FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT ▼** Example: If typing, type over the lines. 12FE4M5

American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)

ADDRESS (number and street) ▼ 655 Beach Street

☐ Check if different than previously reported. (ACC)

CITY ▲ San Francisco STATE ▲ CA ZIP CODE ▲ 94109 –

2. **FEC IDENTIFICATION NUMBER ▼** C C00196246

3. IS THIS REPORT ☒ NEW (N) **OR** ☐ AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- ☐ April 15 Quarterly Report (Q1)
- ☐ July 15 Quarterly Report (Q2)
- ☐ October 15 Quarterly Report (Q3)
- ☐ January 31 Year-End Report (YE)
- ☐ July 31 Mid-Year Report (Non-election Year Only) (MY)
- ☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)	☒ May 20 (M5)	☐ Aug 20 (M8)	☐ Nov 20 (M11) (Non-Election Year Only)
☐ Mar 20 (M3)	☐ Jun 20 (M6)	☐ Sep 20 (M9)	☐ Dec 20 (M12) (Non-Election Year Only)
☐ Apr 20 (M4)	☐ Jul 20 (M7)	☐ Oct 20 (M10)	☐ Jan 31 (YE)

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

Election on MM / DD / YYYY in the State of

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

Election on MM / DD / YYYY in the State of

5. Covering Period 04 / 01 / 2013 through 04 / 30 / 2013

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 *Steven Rausch* ***[Electronically Filed]*** Date 05 / 15 / 2013

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: 04 / 01 / 2013 To: 04 / 30 / 2013

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2013		292506.39
(b) Cash on Hand at Beginning of Reporting Period	309456.29	
(c) Total Receipts (from Line 19)	117355.56	295211.27
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	426811.85	587717.66
7. Total Disbursements (from Line 31)	25713.93	186619.74
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	401097.92	401097.92
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	

☒ 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. 06/2004)

Write or Type Committee Name

American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)

Report Covering the Period: From: 04 / 01 / 2013 To: 04 / 30 / 2013

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)	105709.41	242975.80
(ii) Unitemized	11646.15	52235.47
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	117355.56	295211.27
(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) ▶	117355.56	295211.27
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.)	0.00	0.00
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 Transfers (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)) ▶	117355.56	295211.27
20. Total Federal Receipts (subtract Line 18(c) from Line 19) ▶	117355.56	295211.27

DETAILED SUMMARY PAGE
of Disbursements

FEC **Form 3X** (Rev. 02/2003)

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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	213.93	975.32
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶	213.93	975.32
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	25500.00	184000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (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	0.00	1644.42
(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)) ▶	0.00	1644.42
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated 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))	25713.93	186619.74
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) ▶	25713.93	186619.74

DETAILED SUMMARY PAGE
of Disbursements

FEC **Form 3X** (Rev. 02/2003)

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)	117355.56	295211.27
34. Total Contribution Refunds (from Line 28(d))	0.00	1644.42
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	117355.56	293566.85
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	213.93	975.32
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ▶	213.93	975.32

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (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 Aaberg Jr.
Mailing Address: 2081 Hunters Run NE
City: Ada State: MI Zip Code: 49301
FEC 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: 04 / 12 / 2013
Transaction ID : D0FFD8DB-EADA-42F0-A
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial): Lama Al-Aswad
Mailing Address: Columbia Univ-Harknes Eye Institut
635 W 165 St
City: New York State: NY Zip Code: 10032-3701
FEC 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: 04 / 10 / 2013
Transaction ID : EEBE03B4-A47B-4EFB-8
Amount of Each Receipt this Period: 365.00

C. Full Name (Last, First, Middle Initial): Lama Al-Aswad
Mailing Address: 24 Ave at Port Imperial
Apt 321
City: West New York State: NJ Zip Code: 07093-8408
FEC 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: 04 / 15 / 2013
Transaction ID : 37E676D7827C436926C
Amount of Each Receipt this Period: 135.00

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

A. Full Name (Last, First, Middle Initial): Chris Albanis
Mailing Address: 2041 W Moffat St
City: Chicago State: IL Zip Code: 60647-5516
FEC 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: 04 / 11 / 2013
Transaction ID : 148D92D8-EDF3-417F-9
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial): Arezo Amirikia
Mailing Address: 3535 Franklin Rd
City: Bloomfield Hills State: MI Zip Code: 48302-0961
FEC 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: 04 / 12 / 2013
Transaction ID : 05A9B28D-F969-4C36-9
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial): Matthew Appenzeller
Mailing Address: 1016 Kirkpatrick Rd
City: Burlington State: NC Zip Code: 27215
FEC 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: 04 / 10 / 2013
Transaction ID : D1CB73F6-0092-4189-8
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

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

A. Full Name (Last, First, Middle Initial): Antonio Aragon II
Mailing Address: 7411 Wallace Blvd
City: Amarillo State: TX Zip Code: 79106-1835
FEC 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: 04 / 29 / 2013
Transaction ID : 26817619-1D4A-406D-9
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial): Robert Bahr
Mailing Address: 41 Cooke Street
City: Providence State: RI Zip Code: 02906
FEC 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: 04 / 04 / 2013
Transaction ID : 81F78FB8-1732-49D3-A
Amount of Each Receipt this Period: 365.00

C. Full Name (Last, First, Middle Initial): Ronald Barke
Mailing Address: 910 N Davis Dr Ste 100
City: Arlington State: TX Zip Code: 76012-3200
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 333.36
Date of Receipt: 04 / 18 / 2013
Transaction ID : 46C9B4FF935BF3F419D7
Amount of Each Receipt this Period: 83.34

SUBTOTAL of Receipts This Page (optional) ▶ 948.34

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

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ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial): Charles Barr
Mailing Address: 301 E Muhammad Ali Blvd
City: Louisville State: KY Zip Code: 40202-1511
FEC 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: 04 / 08 / 2013
Transaction ID : D69E94DD-E236-450C-8
Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial): Charles Barr
Mailing Address: 301 E Muhammad Ali Blvd
City: Louisville State: KY Zip Code: 40202-1511
FEC 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: 04 / 10 / 2013
Transaction ID : 91675C86-EB51-4A5D-A
Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial): Joseph Barron
Mailing Address: 3101 Mercedes Dr
City: Monroe State: LA Zip Code: 71201-5153
FEC 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: 04 / 15 / 2013
Transaction ID : B49298883E6A53F9969
Amount of Each Receipt this Period: 365.00

SUBTOTAL of Receipts This Page (optional) ▶ 2365.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial): George Bartley
Mailing Address: 200 1st St SW
City: Rochester State: MN Zip Code: 55905-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 04 / 15 / 2013
Transaction ID : E65295FBB08A1A0CB71
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial): Donald Benefield
Mailing Address: 14225 Dedeaux Rd
City: Gulfport State: MS Zip Code: 39503-3369
FEC 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: 04 / 05 / 2013
Transaction ID : 778A6786-C41B-412D-A
Amount of Each Receipt this Period: 365.00

C. Full Name (Last, First, Middle Initial): J. Chandler Berg
Mailing Address: Ste 110 2709 Meredyth Dr
City: Albany State: GA Zip Code: 31707-2267
FEC 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: 04 / 09 / 2013
Transaction ID : 409346D7-6525-41F9-A
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)
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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial): Andrew Berman
Mailing Address: 9630 N Kenton Ave
City: Skokie State: IL Zip Code: 60076
FEC 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: 04 / 04 / 2013
Transaction ID : AAEB75F3-CA6C-4D3E-A
Amount of Each Receipt this Period: 365.00

B. Full Name (Last, First, Middle Initial): Evan Black
Mailing Address: 29201 Telegraph Rd Ste 324
City: Southfield State: MI Zip Code: 48034-7646
FEC 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: 04 / 10 / 2013
Transaction ID : A37DF9F9-4E13-4349-A
Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial): Stephen Blaydes
Mailing Address: PO Box 1380
City: Bluefield State: WV Zip Code: 24701-1380
FEC 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: 04 / 08 / 2013
Transaction ID : 2B539539-1DF4-4B39-B
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 1865.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial): Reay Brown
Mailing Address: 5730 Glenridge Dr NE Ste 120
City: Atlanta State: GA Zip Code: 30328-5579
FEC 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: 04 / 18 / 2013
Transaction ID : 5E341129-599D-457C-A
Amount of Each Receipt this Period: 365.00

