FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

ADDRESS (number and street) ▼ 655 Beach Street

Check if different than previously reported. (ACC)

San Francisco | CA | 94109 -

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

CITY ▲ STATE ▲ ZIPCODE ▲

3. IS THIS REPORT — X 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)
- X January 31 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

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

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

Election on ____ in the State of ____

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

Election on ____ in the State of ____

5. Covering Period 12 01 2003 through 12 31 2003

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: Carol Beatty, Treasurer

Signature of Treasurer: Electronically Filed by Carol Beatty, Treasurer — Date 12 14 2004

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

Office Use Only							

FEC FORM 3X
(Rev. 02/2003)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

Report Covering the Period: From: 12 01 2003 To: 12 31 2003

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2003		315692.39
(b) Cash on Hand at Begining of Reporting Period	454405.17	
(c) Total Receipts (from Line 19)	63767.69	478127.87
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	518172.86	794020.26
7. Total Disbursements (from Line 31)	72003.19	347850.59
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	446169.67	446169.67
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

Write or Type Committee Name

American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

Report Covering the Period: From: 12 01 2003 To: 12 31 2003

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)	52712.50	
(ii) Unitemized	10995.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	63707.50	477294.87
(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) ▶	63707.50	477294.87
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	60.19	833.00
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 Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	63767.69	478127.87
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	63767.69	478127.87

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	1503.19	9650.59
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)) ▶	1503.19	9650.59
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	70500.00	334500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26. Loan Repayments Made	0.00	0.00
27. Loans Made	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	3700.00
(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	3700.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	72003.19	347850.59
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)	72003.19	347850.59

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)	63707.50	477294.87
34. Total Contribution Refunds (from Line 28(d))	0.00	3700.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	63707.50	473594.87
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	1503.19	9650.59
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1503.19	9650.59

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 62
(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)
Sterling Baker
Mailing Address 4215 N Classen Blvd
City: Oklahoma City State: OK Zip Code: 73118-2494
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 730.00
Date of Receipt: 12 11 2003
Transaction ID: 0106200452C44087
Amount of Each Receipt this Period: 365.00
Receipt

B.
Full Name (Last, First, Middle Initial)
Walter Beebe
Mailing Address Greenville Med Tower Ste 600
7150 Greenville Ave
City: Dallas State: TX Zip Code: 75231-
FEC 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: 12 11 2003
Transaction ID: 0106200452C44096
Amount of Each Receipt this Period: 500.00
Receipt

C.
Full Name (Last, First, Middle Initial)
Rulon Deam Beesley
Mailing Address #102
44404 16th St W
City: Lancaster State: CA Zip Code: 93534-2839
FEC 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: 12 04 2003
Transaction ID: D1062D0452C440D1
Amount of Each Receipt this Period: 250.00
Receipt

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

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

A.
Full Name (Last, First, Middle Initial)
Deloris Bell
Mailing Address 7000 W 121st Street Suite 100
City: Overland Park State: KS Zip Code: 66209-2010
FEC 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: 12 11 2003
Transaction ID: 0106200452C44079
Amount of Each Receipt this Period: 500.00
Receipt

B.
Full Name (Last, First, Middle Initial)
Daniel Bernstein
Mailing Address 451 Ruin Crk Rd Ste 204
City: Henderson State: NC Zip Code: 27536-
FEC 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: 12 04 2003
Transaction ID: 0106200452C44014
Amount of Each Receipt this Period: 365.00
Receipt

C.
Full Name (Last, First, Middle Initial)
John Bishop
Mailing Address 4707 Everhart #108
City: Corpus Christi State: TX Zip Code: 78411-
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 665.00

Date of Receipt: 12 11 2003
Transaction ID: D1062D0452C441D1
Amount of Each Receipt this Period: 300.00
Receipt

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

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

A.
Full Name (Last, First, Middle Initial): L Lohaire Bluth
Mailing Address: 181B East Southern Ave Ste 18
City: Mesa | State: AZ | Zip Code: 85204-
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 600.00
Date of Receipt: 12 16 2003
Transaction ID: 0106200452C44118
Amount of Each Receipt this Period: 500.00
Receipt

