01/97	100.00	100.00
Jenkins Mark S PO Box 720 Conroe TX 77305-0720	MARK JENKINS MD Ophthalmologist	10/01/97	75.00	75.00
Maus Marlon Wills Eye Hospital 900 Walnut Street Philadelphia PA 19107	SELF EMPLOYED Ophthalmologist	10/01/97	50.00	50.00
Harbin Thomas S Sr 7 Horseleg Creek Road Rome GA 30165	Self Employed Ophthalmologist	10/06/97	-300.00	0.00
Estes Robert L Suite 202 456 24th Avenue North Nashville TN 37203	OPH Ophthalmologist	10/07/97	100.00	100.00
Russell Stephen Richard Univ Iowa Hosp Ophthalmology 200 Hawkins Dr Iowa City IA 52242	Saint Louis Univ Ophthalmologist	10/07/97	50.00	50.00

Subtotal: 75.00

97.03.253.1423

'1/18/97

American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)
Itemized Receipts
Contributions from Individuals Other than Political Committees
SCHEDULE A
From 10/01/97 To 10/31/97

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

AME and ADDRESS	EMPLOYER/OCCUPATION	DATE	RECEIPT AMOUNT	YTD AMOUNT
ve F Rodney 07 Craig Street orpus Christi TX 78404	Self Employed Ophthalmologist	10/08/97	100.00	100.00
enney Lawrence Edward 560 Medical Drive ottstown PA 19464	Self Employed Ophthalmologist	10/09/97	100.00	100.00
hillips Robert L 000 19th Street South irmingham AL 35205	OPHTHLMOLOGY ASSC Ophthalmologist	10/16/97	100.00	100.00
heung Margaret K partment 3807 212 Nuuanu Street onolulu HI 96817	Self Employed Ophthalmologist	10/16/97	50.00	50.00
eck Allen Dale he Emory Clinic 327 Clifton Road, NE tlanta GA 30322	EMERY UNIV Ophthalmologist	10/16/97	150.00	150.00
pedick Michael J choenfeld, (et al) Eye Care Ctr 01 Lakehurst Road oms River NJ 08753	ALLAN SCHOENFELD MDP Ophthalmologist	10/16/97	25.00	25.00

Subtotal: 525.00

97.03.253.1424

American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)
Itemized Receipts
Contributions from Individuals Other than Political Committees
SCHEDULE A
From 10/01/97 To 10/31/97

11/18/97

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NAME and ADDRESS	EMPLOYER/OCCUPATION	DATE	RECEIPT AMOUNT	YTD AMOUNT
Brayton John R J Florida Med Ctr Clin Eye Inst 3333 N Davis Hwy Pensacola FL 32514-6049	MEDICAL CENTER CLINI Ophthalmologist	10/16/97	100.00	100.00
Keltner John L JCOM Dept of Ophthalmology 1603 Alhambra Boulevard Sacramento CA 95816	SELF EMPLOYED Ophthalmologist	10/21/97	100.00	100.00

Subtotal: 200.00

TOTAL: 800.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1

FOR LINE NUMBER 21b

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NAME OF COMMITTEE (In Full)

American Acadamy of Ophthalmology, Inc. Political Committee (OPHTHPAC)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
UNION BANK 350 CALIFORNIA STREET SAN FRANCISCO CA 94104	Merchant Fees Disbursement for: Primary General Other (specify)	10/31/97	70.37
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

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

TOTAL This Period (last page this line number only) 70.38

FE4N191

97 . 03 . 253 . 3426

11/18/97

American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)
Itemized Disbursements
Contributions to Federal Candidates and Other Political Committees
Schedule B
From 10/01/97 To 10/31/97

Line Number 23

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Saldacci for Congress Post Office Box 623 Bangor NE 04402	HOUSE / 2 / ME 98 / Primary	10/09/97	500.00

Subtotal: 500.00

TOTAL: 500.00

Federal Election Commission

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PREPARER

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