B. Full Name (Last, First, Middle Initial): Dawn Buckingham
Mailing Address: 5011 Burnet Rd
City: Austin State: TX Zip Code: 78756-2611
FEC 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: 04 / 10 / 2013
Transaction ID : EE4F02A4-50CC-4652-A
Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial): Donald Budenz
Mailing Address: 74006 Harvey
City: Chapel Hill State: NC Zip Code: 27517
FEC 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: 04 / 30 / 2013
Transaction ID : 6DDED5F4-6027-4F0D-8
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 1865.00

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

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

A. Full Name (Last, First, Middle Initial): Frank Burns
Mailing Address: 301 Pepperbush Rd
City: Louisville State: KY Zip Code: 40207-5707
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 416.66
Date of Receipt: 04 / 15 / 2013
Transaction ID : 55425E13438249BFA941
Amount of Each Receipt this Period: 83.33

B. Full Name (Last, First, Middle Initial): Louis Cantor
Mailing Address: 1160 W Michigan St
City: Indianapolis State: IN Zip Code: 46202-5209
FEC 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: 04 / 10 / 2013
Transaction ID : 4080BD30-500E-4BE5-8
Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial): Betty Cervenak
Mailing Address: 203 Palisade Ave
City: Jersey City State: NJ Zip Code: 07306-1155
FEC 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: 04 / 15 / 2013
Transaction ID : CDA4365F-FCD0-4220-A
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ▶ 2083.33

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial): Justin Charton
Mailing Address: 924 Main St
City: Conway State: AR Zip Code: 72032-5424
FEC 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: 04 / 09 / 2013
Transaction ID : D4A830B5-3764-48ED-B
Amount of Each Receipt this Period: 365.00

B. Full Name (Last, First, Middle Initial): Kenneth Paul Cheng
Mailing Address: 1000 Stonewood Dr Ste 310
City: Wexford State: PA Zip Code: 15090-8386
FEC 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: 04 / 10 / 2013
Transaction ID : 71F922A7-8803-46AB-9
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial): Young Choi
Mailing Address: 610 Riverchase Pkwy W
City: Birmingham State: AL Zip Code: 35244-1127
FEC 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: 04 / 26 / 2013
Transaction ID : EA60911D-A924-44F9-B
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

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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

A. Full Name (Last, First, Middle Initial): Donald Cinotti
Mailing Address: 600 Pavonia Ave, 6th Fl
City: Jersey City | State: NJ | Zip Code: 07306-2932
FEC ID number of contributing federal political committee: C
Name of Employer: Self | Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1500.00
Date of Receipt: 04 / 01 / 2013
Transaction ID : BBF3FE46-3893-4E41-9
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial): S. William William Clark
Mailing Address: 502 Isabella St
City: Waycross | State: GA | Zip Code: 31501-3638
FEC ID number of contributing federal political committee: C
Name of Employer: Self | Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 833.32
Date of Receipt: 04 / 15 / 2013
Transaction ID : 84CE7F04EA014C6D864F
Amount of Each Receipt this Period: 208.33

C. Full Name (Last, First, Middle Initial): William Clifford
Mailing Address: 102 Drury Ln
City: Garden City | State: KS | Zip Code: 67846-9671
FEC ID number of contributing federal political committee: C
Name of Employer: Self | Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2500.00
Date of Receipt: 04 / 11 / 2013
Transaction ID : 42370CA2-E166-483A-9
Amount of Each Receipt this Period: 2500.00

SUBTOTAL of Receipts This Page (optional) ▶ 3208.33

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: (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): Sander M. Zeskin Cohen
Mailing Address: Ste 11, 509 S Lenola Rd
City: Moorestown State: NJ Zip Code: 08057-1556
FEC 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: 04 / 18 / 2013
Transaction ID : 9C9E672F-DAE6-4A63-B
Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial): Anne Louise Coleman
Mailing Address: 100 Stein Plz Ste 2118
City: Los Angeles State: CA Zip Code: 90095-7065
FEC 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: 04 / 12 / 2013
Transaction ID : D4324721-CD1A-48AD-8
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial): Joseph Coney
Mailing Address: 2816 Veron Ln
City: Twinsburg State: OH Zip Code: 44087-3249
FEC 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: 04 / 08 / 2013
Transaction ID : ED21987F-B10C-4697-8
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ▶ 2500.00

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: (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): Geoffrey Cooper
Mailing Address: Ste 606, 5875 Bremo Rd
City: Richmond State: VA Zip Code: 23226-1934
FEC 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: 04 / 10 / 2013
Transaction ID : 4F9EA67A-3065-4BA2-8
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial): Robert Copeland
Mailing Address: 2041 Georgia Ave NW Towers 2100
City: Washington State: DC Zip Code: 20060-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 04 / 10 / 2013
Transaction ID : E06CC1F0-F4D3-40F4-9
Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial): James Croley III
Mailing Address: 613 Del Prado Blvd
City: Cape Coral State: FL Zip Code: 33990
FEC 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: 04 / 10 / 2013
Transaction ID : 7EF21FB4-D745-4DAD-B
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ▶ 2500.00

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: (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): John Dagianis
Mailing Address: 5 Coliseum Ave
City: Nashua State: NH Zip Code: 03063-3206
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2500.00
Date of Receipt: 04 / 10 / 2013
Transaction ID : 09D33390-C6CC-4490-A
Amount of Each Receipt this Period: 1500.00

B. Full Name (Last, First, Middle Initial): John Dagianis
Mailing Address: 5 Coliseum Ave
City: Nashua State: NH Zip Code: 03063-3206
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2500.00
Date of Receipt: 04 / 10 / 2013
Transaction ID : 5E079390-3162-49E3-A
Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial): Martha Damaske Snearly
Mailing Address: 8055 Twin Oaks Drive
City: Broadview Heights State: OH Zip Code: 44147
FEC 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: 04 / 26 / 2013
Transaction ID : D7A36A74-BE83-4A98-A
Amount of Each Receipt this Period: 365.00

SUBTOTAL of Receipts This Page (optional) ▶ 2865.00

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: (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): Daniel Day
Mailing Address: 1625 Cedar Lake Pkwy
City: Minneapolis State: MN Zip Code: 55416-3613
FEC 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: 04 / 05 / 2013
Transaction ID : BC4E97C7-6FAF-4A4B-8
Amount of Each Receipt this Period: 365.00

B. Full Name (Last, First, Middle Initial): William Deegan
Mailing Address: Retina Group of Washington, 6355 Walker Ln Ste 502
City: Alexandria State: VA Zip Code: 22310
FEC 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: 04 / 10 / 2013
Transaction ID : BC20C4B7-025A-46E6-9
Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial): Philip James James Deer
Mailing Address: 4942 W Markham St
City: Little Rock State: AR Zip Code: 72205
FEC 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: 04 / 11 / 2013
Transaction ID : 2F91F46B-9154-41C6-B
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: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial): Paul DeGregorio
Mailing Address: Ste 100, 2 Pillsbury St
City: Concord State: NH Zip Code: 03301-3549
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: 365.00
Date of Receipt: 04 / 18 / 2013
Transaction ID : CD7C06AE-A7AC-45FD-A
Amount of Each Receipt this Period: 365.00

B. Full Name (Last, First, Middle Initial): Anna Luisa Di Lorenzo
Mailing Address: Ste B, 2877 Crooks Rd
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: 3500.00
Date of Receipt: 04 / 10 / 2013
Transaction ID : D7C851E6-DDE2-4610-9
Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial): Daniel Drysdale
Mailing Address: 3645 S Main St
City: Blacksburg State: VA Zip Code: 24060-7014
FEC 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: 04 / 10 / 2013
Transaction ID : 8447959E-D243-44BF-8
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

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

A. Full Name (Last, First, Middle Initial): Alexander Eaton
Mailing Address: Retina Health Ctr, 1567 Hayley Ln Ste 101
City: Fort Myers State: FL Zip Code: 33907
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 5000.00
Date of Receipt: 04 / 10 / 2013
Transaction ID : BE422235-D21C-47BA-A
Amount of Each Receipt this Period: 5000.00