B.
Full Name (Last, First, Middle Initial): Evelyne Bouchard-Kindy
Mailing Address: 120 Buidick Expwy East
City: Minot | State: ND | Zip Code: 58701-
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 12 18 2003
Transaction ID: 0106200452C44147
Amount of Each Receipt this Period: 200.00
Receipt

C.
Full Name (Last, First, Middle Initial): Cynthia Brigin-Mavady
Mailing Address: 194 Grandview Ln
City: Norwich | State: NY | Zip Code: 13815-
FEC 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: 12 04 2003
Transaction ID: D1062D0452C439B5
Amount of Each Receipt this Period: 250.00
Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶ 950.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

A.
Full Name (Last, First, Middle Initial): Beth Bruening
Mailing Address: 405 W 45th St
City: Sioux City | State: IA | Zip Code: 51104-
FEC 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: 12 11 2003
Transaction ID: 0106200452C44102
Amount of Each Receipt this Period: 1000.00
Receipt

B.
Full Name (Last, First, Middle Initial): John Bullock
Mailing Address: 400 Westhampton Stn
City: Richmond | State: VA | Zip Code: 23226-3324
FEC 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: 12 11 2003
Transaction ID: 0106200452C44094
Amount of Each Receipt this Period: 500.00
Receipt

C.
Full Name (Last, First, Middle Initial): Henry Burnett
Mailing Address: 730 Highland Oaks Drive Ste 203
City: Winston-Salem | State: NC | Zip Code: 27103-
FEC 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: 12 04 2003
Transaction ID: D1062D0452C43952
Amount of Each Receipt this Period: 250.00
Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1750.00**

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): Louis Cantor
Mailing Address: 702 Rotary Circle
City: Indianapolis State: IN Zip Code: 46202-5175
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 465.00
Date of Receipt: 12 16 2003
Transaction ID: 0106200452C44122
Amount of Each Receipt this Period: 100.00
Receipt

B. Full Name (Last, First, Middle Initial): Charles Colombo
Mailing Address: 44199 Dequindre #409
City: Troy State: MI Zip Code: 48098-
FEC 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: 12 18 2003
Transaction ID: 0106200452C44139
Amount of Each Receipt this Period: 365.00
Receipt

C. Full Name (Last, First, Middle Initial): David Locke Cooke
Mailing Address: 4842 W Chapin Ln
City: Berrien Springs State: MI Zip Code: 49103-9631
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 12 16 2003
Transaction ID: D1062D0452C44115
Amount of Each Receipt this Period: 250.00
Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶ 715.00

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): Steven Robert Corwin
Mailing Address: Suite 34, 3565 Austell Rd
City: Marietta State: GA Zip Code: 30008-
FEC 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: 12 04 2003
Transaction ID: 0106200452C43985
Amount of Each Receipt this Period: 250.00
Receipt

B.
Full Name (Last, First, Middle Initial): E Randy Craven
Mailing Address: 28 W. Dry Creek Cir #225
City: Littleton State: CO Zip Code: 80120-
FEC 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: 12 11 2003
Transaction ID: 0106200452C44104
Amount of Each Receipt this Period: 365.00
Receipt

C.
Full Name (Last, First, Middle Initial): John Daglanis
Mailing Address: 5 Coliseum Avenue
City: Nashua State: NH Zip Code: 03063-
FEC 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: 12 04 2003
Transaction ID: D1062D0452C439B1
Amount of Each Receipt this Period: 250.00
Receipt

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

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)
Andrew Danyluk
Mailing Address 777 North St
City: Pittsfield State: MA Zip Code: 01201-1501
FEC 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: 12 18 2003
Transaction ID: 0106200452C44155
Amount of Each Receipt this Period: 500.00
Receipt

B.
Full Name (Last, First, Middle Initial)
Nazareth Darakjian
Mailing Address 2595 E Washington Blvd Ste 102
City: Pasadena State: CA Zip Code: 91107-
FEC 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: 12 18 2003
Transaction ID: 0106200452C44159
Amount of Each Receipt this Period: 250.00
Receipt

C.
Full Name (Last, First, Middle Initial)
Elliot Davidoff
Mailing Address 2170 Hayes Rd
City: Granville State: OH Zip Code: 43023-
FEC 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: 12 23 2003
Transaction ID: D1062D0452C44177
Amount of Each Receipt this Period: 365.00
Receipt

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

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 62
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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 Deitz
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: 250.00
Date of Receipt: 12 04 2003
Transaction ID: 0106200452C43962
Amount of Each Receipt this Period: 250.00
Receipt

B.
Full Name (Last, First, Middle Initial): William Deutsch
Mailing Address: Suite 918
1725 West Harrison Street
City: Chicago | State: IL | Zip Code: 60612-3864
FEC 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: 12 05 2003
Transaction ID: 0106200452C44043
Amount of Each Receipt this Period: 500.00
Receipt

C.
Full Name (Last, First, Middle Initial): Christopher Dickens
Mailing Address: 490 Post St Ste 608
City: San Francisco | State: CA | Zip Code: 94102-
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 350.00
Date of Receipt: 12 18 2003
Transaction ID: D1062D0452C44142
Amount of Each Receipt this Period: 350.00
Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1100.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 14 / 62

[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): Jean Alyse Disseler
Mailing Address: 1025 Maine Street
City: Quincy | State: IL | Zip Code: 62301-
FEC 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: 12 11 2003
Transaction ID: 0106200452C44096
Amount of Each Receipt this Period: 365.00
Receipt

B.
Full Name (Last, First, Middle Initial): Edwin Donnelly
Mailing Address: 3193 Howell Mill Rd Ste 115
City: Atlanta | State: GA | Zip Code: 30327-
FEC 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: 12 04 2003
Transaction ID: 0106200452C43971
Amount of Each Receipt this Period: 500.00
Receipt

C.
Full Name (Last, First, Middle Initial): John Dugan
Mailing Address: 1333 Third St, #100
City: Corpus Christi | State: TX | Zip Code: 78404-
FEC 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: 12 11 2003
Transaction ID: 0106200452C44086
Amount of Each Receipt this Period: 250.00
Receipt

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

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 15 / 62

[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): Dion Ehrlich
Mailing Address: Ste 103, 7500 Central Ave
City: Philadelphia State: PA Zip Code: 19111-
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 565.00
Date of Receipt: 12 19 2003
Transaction ID: 0106200452C44162
Amount of Each Receipt this Period: 200.00
Receipt

B. Full Name (Last, First, Middle Initial): Michael Elman
Mailing Address: Elman Retina Group, Attn: Elene Ai, 9101 Franklin Square Dr Ste 108
City: Baltimore State: MD Zip Code: 21237-
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 465.00
Date of Receipt: 12 04 2003
Transaction ID: 0106200452C43986
Amount of Each Receipt this Period: 365.00
Receipt

C. Full Name (Last, First, Middle Initial): David Keith Emmel
Mailing Address: 1260 Silas Deane Hwy
City: Wethersfield State: CT Zip Code: 06109-
FEC 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: 12 12 2003
Transaction ID: D1062D0452C44112
Amount of Each Receipt this Period: 250.00
Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶ 815.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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[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): Johannes Evans
Mailing Address: 1874 Hillgate Dr
City: Lexington State: KY Zip Code: 40515-
FEC 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: 12 04 2003
Transaction ID: 0106200452C44010
Amount of Each Receipt this Period: 500.00
Receipt

B.
Full Name (Last, First, Middle Initial): Madeleine Ewing
Mailing Address: Suite 100, 700 Spruce Steet
City: Philadelphia State: PA Zip Code: 19106-4015
FEC 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: 12 12 2003
Transaction ID: 0106200452C44106
Amount of Each Receipt this Period: 250.00
Receipt

C.
Full Name (Last, First, Middle Initial): Andrew Ferber
Mailing Address: 5015 South US Highway 41
City: Terre Haute State: IN Zip Code: 47802-
FEC 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: 12 11 2003
Transaction ID: D1062D0452C44077
Amount of Each Receipt this Period: 1000.00
Receipt