B. Full Name (Last, First, Middle Initial): Jane Edmond
Mailing Address: 6610 Auden St
City: Houston State: TX Zip Code: 77005-4304
FEC 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: 04 / 08 / 2013
Transaction ID : 22812C0A-F18B-4F95-A
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial): Michael Elman
Mailing Address: Ste 310, 9114 Philadelphia Rd
City: Baltimore State: MD Zip Code: 21237-4350
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1121.68
Date of Receipt: 04 / 11 / 2013
Transaction ID : A917D97C-14DF-413D-B
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ▶ 6500.00

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: (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): Geoffrey Emerson
Mailing Address: Ste 304, 710 E 24th St
City: Minneapolis State: MN Zip Code: 55404-3846
FEC 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: 04 / 10 / 2013
Transaction ID : F908C4DF-997B-44D7-9
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial): K. David David Epley
Mailing Address: Ste 430, 11800 NE 128th St
City: Kirkland State: WA Zip Code: 98034-7208
FEC 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: 04 / 10 / 2013
Transaction ID : A996BA98-E2C6-414A-9
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial): Robert Erickson
Mailing Address: 800 S Adams Rd Ste 201
City: Birmingham State: MI Zip Code: 48009-7008
FEC 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: 04 / 03 / 2013
Transaction ID : 303864E7-7D3D-4861-B
Amount of Each Receipt this Period: 365.00

SUBTOTAL of Receipts This Page (optional) ▶ 1115.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial)
Matthew Farber

Mailing Address 7900 W Jefferson
Suite 300

City: Fort Wayne
State: IN
Zip Code: 46804-4128

FEC 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: 04 / 11 / 2013
Transaction ID : DA513F93-76BE-4728-8

Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
James Felch

Mailing Address 117 Abbotsford Dr

City: Nashville
State: TN
Zip Code: 37215

FEC 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: 04 / 18 / 2013
Transaction ID : BCC178C5-A4FF-4214-8

Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Joanna Fisher

Mailing Address 2643 Huntingdon Pike

City: Huntingdon Valley
State: PA
Zip Code: 19006-5109

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 ▼ 500.00

Date of Receipt: 04 / 11 / 2013
Transaction ID : 83B8C696-7376-4548-9

Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 2000.00

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

A. Full Name (Last, First, Middle Initial)
Tamara Fountain

Mailing Address 1445 Coral Pkwy

City: Northbrook
State: IL
Zip Code: 60062-5192

FEC 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: 04 / 11 / 2013

Transaction ID : CA7EA1F3-CB53-4391-8

Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
Bradley Dean Dean Fouraker

Mailing Address 4905 W Bay Way Pl

City: Tampa
State: FL
Zip Code: 33629-4833

FEC 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: 04 / 11 / 2013

Transaction ID : CF450412-C638-4FB9-A

Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Brian Francis

Mailing Address Ste 4804
1450 San Pablo St

City: Los Angeles
State: CA
Zip Code: 90033-4500

FEC 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: 04 / 09 / 2013

Transaction ID : DCE834AE-73D2-4329-9

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

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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 Frangie
Mailing Address: 489 Bernardston Rd
City: Greenfield State: MA Zip Code: 01301-1238
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: 1000.00
Date of Receipt: 04 / 09 / 2013
Transaction ID : 9C860B35-5C0C-48B3-9
Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial): Samuel Garrett
Mailing Address: 1524 Shorehaven Ct
City: Virginia Beach State: VA Zip Code: 23454-1718
FEC 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: 04 / 03 / 2013
Transaction ID : 1B9C3ADA-9D63-4A4D-B
Amount of Each Receipt this Period: 365.00

C. Full Name (Last, First, Middle Initial): Sidney Gicheru
Mailing Address: 440 W Lyndon B Johnson Fwy
City: Irving State: TX Zip Code: 75063-3768
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1365.00
Date of Receipt: 04 / 10 / 2013
Transaction ID : F7F8CC74-C5ED-41A5-8
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

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

A. Full Name (Last, First, Middle Initial): Sidney Gicheru
Mailing Address: 440 W Lyndon B Johnson Fwy, Suite 300
City: Irving | State: TX | Zip Code: 75063-3768
FEC ID number of contributing federal political committee: C
Name of Employer: Self | Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1365.00
Date of Receipt: 04 / 14 / 2013
Transaction ID : 88AA1C2D-AC77-4B72-9
Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial): Ravi Goel
Mailing Address: 741 Route 70 W
City: Cherry Hill | State: NJ | Zip Code: 08002-3527
FEC 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: 04 / 18 / 2013
Transaction ID : BF9C5A88-9F5A-45AA-8
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial): Sanjay Goel
Mailing Address: 5824 Wild Orange Gate
City: Clarksville | State: MD | Zip Code: 21029-1656
FEC 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: 04 / 11 / 2013
Transaction ID : FD481789-C47B-4C55-B
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ▶ 2500.00

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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[ ] 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): Lynn Gordon
Mailing Address: 100 Stein Plaza
City: Los Angeles | State: CA | Zip Code: 90095-7065
FEC 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: 04 / 12 / 2013
Transaction ID : E1B5DA40-C60F-423F-B
Amount of Each Receipt this Period: 300.00

B. Full Name (Last, First, Middle Initial): Edward Graul
Mailing Address: 251 Moosa Boulevard
City: Eunice | State: LA | Zip Code: 70535
FEC 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: 04 / 03 / 2013
Transaction ID : E5E7EDD9-FD71-40A6-B
Amount of Each Receipt this Period: 365.00

C. Full Name (Last, First, Middle Initial): Thomas Graul
Mailing Address: 1710 S 70th St
City: Lincoln | State: NE | Zip Code: 68506-1676
FEC 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: 04 / 10 / 2013
Transaction ID : C179ABD3-F40A-4E22-B
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 1165.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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[ ] 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 Gualtieri
Mailing Address: 3969 4th Ave Ste 300
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: 360.00
Date of Receipt: 04 / 12 / 2013
Transaction ID : 30A865EA-BAA6-446A-8
Amount of Each Receipt this Period: 360.00

B. Full Name (Last, First, Middle Initial): Eugene Gullingsrud
Mailing Address: 7450 France Ave S Ste 100
City: Edina | State: MN | Zip Code: 55435-4799
FEC 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: 04 / 11 / 2013
Transaction ID : 0484F20A-6385-4D72-9
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial): Eugene Gullingsrud
Mailing Address: 7450 France Ave S Ste 100
City: Edina | State: MN | Zip Code: 55435-4799
FEC 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: 04 / 11 / 2013
Transaction ID : 5CA90A82-D98E-42CD-9
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 1360.00

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: (check only one)
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

A. Full Name (Last, First, Middle Initial): John Haley
Mailing Address: 1626 Forest Ln S, Ste B
City: Garland State: TX Zip Code: 75042-7943
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 333.36
Date of Receipt: 04 / 05 / 2013
Transaction ID : 4E67B8F2DD3684955894
Amount of Each Receipt this Period: 83.34

B. Full Name (Last, First, Middle Initial): Devin Harrison
Mailing Address: 475 Bradley Blvd
City: Richland State: WA Zip Code: 99352-4419
FEC 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: 04 / 03 / 2013
Transaction ID : ACAEFF84-807F-4D7E-8
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial): Sohail Hasan
Mailing Address: 10526 Wildflower Rd
City: Orland Park State: IL Zip Code: 60462-7444
FEC 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: 04 / 11 / 2013
Transaction ID : 89A9148C-6C04-4831-B
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 1083.34

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: (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): David Hayes
Mailing Address: PSC 475 Box 1374
City: FPO State: AP Zip Code: 96350-1374
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 333.36
Date of Receipt: 04 / 21 / 2013
Transaction ID : 4EF4BD0A2B666A6B4A9B
Amount of Each Receipt this Period: 83.34

B. Full Name (Last, First, Middle Initial): Isaac Hearne
Mailing Address: Ste 22, 294 E Moana Ln
City: Reno State: NV Zip Code: 89502-4634
FEC 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: 04 / 12 / 2013
Transaction ID : 16CFB2F5-0782-4A0A-9
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial): Marnix Heersink
Mailing Address: 2800 Ross Clark Circle SW
City: Dothan State: AL Zip Code: 36301
FEC 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: 04 / 03 / 2013
Transaction ID : 448922C3-2B92-429D-8
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ▶ 1583.34