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) or 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): Robert Fechtner
Mailing Address: 25 Elsinore Drive
City: Watchung | State: NJ | Zip Code: 07069-
FEC 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: 12 18 2003
Transaction ID: 0106200452C44153
Amount of Each Receipt this Period: 365.00
Receipt

B.
Full Name (Last, First, Middle Initial): John Fitz
Mailing Address: Precision Eye Care, 140 Westmount Dr-PO Box 429
City: Farmington | State: MO | Zip Code: 63640-
FEC 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: 12 04 2003
Transaction ID: 0106200452C44005
Amount of Each Receipt this Period: 500.00
Receipt

C.
Full Name (Last, First, Middle Initial): John Flexel
Mailing Address: Bay Eye Clinic, 3585 Broadway
City: North Bend | State: OR | Zip Code: 97459-
FEC 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: 12 04 2003
Transaction ID: D1062D0452C44023
Amount of Each Receipt this Period: 250.00
Receipt

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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FOR LINE NUMBER: PAGE 18 / 62
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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): Lawrence Geisse
Mailing Address: P O Box 250
City: Los Alamitos | State: CA | Zip Code: 90720-
FEC 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: 12 04 2003
Transaction ID: 0106200452C43964
Amount of Each Receipt this Period: 500.00
Receipt

B.
Full Name (Last, First, Middle Initial): James Gessler
Mailing Address: 3231 S National
City: Springfield | State: MO | Zip Code: 65807-
FEC 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: 12 04 2003
Transaction ID: 0106200452C43973
Amount of Each Receipt this Period: 500.00
Receipt

C.
Full Name (Last, First, Middle Initial): Lawrence Goldberg
Mailing Address: 4957 38th Ave N Ste D
City: St Petersburg | State: FL | Zip Code: 33710-
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 730.00
Date of Receipt: 12 05 2003
Transaction ID: D1062D0452C44038
Amount of Each Receipt this Period: 365.00
Receipt

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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FOR LINE NUMBER: (check only one) PAGE 19 / 62

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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 Goodrich
Mailing Address: 821 S New Ballas Ste 585
City: St Louis | State: MO | Zip Code: 63141-
FEC 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: 12 04 2003
Transaction ID: 0106200452C43966
Amount of Each Receipt this Period: 365.00
Receipt

B.
Full Name (Last, First, Middle Initial): Michael Green
Mailing Address: 854 Lone Oak Dr
City: Gallatin | State: TN | Zip Code: 37066-3694
FEC 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: 12 18 2003
Transaction ID: 0106200452C44165
Amount of Each Receipt this Period: 500.00
Receipt

C.
Full Name (Last, First, Middle Initial): Irwin Greenspan
Mailing Address: 205-20 32nd Avenue
City: Bayside | State: NY | Zip Code: 11361-
FEC 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: 12 23 2003
Transaction ID: D1062D0452C441B0
Amount of Each Receipt this Period: 150.00
Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1015.00**

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

SCHEDULE A (FEC Form 3X)
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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): R Thomas Griffey
Mailing Address: 7323 Colony Point Rd
City: Norfolk | State: VA | Zip Code: 23505-3310
FEC 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: 12 04 2003
Transaction ID: 0106200452C44002
Amount of Each Receipt this Period: 365.00
Receipt

B.
Full Name (Last, First, Middle Initial): Varant Hagopian
Mailing Address: 300 Mount Auburn St Ste 414
City: Cambridge | State: MA | Zip Code: 02238-
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 730.00
Date of Receipt: 12 05 2003
Transaction ID: 0106200452C44039
Amount of Each Receipt this Period: 365.00
Receipt

C.
Full Name (Last, First, Middle Initial): John Haley
Mailing Address: Garland Ophthalmology Center
1626 Forest Ln Ste B
City: Garland | State: TX | Zip Code: 75042-7507
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 1250.00
Date of Receipt: 12 11 2003
Transaction ID: D1062D0452C44078
Amount of Each Receipt this Period: 250.00
Receipt

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

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A.
Full Name (Last, First, Middle Initial): Donald Hall
Mailing Address: 3303 Indiana Ave
City: Vicksburg | State: MS | Zip Code: 39180-4540
FEC 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: 12 09 2003
Transaction ID: 0106200452C44069
Amount of Each Receipt this Period: 300.00
Receipt

B.
Full Name (Last, First, Middle Initial): Jeffrey Herrington
Mailing Address: 1508 Brook Avenue
City: Wichita Falls | State: TX | Zip Code: 76301-
FEC 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: 12 09 2003
Transaction ID: 0106200452C44065
Amount of Each Receipt this Period: 500.00
Receipt

C.
Full Name (Last, First, Middle Initial): H King Hartman
Mailing Address: 516 Pellis Rd
City: Greensburg | State: PA | Zip Code: 15601-
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 465.00
Date of Receipt: 12 16 2003
Transaction ID: D1062D0452C44117
Amount of Each Receipt this Period: 100.00
Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶ 900.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 22 / 62
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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): S Hutson Hay
Mailing Address: 310 Clinton Avenue West
City: Huntsville State: AL Zip Code: 35801-
FEC 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: 12 16 2003
Transaction ID: 0106200452C44136
Amount of Each Receipt this Period: 500.00
Receipt

B.
Full Name (Last, First, Middle Initial): K Dwight Hendricks
Mailing Address: 8919 Parallel Pky Ste 226
City: Kansas City State: KS Zip Code: 66112-
FEC 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: 12 04 2003
Transaction ID: 0106200452C44018
Amount of Each Receipt this Period: 125.00
Receipt

C.
Full Name (Last, First, Middle Initial): Patrick Higgins
Mailing Address: 134 Rutgers Pl
City: Nutley State: NJ Zip Code: 07110-1833
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 385.00
Date of Receipt: 12 18 2003
Transaction ID: D1062D0452C44148
Amount of Each Receipt this Period: 91.25
Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶ 716.25

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): Mark Hughes
Mailing Address: Ste 800, 50 Staniford St
City: Boston State: MA Zip Code: 02114-2506
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 6250.00
Date of Receipt: 12 04 2003
Transaction ID: 0106200452C44024
Amount of Each Receipt this Period: 1250.00
Receipt

B.
Full Name (Last, First, Middle Initial): Kenneth Karlin
Mailing Address: 1800 Town Ctr Dr Ste 317
City: Reston State: VA Zip Code: 20190-
FEC 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: 12 11 2003
Transaction ID: 0106200452C44085
Amount of Each Receipt this Period: 250.00
Receipt

C.
Full Name (Last, First, Middle Initial): Kenneth Keto
Mailing Address: Eye Associates of Tallahassee, 2819 Capital Medical Boulevard
City: Tallahassee State: FL Zip Code: 32308-
FEC 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: 12 18 2003
Transaction ID: D1062D0452C44152
Amount of Each Receipt this Period: 365.00
Receipt

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

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 62
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[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): John Kennedy
Mailing Address: 1675 Providence Ave
City: Schenectady State: NY Zip Code: 12309-
FEC 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: 12 04 2003
Transaction ID: 0106200452C43954
Amount of Each Receipt this Period: 500.00
Receipt

B.
Full Name (Last, First, Middle Initial): Paul Keown
Mailing Address: 309 West 37th St.
City: Vancouver State: WA Zip Code: 98660-1945
FEC 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: 12 04 2003
Transaction ID: 0106200452C43962
Amount of Each Receipt this Period: 365.00
Receipt

C.
Full Name (Last, First, Middle Initial): Alan Knapp
Mailing Address: Suite 214, 900 East Pine Street
City: Englewood State: FL Zip Code: 34223-
FEC 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: 12 04 2003
Transaction ID: D1062D0452C44003
Amount of Each Receipt this Period: 250.00
Receipt

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

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

A.
Full Name (Last, First, Middle Initial): Marvin Kraucher
Mailing Address: 509 East Broad St
City: Westfield | State: NJ | Zip Code: 07090-
FEC 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: 12 12 2003
Transaction ID: 0106200452C44109
Amount of Each Receipt this Period: 500.00
Receipt