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: (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): Jeffrey Heier
Mailing Address: 50 Staniford St, Ste 600
City: Boston State: MA Zip Code: 02114-2587
FEC 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: 04 / 12 / 2013
Transaction ID : C27B78C3-8EB1-4287-9
Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial): Dale Heuer
Mailing Address: The Eye Institute, 925 N 87th St
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: 04 / 05 / 2013
Transaction ID : 0DD31ABB-D0C1-40A9-A
Amount of Each Receipt this Period: 365.00

C. Full Name (Last, First, Middle Initial): Gary Hirshfield
Mailing Address: 11 Hillside Ave
City: Port Washington State: NY Zip Code: 11050-2723
FEC 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: 04 / 10 / 2013
Transaction ID : 580AC5F4-C112-493F-8
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 1865.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial): Michael Hodges
Mailing Address: 4577 Brumley Rd
City: Newburgh | State: IN | Zip Code: 47630-9620
FEC 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: 04 / 10 / 2013
Transaction ID : 9CF71C3D-CDB4-4D87-9
Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial): Aaron Holtebeck
Mailing Address: 200 S Water St Unit 108
City: Milwaukee | State: WI | Zip Code: 53204-1497
FEC 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: 04 / 10 / 2013
Transaction ID : 6712F0BE-2864-497A-9
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial): Aaron Holtebeck
Mailing Address: 200 S Water St Unit 108
City: Milwaukee | State: WI | Zip Code: 53204-1497
FEC 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: 04 / 11 / 2013
Transaction ID : A4C30080-6772-4EC3-A
Amount of Each Receipt this Period: 115.00

SUBTOTAL of Receipts This Page (optional) ▶ 1365.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[ ] 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): Roger Husted
Mailing Address: 46 Cambridge Dr
City: Red Hook State: NY Zip Code: 12571-1611
FEC 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: 04 / 17 / 2013
Transaction ID : 4C6FB0FB-579D-467D-
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial): David Ingvoldstad
Mailing Address: 1340 S 90th St
City: Omaha State: NE Zip Code: 68124-1204
FEC 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: 04 / 11 / 2013
Transaction ID : F8E798BD-C77B-422E-9
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial): Gary Jamell
Mailing Address: Ste 120
3601 S Clarkson St
City: Englewood State: CO Zip Code: 80113-3945
FEC 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: 04 / 18 / 2013
Transaction ID : BCBDB032-9ADF-47BB-8
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

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[ ] 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): Scott Jamerson
Mailing Address: 331 Laidley St Ste 301
City: Charleston State: WV Zip Code: 25301-1605
FEC 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: 04 / 22 / 2013
Transaction ID : F2099F27-38F0-4F61-8
Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial): Anthony Pruett Johnson
Mailing Address: 601 Halton Rd
City: Greenville State: SC Zip Code: 29607-3403
FEC 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: 04 / 09 / 2013
Transaction ID : A81672A5-FC67-4BD9-B
Amount of Each Receipt this Period: 365.00

C. Full Name (Last, First, Middle Initial): Anne Keating
Mailing Address: 705 13th Ave N Apt 201
City: Fargo State: ND Zip Code: 58102-2681
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 564.00
Date of Receipt: 04 / 08 / 2013
Transaction ID : E7AA2A7C-D600-4D40-B
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

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

A. Full Name (Last, First, Middle Initial): Robert King
Mailing Address: 4875 Ward Rd, Ste 600
City: Wheat Ridge State: CO Zip Code: 80033-1944
FEC 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: 04 / 15 / 2013
Transaction ID : E615B31612D780BF7D7
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial): Craig Kliger
Mailing Address: 100 Galewood Cir
City: San Francisco State: CA Zip Code: 94131-1132
FEC 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: 04 / 11 / 2013
Transaction ID : 02BEEE9E-7F39-4618-8
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial): Michael Korey
Mailing Address: 3982 North Milwaukee Ave
City: Chicago State: IL Zip Code: 60641
FEC 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: 04 / 09 / 2013
Transaction ID : F3B34233-2F52-416C-8
Amount of Each Receipt this Period: 365.00

SUBTOTAL of Receipts This Page (optional) ▶ 1115.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial): Lydia Lane
Mailing Address: 4101 Bear Tree Dr
City: Little Rock | State: AR | Zip Code: 72223-1981
FEC 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: 04 / 15 / 2013
Transaction ID : CB56679719FA107B83A
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial): Mitchel Lautenberg
Mailing Address: 601 Route 37 W
City: Toms River | State: NJ | Zip Code: 08755-8050
FEC 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: 04 / 26 / 2013
Transaction ID : C4E1A610-707B-4178-8
Amount of Each Receipt this Period: 365.00

C. Full Name (Last, First, Middle Initial): Julie Lee
Mailing Address: Ste 105
3950 Kresge Way
City: Louisville | State: KY | Zip Code: 40207-4637
FEC 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: 04 / 10 / 2013
Transaction ID : 092729F6-3F89-4679-9
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

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

A. Full Name (Last, First, Middle Initial): Paul Lee
Mailing Address: University of Michigan, 1000 Wall Street
City: Ann Arbor State: MI Zip Code: 48105
FEC 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: 04 / 04 / 2013
Transaction ID : BC6DB105-1200-4075-9
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial): Richard Lee
Mailing Address: Ste 201, 491 30th St
City: Oakland State: CA Zip Code: 94609-3235
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2500.00
Date of Receipt: 04 / 10 / 2013
Transaction ID : 0D2E07BE-A2C7-4009-9
Amount of Each Receipt this Period: 2500.00

C. Full Name (Last, First, Middle Initial): Jay Harris Levy
Mailing Address: 184 NE 168th St
City: North Miami Beach State: FL Zip Code: 33162-3412
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 333.36
Date of Receipt: 04 / 10 / 2013
Transaction ID : 170203C983A94ECF8363
Amount of Each Receipt this Period: 83.34

SUBTOTAL of Receipts This Page (optional) ▶ 3083.34

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial): Steven Lichtenstein
Mailing Address: 8921 N Wood Sage Rd
City: Peoria State: IL Zip Code: 61615-7822
FEC 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: 04 / 10 / 2013
Transaction ID : D0CB6695-BC75-4A1B-9
Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial): Raymond Liggio
Mailing Address: 80 Lindall St
City: Danvers State: MA Zip Code: 01923-2135
FEC 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: 04 / 04 / 2013
Transaction ID : A33A1A00-2020-422D-8
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial): Bryant Lum
Mailing Address: Ste A 3088 Telegraph Rd
City: Ventura State: CA Zip Code: 93003-3235
FEC 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: 04 / 30 / 2013
Transaction ID : 721DB9E2-78C2-4C78-8
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 2000.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

A. Full Name (Last, First, Middle Initial): Michael Lynch
Mailing Address: 11211 Sepulveda Blvd
City: Mission Hills | State: CA | Zip Code: 91345
FEC 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: 04 / 04 / 2013
Transaction ID : 96797CFE-9BA6-41B5-B
Amount of Each Receipt this Period: 365.00

B. Full Name (Last, First, Middle Initial): Mathew Maccumber
Mailing Address: 71 W 156th St Ste 400
City: Harvey | State: IL | Zip Code: 60426-4265
FEC 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: 04 / 11 / 2013
Transaction ID : 746EC2BA-0ED4-4F53-A
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial): Ahad Mahootchi
Mailing Address: PO Box 1059
City: Zephyrhills | State: FL | Zip Code: 33539-1059
FEC ID number of contributing federal political committee: C
Name of Employer: Self | Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 333.36
Date of Receipt: 04 / 26 / 2013
Transaction ID : 41C6BEADA5FB9448B812
Amount of Each Receipt this Period: 83.34

SUBTOTAL of Receipts This Page (optional) ▶ 948.34

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: (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): Jeff Maltzman
Mailing Address: 5599 N Oracle Rd
City: Tucson State: AZ Zip Code: 85704-3821
FEC 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: 04 / 11 / 2013
Transaction ID : F9138A10-0F08-43A3-A
Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial): Stephanie Jones Marioneaux
Mailing Address: 1013 Eden Way N Ste E
City: Chesapeake State: VA Zip Code: 23320-2792
FEC 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: 04 / 11 / 2013
Transaction ID : 38AF7593-67F0-4EB0-9
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial): Benjamin Mason
Mailing Address: 1110 Eagle Ridge Rd
City: Cedar Falls State: IA Zip Code: 50613-1514
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 208.35
Date of Receipt: 04 / 15 / 2013
Transaction ID : C088E367FF73436C9397
Amount of Each Receipt this Period: 41.67