B.
Full Name (Last, First, Middle Initial): Paul Kuck
Mailing Address: Gundersen Lutheran Eye Institute, 1836 South Ave
City: La Crosse | State: WI | Zip Code: 54601-5429
FEC 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: 12 18 2003
Transaction ID: 0106200452C44154
Amount of Each Receipt this Period: 365.00
Receipt

C.
Full Name (Last, First, Middle Initial): Jeffrey Lander
Mailing Address: 309 Leader Hts Rd
City: York | State: PA | Zip Code: 17402-
FEC 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: 12 16 2003
Transaction ID: 0106200452C44120
Amount of Each Receipt this Period: 500.00
Receipt

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

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

A.
Full Name (Last, First, Middle Initial): Christopher Larson
Mailing Address: 1442 N 31st St
City: Sheboygan | State: WI | Zip Code: 53081-
FEC 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: 12 04 2003
Transaction ID: 0106200452C43975
Amount of Each Receipt this Period: 500.00
Receipt

B.
Full Name (Last, First, Middle Initial): Dean Larson
Mailing Address: 15 Carrotwood Ct
City: Fort Myers | State: FL | Zip Code: 33913-
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 865.00
Date of Receipt: 12 23 2003
Transaction ID: 0106200452C44178
Amount of Each Receipt this Period: 365.00
Receipt

C.
Full Name (Last, First, Middle Initial): Robert Lehmann
Mailing Address: 5300 N St
City: Nacogdoches | State: TX | Zip Code: 75961-
FEC 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: 12 04 2003
Transaction ID: D1062D0452C44029
Amount of Each Receipt this Period: 2500.00
Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶ 3365.00

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

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ITEMIZED RECEIPTS

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

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

A.
Full Name (Last, First, Middle Initial): Robert Lehner
Mailing Address: PO Box 1677
City: Racine State: WI Zip Code: 53401-1677
FEC 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: 12 05 2003
Transaction ID: 0106200452C44040
Amount of Each Receipt this Period: 1000.00
Receipt

B.
Full Name (Last, First, Middle Initial): Kathy Lentz
Mailing Address: Washington Eye Surgeons, 851 E 5th St Ste 116
City: Washington State: MO Zip Code: 63090-3128
FEC 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: 12 08 2003
Transaction ID: 0106200452C44060
Amount of Each Receipt this Period: 365.00
Receipt

C.
Full Name (Last, First, Middle Initial): Kim Lindenmuth
Mailing Address: 45 South Park Boulevard Ste 375
City: Glen Ellyn State: IL Zip Code: 60137-
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 12 04 2003
Transaction ID: D1062D0452C439B3
Amount of Each Receipt this Period: 200.00
Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶ 1565.00

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 Lowery
Mailing Address: Lowery Eye Clinic, 105 Central Ave
City: Searcy State: AR Zip Code: 72143-
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 865.00
Date of Receipt: 12 04 2003
Transaction ID: 0106200452C43957
Amount of Each Receipt this Period: 500.00
Receipt

B.
Full Name (Last, First, Middle Initial): Ronald Lowery
Mailing Address: #10 Hospital Cir
City: Batesville State: AR Zip Code: 72501-
FEC 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: 12 04 2003
Transaction ID: 0106200452C43959
Amount of Each Receipt this Period: 500.00
Receipt

C.
Full Name (Last, First, Middle Initial): Nick Mamalis
Mailing Address: Moran Eye Center, 50 North Medical Dr
City: Salt Lake City State: UT Zip Code: 84132-
FEC 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: 12 18 2003
Transaction ID: D1062D0452C44144
Amount of Each Receipt this Period: 250.00
Receipt

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

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

A.
Full Name (Last, First, Middle Initial): Delia Manjoney
Mailing Address: 272D Main St
City: Bridgeport State: CT Zip Code: 06606-
FEC 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: 12 12 2003
Transaction ID: 0106200452C44108
Amount of Each Receipt this Period: 500.00
Receipt