SUBTOTAL of Receipts This Page (optional) ▶ 1541.67

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: (check only one)
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[ ] 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): Raj Maturi
Mailing Address: 200 W 103rd St, Ste 1060
City: Indianapolis State: IN Zip Code: 46290-1001
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 333.36
Date of Receipt: 04 / 26 / 2013
Transaction ID : 4D789996064B73A80A42
Amount of Each Receipt this Period: 83.34

B. Full Name (Last, First, Middle Initial): Richard Maw
Mailing Address: 265 N 185th Plz Apt 109
City: Elkhorn State: NE Zip Code: 68022-7939
FEC 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: 04 / 11 / 2013
Transaction ID : 630D132F-8DA2-49EB-9
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial): Louise Mawn
Mailing Address: 921 Travelers Ct
City: Nashville State: TN Zip Code: 37220-1435
FEC 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: 04 / 11 / 2013
Transaction ID : F55A4443-B421-49DE-9
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 1083.34

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: (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): Donald May
Mailing Address: PO Box 1678
City: Lubbock State: TX Zip Code: 79408-1678
FEC 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: 04 / 10 / 2013
Transaction ID : 35E15E56-F534-45F9-9
Amount of Each Receipt this Period: 135.00

B. Full Name (Last, First, Middle Initial): Mark Mayle
Mailing Address: 269 Hoffman Ave
City: Morgantown State: WV Zip Code: 26505
FEC 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: 04 / 12 / 2013
Transaction ID : E16428E4-237F-4AFF-A
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial): Terrence McCanna
Mailing Address: 2525 County Trunk I
City: Chippewa Falls State: WI Zip Code: 54729
FEC 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: 04 / 07 / 2013
Transaction ID : 8A80D418-D7E0-4021-A
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 1135.00

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: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial)
J. Stuart McCracken

Mailing Address 2609 N Duke St Ste 620

City: Durham
State: NC
Zip Code: 27704-3048

FEC 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: 04 / 10 / 2013

Transaction ID : DCAFD966-2BF2-4686-8

Amount of Each Receipt this Period: 365.00

B. Full Name (Last, First, Middle Initial)
David McCullough

Mailing Address 33 King St

City: Stratford
State: CT
Zip Code: 06615-5849

FEC 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: 04 / 03 / 2013

Transaction ID : D8479118-42F3-4225-B

Amount of Each Receipt this Period: 135.00

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

Mailing Address 1135 E Lakewood St Ste 104

City: Springfield
State: MO
Zip Code: 65810-2403

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Ophthalmologist

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 333.36

Date of Receipt: 04 / 20 / 2013

Transaction ID : 429E864A871BB27CC5A2

Amount of Each Receipt this Period: 83.34

SUBTOTAL of Receipts This Page (optional) ▶ 583.34

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

A. Full Name (Last, First, Middle Initial)
Robert Melendez

Mailing Address 735 Grey Hawk Dr NE

City: Rio Rancho
State: NM
Zip Code: 87144-4709

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Ophthalmologist

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 208.35

Date of Receipt: 04 / 01 / 2013
Transaction ID : 88EE453F-E4B9-466D-9

Amount of Each Receipt this Period: 41.67

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

Mailing Address 120 Dudley St Ste 301

City: Providence
State: RI
Zip Code: 02905-2429

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Ophthalmologist

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 333.33

Date of Receipt: 04 / 01 / 2013
Transaction ID : E4961DF0-FAB7-4C3C-A

Amount of Each Receipt this Period: 83.33

C. Full Name (Last, First, Middle Initial)
Eydie Miller

Mailing Address Scheie Eye Inst
51 North 39th St

City: Philadelphia
State: PA
Zip Code: 19104

FEC 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: 04 / 11 / 2013
Transaction ID : B0BF8945-2788-45F6-B

Amount of Each Receipt this Period: 500.00

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

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

A. Full Name (Last, First, Middle Initial): Alan Mindlin
Mailing Address: 1750 S Telegraph Road, Suite 303
City: Bloomfield Hills State: MI Zip Code: 48302-0179
FEC 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: 04 / 08 / 2013
Transaction ID : BDEAB419-C4E0-42BD-A
Amount of Each Receipt this Period: 365.00

B. Full Name (Last, First, Middle Initial): Amalia Miranda
Mailing Address: Bldg A # 700, 3435 NW 56th St
City: Oklahoma City State: OK Zip Code: 73112-4442
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 714.99
Date of Receipt: 04 / 01 / 2013
Transaction ID : CE95A262-4AF2-4EB0-B
Amount of Each Receipt this Period: 83.33

C. Full Name (Last, First, Middle Initial): Amalia Miranda
Mailing Address: Bldg A # 700, 3435 NW 56th St
City: Oklahoma City State: OK Zip Code: 73112-4442
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 714.99
Date of Receipt: 04 / 10 / 2013
Transaction ID : 9582B6A9-93E4-4ED8-9
Amount of Each Receipt this Period: 365.00

SUBTOTAL of Receipts This Page (optional) ▶ 813.33

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial): Abraham Mitias
Mailing Address: 215 Georgetown Pl
City: Charleston State: WV Zip Code: 25314-1871
FEC 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: 04 / 22 / 2013
Transaction ID : 7AF0902F-D291-473F-8
Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial): Claiborne Moore Callahan
Mailing Address: 511 West country Club Drive
City: Purcellville State: VA Zip Code: 20132
FEC 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: 04 / 29 / 2013
Transaction ID : 5DCEB8E3-D35A-4170-9
Amount of Each Receipt this Period: 365.00

C. Full Name (Last, First, Middle Initial): George Nardin
Mailing Address: 1115 Koohoo Pl
City: Kailua State: HI Zip Code: 96734-3276
FEC 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: 04 / 10 / 2013
Transaction ID : A66239EA-B318-4A12-
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)
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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial): Chad Nedrud
Mailing Address: 1224 Hunter Ln
City: Missoula State: MT Zip Code: 59803-1308
FEC 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: 04 / 10 / 2013
Transaction ID : 461E808C-DCA3-487F-A
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial): Thomas Oetting
Mailing Address: 200 Hawkins Dr
City: Iowa City State: IA Zip Code: 52242-1007
FEC 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: 04 / 10 / 2013
Transaction ID : 422C3AF0-08C7-453D-A
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial): Mildred M. G. Olivier
Mailing Address: 1555 Barrington Rd Ste 110
City: Hoffman Estates State: IL Zip Code: 60169-1062
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 500.00
Date of Receipt: 04 / 15 / 2013
Transaction ID : 934570869386F9C88B6
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

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

A. Full Name (Last, First, Middle Initial): Anthony Panariello
Mailing Address: 203 Palisade Avenue
City: Jersey City | State: NJ | Zip Code: 07306
FEC 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: 04 / 15 / 2013
Transaction ID : DE1B53A9-E027-4861-8
Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial): Harpreet Nini Patheja
Mailing Address: 110 Pepper Hill Way
City: Aiken | State: SC | Zip Code: 29801-2818
FEC ID number of contributing federal political committee: C
Name of Employer: Self | Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 333.36
Date of Receipt: 04 / 03 / 2013
Transaction ID : 4596BB9A18B5D774EDB0
Amount of Each Receipt this Period: 83.34

C. Full Name (Last, First, Middle Initial): William Penland
Mailing Address: 1020 W Buena Vista Rd
City: Evansville | State: IN | Zip Code: 47710-5150
FEC 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: 04 / 09 / 2013
Transaction ID : 25BBDE94-E576-4254-9
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 1583.34

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial): Stephen Petty
Mailing Address: Ste 155, 850 E Harvard Ave
City: Denver State: CO Zip Code: 80210-5073
FEC 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: 04 / 24 / 2013
Transaction ID : 8496A761-3A67-4FD4-9
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial): Lawrence Piazza
Mailing Address: PO Box 1539
City: Blue Hill State: ME Zip Code: 04614-1539
FEC 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: 04 / 01 / 2013
Transaction ID : B43CC803-187D-43C1-8
Amount of Each Receipt this Period: 83.33

C. Full Name (Last, First, Middle Initial): Lawrence Piazza
Mailing Address: PO Box 1539
City: Blue Hill State: ME Zip Code: 04614-1539
FEC 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: 04 / 10 / 2013
Transaction ID : 43F597D48D7CCC17D871
Amount of Each Receipt this Period: 41.67

SUBTOTAL of Receipts This Page (optional) ▶ 625.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial): David Plager
Mailing Address: 1160 W. Michigan St. Glick Eye Inst.
City: Indianapolis State: IN Zip Code: 46202-5133
FEC 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: 04 / 01 / 2013
Transaction ID : 3E9EA7B2-5641-4776-B
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial): Dustin Pomerleau
Mailing Address: 195 Fore River Pkwy Ste 480
City: Portland State: ME Zip Code: 04102
FEC 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: 04 / 18 / 2013
Transaction ID : EB8ED87F-BDE7-49BA-B
Amount of Each Receipt this Period: 75.00

C. Full Name (Last, First, Middle Initial): William Prestowitz
Mailing Address: 20010 Oakwood Dr
City: Abingdon State: VA Zip Code: 24211-6914
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 450.01
Date of Receipt: 04 / 01 / 2013
Transaction ID : 6B9AE717-A6CE-4311-A
Amount of Each Receipt this Period: 250.01

SUBTOTAL of Receipts This Page (optional) ▶ 825.01

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: (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 Price
Mailing Address: 578 Main St
City: Malden State: MA Zip Code: 02148-3900
FEC 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: 04 / 11 / 2013
Transaction ID : 22AAF7D8-4966-4FE4-A
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial): Andrew Prince
Mailing Address: 178 E 71st St
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: 1000.00
Date of Receipt: 04 / 10 / 2013
Transaction ID : 206EBBA2-0D8D-4656-A
Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial): Arnold Prywes
Mailing Address: 4212 Hempstead Turnpike
City: Bethpage State: NY Zip Code: 11714-5723
FEC 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: 04 / 10 / 2013
Transaction ID : 9FDF9758-D77D-49C0-8
Amount of Each Receipt this Period: 365.00

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) for each category of the Detailed Summary Page

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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

A. Full Name (Last, First, Middle Initial): William Quayle
Mailing Address: Houston Eye Associates, 2855 Gramercy
City: Houston State: TX Zip Code: 77025
FEC 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: 04 / 01 / 2013
Transaction ID : 57BE5D43-2F66-48C0-B
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial): P. Rao
Mailing Address: 164 S. Maple Ave
City: Webster Groves State: MO Zip Code: 63119
FEC 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: 04 / 11 / 2013
Transaction ID : 148378CA-67FC-4CF5-8
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial): Kristin Reidy
Mailing Address: 1909 Proctor Ct
City: Santa Fe State: NM Zip Code: 87505-4535
FEC 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: 04 / 10 / 2013
Transaction ID : 15A5C771-A99C-4BD6-A
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ▶ 1750.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

A. Full Name (Last, First, Middle Initial): Adam Reynolds
Mailing Address: 1438 N Ellington Pl
City: Eagle State: ID Zip Code: 83616-4078
FEC 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: 04 / 11 / 2013
Transaction ID : AD019B6E-AEF1-415E-A
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial): William Rich
Mailing Address: 6231 Leesburg Pike Ste 608
City: Falls Church State: VA Zip Code: 22044-2102
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 333.36
Date of Receipt: 04 / 26 / 2013
Transaction ID : 4A4F9A6F3B8E1618BF8B
Amount of Each Receipt this Period: 83.34

C. Full Name (Last, First, Middle Initial): Brandt Riley
Mailing Address: 2828 Sunrise Ct
City: Mason City State: IA Zip Code: 50401-7350
FEC 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: 04 / 17 / 2013
Transaction ID : 6F3D4A6C-C580-4E91-A
Amount of Each Receipt this Period: 365.00

SUBTOTAL of Receipts This Page (optional) ▶ 948.34

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: (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 Ringel
Mailing Address: 101A Kings Way W
City: Sewell State: NJ Zip Code: 08080-2233
FEC 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: 04 / 10 / 2013
Transaction ID : 6BF07958-D307-4221-9
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial): Philip Rizzuto
Mailing Address: Ste 301, 120 Dudley St
City: Providence State: RI Zip Code: 02905-2429
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 500.00
Date of Receipt: 04 / 10 / 2013
Transaction ID : 7FBF3390-F7CB-48B9-A
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial): Brian Rose
Mailing Address: 7571 S Willow Dr, Ste 101
City: Tempe State: AZ Zip Code: 85283-5034
FEC 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: 04 / 15 / 2013
Transaction ID : 22413E54C3628339B78
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: (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): Ryan Rush
Mailing Address: 7411 Wallace Blvd
City: Amarillo State: TX Zip Code: 79106-1835
FEC 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: 04 / 29 / 2013
Transaction ID : A404F2DB-C102-4133-B
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial): Steven Safran
Mailing Address: 132 Franklin Corner Rd A-1
City: Lawrenceville State: NJ Zip Code: 08648
FEC 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: 04 / 09 / 2013
Transaction ID : 6830E9C6-8A08-422D-9
Amount of Each Receipt this Period: 365.00

C. Full Name (Last, First, Middle Initial): Sarwat Salim
Mailing Address: Ste 470 930 Madison Avenue
City: Memphis State: TN Zip Code: 38163-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 04 / 12 / 2013
Transaction ID : 0DB8CCBA-C593-43DF-8
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: (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): Ruben Sanchez
Mailing Address: 71 Glen Summer Rosd
City: Pasadena State: CA Zip Code: 91105
FEC 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: 04 / 10 / 2013
Transaction ID : 64138848-F304-4CCC-A
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial): Jeffrey Sandler
Mailing Address: Ste 106, 4699 Main St
City: Bridgeport State: CT Zip Code: 06606-1830
FEC 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: 04 / 10 / 2013
Transaction ID : 0A1A56C3-17B0-408E-A
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial): Gary Schemmer
Mailing Address: Ste 200, 215 1st St N
City: Winter Haven State: FL Zip Code: 33881
FEC 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: 04 / 11 / 2013
Transaction ID : 89E4EF70-1DA3-4232-8
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

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[ ] 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): Joel Schuman
Mailing Address: Eye & Ear Inst, Ste 816, 203 Lothrop St
City: Pittsburgh State: PA Zip Code: 15213
FEC 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: 04 / 10 / 2013
Transaction ID : 8B6B7D33-7246-4E05-B
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial): Samuel Seto
Mailing Address: 21911 76th Ave W, Ste 101
City: Edmonds State: WA Zip Code: 98026-7918
FEC 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: 04 / 10 / 2013
Transaction ID : 4B4B0FB1-8541-4AA6-8
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial): Glenn Shear
Mailing Address: 5690 Glen Errol Rd NW
City: Atlanta State: GA Zip Code: 30327-4854
FEC 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: 04 / 11 / 2013
Transaction ID : A083C3B9-51A8-4C78-A
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

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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 Shulman
Mailing Address: 999 E Basse Rd, Ste 127
City: San Antonio State: TX Zip Code: 78209-1802
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 333.33
Date of Receipt: 04 / 15 / 2013
Transaction ID : A6499A60117B4EC084A3
Amount of Each Receipt this Period: 83.33

B. Full Name (Last, First, Middle Initial): Chasidy Singleton
Mailing Address: 872 Fonnic Dr
City: Nashville State: TN Zip Code: 37207-1308
FEC 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: 04 / 15 / 2013
Transaction ID : 72C972EAF58B9BC4785
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial): Daniel Smith
Mailing Address: 110 Pepper Hill Way
City: Aiken State: SC Zip Code: 29801-2818
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 333.36
Date of Receipt: 04 / 03 / 2013
Transaction ID : 499EA7527E009C51F98E
Amount of Each Receipt this Period: 83.34

SUBTOTAL of Receipts This Page (optional) ▶ 666.67

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial): Samuel Spalding
Mailing Address: 3107 East Genesee Street
City: Syracuse State: NY Zip Code: 13224
FEC 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: 04 / 23 / 2013
Transaction ID : 9C29BCFD-1F37-49CA-9
Amount of Each Receipt this Period: 365.00