B.
Full Name (Last, First, Middle Initial): Jack Mason
Mailing Address: 555 South Dora Street
City: Ukiah State: CA Zip Code: 95482-
FEC 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: 12 04 2003
Transaction ID: 0106200452C43969
Amount of Each Receipt this Period: 500.00
Receipt

C.
Full Name (Last, First, Middle Initial): Raj Mehta
Mailing Address: Midwest Eye Inst
2D1 Pennsylvania Pkwy
City: Indianapolis State: IN Zip Code: 46280-
FEC 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: 12 04 2003
Transaction ID: D1062D0452C43965
Amount of Each Receipt this Period: 500.00
Receipt

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

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

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ITEMIZED RECEIPTS

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

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

A.
Full Name (Last, First, Middle Initial): Peter McCanna
Mailing Address: 1025 Regent Street
City: Madison State: WI Zip Code: 53715-
FEC 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: 12 11 2003
Transaction ID: 0106200452C44080
Amount of Each Receipt this Period: 300.00
Receipt

B.
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: 365.00
Date of Receipt: 12 16 2003
Transaction ID: 0106200452C44116
Amount of Each Receipt this Period: 365.00
Receipt

C.
Full Name (Last, First, Middle Initial): Timothy McInnis
Mailing Address: Medical Eye Specialists PC
300 N Willson Ave Ste 1003
City: Bozeman State: MT Zip Code: 59715-
FEC 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: 12 04 2003
Transaction ID: D1062D0452C44012
Amount of Each Receipt this Period: 500.00
Receipt

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

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)
Gary Mehlhorn
Mailing Address 3800 S National Ste 500
City: Springfield State: MO Zip Code: 65807-5273
FEC 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: 12 16 2003
Transaction ID: 0106200452C44129
Amount of Each Receipt this Period: 365.00
Receipt

B. Full Name (Last, First, Middle Initial)
Douglas Merritt
Mailing Address 1226 NE Seventh St
City: Grants Pass State: OR Zip Code: 97526-
FEC 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: 12 05 2003
Transaction ID: 0106200452C44032
Amount of Each Receipt this Period: 365.00
Receipt

C. Full Name (Last, First, Middle Initial)
Mark Michaels
Mailing Address 3399 PGA Blvd Ste 220
City: Palm Beach Gardens State: FL Zip Code: 33410-
FEC 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: 12 04 2003
Transaction ID: 0106200452C43970
Amount of Each Receipt this Period: 1000.00
Receipt

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): James Mims
Mailing Address: Ste 511, 311 Camden St
City: San Antonio State: TX Zip Code: 78215-2015
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 730.00
Date of Receipt: 12 09 2003
Transaction ID: 0106200452C44063
Amount of Each Receipt this Period: 365.00
Receipt

B.
Full Name (Last, First, Middle Initial): Thomas Moore
Mailing Address: Lansing Ophth, 2001 Coolidge Rd
City: East Lansing State: MI Zip Code: 48823-
FEC 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: 12 04 2003
Transaction ID: 0106200452C43996
Amount of Each Receipt this Period: 500.00
Receipt

C.
Full Name (Last, First, Middle Initial): Sanford Moratsky
Mailing Address: 7461 E Northern Ave
City: Scottsdale State: AZ Zip Code: 85258-
FEC 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: 12 22 2003
Transaction ID: D1062D0452C44169
Amount of Each Receipt this Period: 250.00
Receipt

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

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): Craig Morgan
Mailing Address: Eye Consultants of Huntington, 1611 13th Ave
City: Huntington State: WV Zip Code: 25701-
FEC 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: 12 04 2003
Transaction ID: 0106200452C43976
Amount of Each Receipt this Period: 1000.00
Receipt

B.
Full Name (Last, First, Middle Initial): Louis Nichamin
Mailing Address: 103 Jefferson St
City: Brookville State: PA Zip Code: 15825-
FEC 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: 12 18 2003
Transaction ID: 0106200452C44157
Amount of Each Receipt this Period: 500.00
Receipt

C.
Full Name (Last, First, Middle Initial): Barbara Ann Nugent
Mailing Address: 3125 Matlock Rd Ste 105
City: Arlington State: TX Zip Code: 76015-2505
FEC 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: 12 04 2003
Transaction ID: 0106200452C43972
Amount of Each Receipt this Period: 365.00
Receipt