B. Full Name (Last, First, Middle Initial): Stephen Spitzer
Mailing Address: Ste 100, 1101 Erie Blvd E
City: Syracuse State: NY Zip Code: 13210-1144
FEC 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: 04 / 10 / 2013
Transaction ID : 454A1A61-9A57-4DA4-9
Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial): Stephen Spitzer
Mailing Address: Ste 100, 1101 Erie Blvd E
City: Syracuse State: NY Zip Code: 13210-1144
FEC 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: 04 / 10 / 2013
Transaction ID : CF3A09BD-DCB8-4A23-A
Amount of Each Receipt this Period: 200.00

SUBTOTAL of Receipts This Page (optional) ▶ 665.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial): Stephen Spitzer
Mailing Address: Ste 100, 1101 Erie Blvd E
City: Syracuse State: NY Zip Code: 13210-1144
FEC 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: 04 / 10 / 2013
Transaction ID : 78D03BA7-ED9D-4B65-9
Amount of Each Receipt this Period: 200.00

B. Full Name (Last, First, Middle Initial): Derek Sprunger
Mailing Address: 200 W 103rd St Suite 2010
City: Indianapolis State: IN Zip Code: 46290-1092
FEC 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: 04 / 10 / 2013
Transaction ID : AF35801B-8A18-43EF-8
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial): Robert Spurny
Mailing Address: 3834 N Paseo Del Sol
City: Mesa State: AZ Zip Code: 85207-1853
FEC 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: 04 / 10 / 2013
Transaction ID : AF65A7A9-CEA7-4D6E-B
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 1200.00

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

A. Full Name (Last, First, Middle Initial): John Stechschulte
Mailing Address: 262 Neil Ave, Ste 320
City: Columbus State: OH Zip Code: 43215-7311
FEC 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: 04 / 15 / 2013
Transaction ID : C2C8E1949DF836EE3EF
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial): Thomas Steinemann
Mailing Address: 2703 Cranlyn Rd
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: 500.00
Date of Receipt: 04 / 03 / 2013
Transaction ID : 7D2DF252-EA38-4C2C-A
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial): Roger Steinert
Mailing Address: 118 I
City: Irvine State: CA Zip Code: 92697-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 333.36
Date of Receipt: 04 / 21 / 2013
Transaction ID : 440AB3DC9494144A9B98
Amount of Each Receipt this Period: 83.34

SUBTOTAL of Receipts This Page (optional) ▶ 1083.34

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: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial): Scott Stice
Mailing Address: 1309 Liberty St SE
City: Salem State: OR Zip Code: 97302-4245
FEC 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: 04 / 22 / 2013
Transaction ID : 04AD34B6-B323-42ED-
Amount of Each Receipt this Period: 365.00

B. Full Name (Last, First, Middle Initial): Keith Stolte
Mailing Address: 11115 County Line Rd
City: Spring Hill State: FL Zip Code: 34609-5615
FEC 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: 04 / 15 / 2013
Transaction ID : 1DFBFFAB2037E272BCE
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial): Cameron Stone
Mailing Address: 21 Medical Park Dr
City: Asheville State: NC Zip Code: 28803-2493
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 291.67
Date of Receipt: 04 / 03 / 2013
Transaction ID : C460AE65-DC50-4325-9
Amount of Each Receipt this Period: 208.33

SUBTOTAL of Receipts This Page (optional) ▶ 1073.33

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: (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 Su
Mailing Address: 2103B E. Griffin Parkway
City: Mission State: TX Zip Code: 78572
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 225.00
Date of Receipt: 04 / 09 / 2013
Transaction ID : 2817E746-4A7C-48DF-9
Amount of Each Receipt this Period: 225.00

B. Full Name (Last, First, Middle Initial): Grace Sun
Mailing Address: 200 Water St Apt 2215
City: New York State: NY Zip Code: 10038-3641
FEC 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: 04 / 11 / 2013
Transaction ID : 394B60B9-B2E0-4F1C-B
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial): John Sutphin
Mailing Address: 7400 State Line Rd Ste 100
City: Prairie Village State: KS Zip Code: 66208-3447
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1500.00
Date of Receipt: 04 / 01 / 2013
Transaction ID : ED0C2635-C803-4A69-8
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ▶ 1725.00

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: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

A. Full Name (Last, First, Middle Initial): John Sutphin
Mailing Address: 7400 State Line Rd Ste 100
City: Prairie Village State: KS Zip Code: 66208-3447
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1500.00
Date of Receipt: 04 / 10 / 2013
Transaction ID : DD4542AB-5F97-46A0-9
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial): John Thompson
Mailing Address: Ste 605, 6569 N Charles St
City: Baltimore State: MD Zip Code: 21204-6833
FEC 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: 04 / 10 / 2013
Transaction ID : 75F5F21F-D6A5-4B22-8
Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial): Steven Thornquist
Mailing Address: 2 Corporate Dr, Suite 112
City: Trumbull State: CT Zip Code: 06611-1376
FEC 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: 04 / 11 / 2013
Transaction ID : 5B7145A7-983D-4BA6-9
Amount of Each Receipt this Period: 365.00

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) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

A. Full Name (Last, First, Middle Initial): Robert Trent
Mailing Address: 3190 Churn Creek Rd
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: 2500.00
Date of Receipt: 04 / 18 / 2013
Transaction ID : 3DA9ECCC-28ED-4358-B
Amount of Each Receipt this Period: 2500.00

B. Full Name (Last, First, Middle Initial): Linda Tsai
Mailing Address: 520 East Dr
City: Saint Louis State: MO Zip Code: 63130-3801
FEC 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: 04 / 12 / 2013
Transaction ID : EFDC1CC8-BD72-4866-8
Amount of Each Receipt this Period: 425.00

C. Full Name (Last, First, Middle Initial): Ira Udell
Mailing Address: 600 Northern Blvd Ste 214
City: Great Neck State: NY Zip Code: 11021-5200
FEC 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: 04 / 10 / 2013
Transaction ID : 29A0F8FC-3660-44FC-9
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 3425.00

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: (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): Russell Van Gelder
Mailing Address: 7525 Mercer Terrace Dr
City: Mercer Island | State: WA | Zip Code: 98040-5531
FEC 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: 04 / 03 / 2013
Transaction ID : 664D6EAA-77E7-4D1B-B
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial): Woodford Van Van Meter
Mailing Address: E-320 KY CLINIC
City: Lexington | State: KY | Zip Code: 40506
FEC 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: 04 / 10 / 2013
Transaction ID : F54CED43-F4A3-436D-8
Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial): Gurunadh Vemulakonda
Mailing Address: 4218 7th Ave NE Unit C
City: Seattle | State: WA | Zip Code: 98105-6944
FEC 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: 04 / 11 / 2013
Transaction ID : D13057E5-86AC-4CB3-B
Amount of Each Receipt this Period: 301.00

SUBTOTAL of Receipts This Page (optional) ▶ 1801.00

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: (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): William Thomas Walton
Mailing Address: 13919 Bluff Wind
City: San Antonio State: TX Zip Code: 78216-7923
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 466.67
Date of Receipt: 04 / 15 / 2013
Transaction ID : 2A4A5F7B-BD18-4D26-8
Amount of Each Receipt this Period: 10.00

B. Full Name (Last, First, Middle Initial): Dana Weinkle
Mailing Address: Suite 201, 3131 South Tamiami Trail
City: Sarasota State: FL Zip Code: 34239-5101
FEC 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: 04 / 29 / 2013
Transaction ID : 2280275A-A086-4DFF-B
Amount of Each Receipt this Period: 365.00

C. Full Name (Last, First, Middle Initial): Barry Welch
Mailing Address: 424 Yellowstone Ave, Ste 110
City: Cody State: WY Zip Code: 82414-9309
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 333.36
Date of Receipt: 04 / 13 / 2013
Transaction ID : 496F938964A73DCE39CC
Amount of Each Receipt this Period: 83.34

SUBTOTAL of Receipts This Page (optional) ▶ 458.34

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: (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 Whitman
Mailing Address: 2801 Lemmon Ave, Ste 400
City: Dallas State: TX Zip Code: 75204-2399
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 333.32
Date of Receipt: 04 / 15 / 2013
Transaction ID : B0DFD87482254AFB9E2A
Amount of Each Receipt this Period: 83.33

B. Full Name (Last, First, Middle Initial): Peter Whitted
Mailing Address: 4353 Dodge St
City: Omaha State: NE Zip Code: 68131-2709
FEC 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: 04 / 10 / 2013
Transaction ID : F2A4429C-A72D-4BFA-B
Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial): Curtis Whittington Jr.
Mailing Address: 1190 N State St, Ste 403
City: Jackson State: MS Zip Code: 39202-2413
FEC 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: 04 / 15 / 2013
Transaction ID : 90DB9CC20C0BC2118EB
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 1583.33

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: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial): George Williams
Mailing Address: 227 Chestnut Cir
City: Bloomfield Hills | State: MI | Zip Code: 48304-2105
FEC 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: 04 / 05 / 2013
Transaction ID : 8D836CA7-A102-4D5F-A
Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial): Ruth Williams
Mailing Address: 2015 N Main St
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 ▼: 1000.00
Date of Receipt: 04 / 10 / 2013
Transaction ID : D4603677-7211-4E82-B
Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial): Jeremy Wolfe
Mailing Address: 3535 West 13 Mile Rd Ste 344
City: Royal Oak | State: MI | Zip Code: 48073
FEC ID number of contributing federal political committee: C
Name of Employer: Self | Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 291.68
Date of Receipt: 04 / 01 / 2013
Transaction ID : 15445BA8-2E33-4CF0-A
Amount of Each Receipt this Period: 83.33

SUBTOTAL of Receipts This Page (optional) ▶ 2083.33

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial): Jeremy Wolfe
Mailing Address: 3535 W 13 Mile Rd, Ste 344
City: Royal Oak State: MI Zip Code: 48073-6770
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 291.68
Date of Receipt: 04 / 21 / 2013
Transaction ID : 4BC1B322215C12F5E19A
Amount of Each Receipt this Period: 83.34

B. Full Name (Last, First, Middle Initial): James J. Wong
Mailing Address: 102 East Avenue
City: Norwalk State: CT Zip Code: 06851
FEC 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: 04 / 04 / 2013
Transaction ID : 8CCBCD6D-61F6-41D0-A
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial): George Wyhinny
Mailing Address: 8901 Golf Rd Ste 206
City: Des Plaines State: IL Zip Code: 60016-6850
FEC 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: 04 / 12 / 2013
Transaction ID : 0F834774-10FC-408F-9
Amount of Each Receipt this Period: 365.00

SUBTOTAL of Receipts This Page (optional) ▶ 948.34

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: (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): Jason Ysasaga
Mailing Address: 7411 Wallace Blvd
City: Amarillo State: TX Zip Code: 79106-1835
FEC 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: 04 / 29 / 2013
Transaction ID : BDB14CD9-324E-4BCF-B
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial): Charles Zacks
Mailing Address: Fl 2, 15 Lowell St
City: Portland State: ME Zip Code: 04102
FEC 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: 04 / 10 / 2013
Transaction ID : AF4A3682-7151-44FD-8
Amount of Each Receipt this Period: 300.00

C. Full Name (Last, First, Middle Initial): Jamie Zucker
Mailing Address: Canton Ophthalmology Assoc, 2600 W Tuscarawas St Ste 200
City: Canton State: OH Zip Code: 44708
FEC 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: 04 / 03 / 2013
Transaction ID : 2408F23D-DAFA-492E-9
Amount of Each Receipt this Period: 365.00

SUBTOTAL of Receipts This Page (optional) ▶ 1165.00

TOTAL This Period (last page this line number only) ▶ 105709.41

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): Wells Fargo Bank N.A.
Mailing Address: PO Box 63020
City: San Francisco State: CA Zip Code: 94163
Purpose of Disbursement: AMEX charges - Apr 2013
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 04 / 30 / 2013
Transaction ID : 087048D5E74220E9C63
Amount of Each Disbursement this Period: 36.74

B.
Full Name (Last, First, Middle Initial): Wells Fargo Bank N.A.
Mailing Address: PO Box 63020
City: San Francisco State: CA Zip Code: 94163
Purpose of Disbursement: Bank charges - Apr 2013
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 04 / 30 / 2013
Transaction ID : E9975AA4CAFA8063789
Amount of Each Disbursement this Period: 177.19

C.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: / /
Amount of Each Disbursement this Period:

SUBTOTAL of Disbursements This Page (optional) ▶ 213.93

TOTAL This Period (last page this line number only) ▶ 213.93

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): Diane Black for Congress
Mailing Address: PO Box 1437
City: Gallatin State: TN Zip Code: 37066-1437
Purpose of Disbursement: 2014 Primary
Category/Type: 011
Candidate Name: Diane Black
Office Sought: ☒ House ☐ Senate ☐ President
State: TN District: 06
Disbursement For: 2014 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 04/17/2013
Transaction ID : 0DF7D6579872EE1AC0F
Amount of Each Disbursement this Period: 5000.00

B. Full Name (Last, First, Middle Initial): Friends of John Boehner
Mailing Address: 7908 Cincinatti Dayton Road Suite I
City: West Chester State: OH Zip Code: 45069-6628
Purpose of Disbursement: 2014 Primary
Category/Type: 011
Candidate Name: John A. Boehner
Office Sought: ☒ House ☐ Senate ☐ President
State: OH District: 08
Disbursement For: 2014 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 04/24/2013
Transaction ID : 7B47561C9DBEF36ECCE
Amount of Each Disbursement this Period: 5000.00

C. Full Name (Last, First, Middle Initial): Hoyer for Congress
Mailing Address: 700 13th Street, NW Suite 600
City: Washington State: DC Zip Code: 20005
Purpose of Disbursement: 2014 Primary
Category/Type: 011
Candidate Name: Steny H. Hoyer
Office Sought: ☒ House ☐ Senate ☐ President
State: MD District: 05
Disbursement For: 2014 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 04/24/2013
Transaction ID : D3FF59975B33C8FF901
Amount of Each Disbursement this Period: 5000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 15000.00

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): Kevin McCarthy for Congress
Mailing Address: PO Box 12667
City: Bakersfield State: CA Zip Code: 93389-2667
Purpose of Disbursement: 2014 Primary
Candidate Name: Kevin McCarthy
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: CA District: 23
Disbursement For: 2014 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 04 / 17 / 2013
Transaction ID : 0971BE366E0B25ABDA0
Amount of Each Disbursement this Period: 2500.00

B. Full Name (Last, First, Middle Initial): People for Ben
Mailing Address: PO Box 31129
City: Santa Fe State: NM Zip Code: 87594
Purpose of Disbursement: 2014 Primary
Candidate Name: Ben Ray Lujan
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: NM District: 03
Disbursement For: 2014 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 04 / 17 / 2013
Transaction ID : 65D2BCFF123D09050DC
Amount of Each Disbursement this Period: 1000.00

C. Full Name (Last, First, Middle Initial): Schock for Congress
Mailing Address: PO Box 10555
City: Peoria State: IL Zip Code: 61612
Purpose of Disbursement: 2014 Primary
Candidate Name: Aaron Schock
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: IL District: 18
Disbursement For: 2014 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 04 / 24 / 2013
Transaction ID : 05723AA75303908E329
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)
Texans for Henry Cuellar Congressional Campaign

Mailing Address 1519 Washington Street
Suite 200

City: Laredo State: TX Zip Code: 78040

Purpose of Disbursement: 2014 Primary

Category/Type: 011

Candidate Name: Henry Roberto Cuellar

Office Sought: ☒ House ☐ Senate ☐ President
State: TX District: 28

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

Date of Disbursement: 04 / 17 / 2013

Transaction ID : B94CE63DF875B4A720E

Amount of Each Disbursement this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
Truth Accountability and Courage Political Action Committee (TACPAC)

Mailing Address 228 S Washington St Ste 115

City: Alexandria State: VA Zip Code: 22314

Purpose of Disbursement: 2013 Contribution

Category/Type: 011

Candidate Name: Truth Accountability and Courage Political Action Committee (TACPAC)

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

Disbursement For: 2013
☐ Primary ☐ General
☒ Other (specify) Contribution

Date of Disbursement: 04 / 17 / 2013

Transaction ID : 72DB7CE74519500B979

Amount of Each Disbursement this Period: 5000.00

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/Type

Candidate Name

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

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

Date of Disbursement: M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ▶ 6000.00

TOTAL This Period (last page this line number only) ▶ 25500.00