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)
Kelly Patrick ONeill

Mailing Address 7593 Tylers Place Boulevard #107

City: West Chester | State: OH | Zip Code: 45069-

FEC 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: 12 16 2003

Transaction ID: 0106200452C44114

Amount of Each Receipt this Period: 500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Jeffrey Curtis Oehler

Mailing Address 2250 North Bank Dr

City: Columbus | State: OH | Zip Code: 43220-5420

FEC 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: 12 04 2003

Transaction ID: 0106200452C44000

Amount of Each Receipt this Period: 365.00

Receipt

C. Full Name (Last, First, Middle Initial)
Paul Donald Pare

Mailing Address 304 SE Hospital Ave

City: Stuart | State: FL | Zip Code: 34994-

FEC ID number of contributing federal political committee: C

Name of Employer: self | Occupation: Ophthalmologist

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date: 865.00

Date of Receipt: 12 04 2003

Transaction ID: 0106200452C44004

Amount of Each Receipt this Period: 365.00

Receipt

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

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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 Pascucci
Mailing Address: 200 Mifflin Avenue
City: Scranton | State: PA | Zip Code: 18503-
FEC 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: 12 04 2003
Transaction ID: 0106200452C44019
Amount of Each Receipt this Period: 125.00
Receipt

B.
Full Name (Last, First, Middle Initial): Robert Penner
Mailing Address: 681 Third Ave
City: Chula Vista | State: CA | Zip Code: 91910-
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 100.00
Date of Receipt: 12 04 2003
Transaction ID: 0106200452C43989
Amount of Each Receipt this Period: 100.00
Receipt

C.
Full Name (Last, First, Middle Initial): Robert Penner
Mailing Address: 681 Third Ave
City: Chula Vista | State: CA | Zip Code: 91910-
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 465.00
Date of Receipt: 12 11 2003
Transaction ID: D1062D0452C44103
Amount of Each Receipt this Period: 365.00
Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶ 590.00

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)
Walter Petersen
Mailing Address 801 Broadway Ste 623
City: Seattle State: WA Zip Code: 98122-
FEC 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: 12 16 2003
Transaction ID: 0106200452C44134
Amount of Each Receipt this Period: 500.00
Receipt

B.
Full Name (Last, First, Middle Initial)
Dante Pieramici
Mailing Address CA Retina Consultants
515 E Micheltorena Ste C
City: Santa Barbara State: CA Zip Code: 93103-
FEC 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: 12 04 2003
Transaction ID: 0106200452C43968
Amount of Each Receipt this Period: 100.00
Receipt

C.
Full Name (Last, First, Middle Initial)
Jon Portis
Mailing Address 1380 Lusitana St
Ste 714
City: Honolulu State: HI Zip Code: 96813-
FEC 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: 12 04 2003
Transaction ID: 0106200452C43988
Amount of Each Receipt this Period: 500.00
Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶ 1100.00

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): C Kent Price
Mailing Address: Price Eye Clinic, PA, 264 Memorial Dr
City: Jacksonville | State: NC | Zip Code: 28546-
FEC 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: 12 04 2003
Transaction ID: 0106200452C44020
Amount of Each Receipt this Period: 91.25
Receipt

B.
Full Name (Last, First, Middle Initial): Vadrevu Raju
Mailing Address: 314D Collins Ferry Rd
City: Morgantown | State: WV | Zip Code: 26505-3352
FEC ID number of contributing federal political committee: C
Name of Employer: self | Occupation: Ophthalmologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 865.00
Date of Receipt: 12 08 2003
Transaction ID: 0106200452C44071
Amount of Each Receipt this Period: 365.00
Receipt

C.
Full Name (Last, First, Middle Initial): H William Renelle
Mailing Address: Fort Worth Eye Assoc, 5000 Collinwood Ave
City: Fort Worth | State: TX | Zip Code: 76107-3608
FEC 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: 12 05 2003
Transaction ID: D1062D0452C44033
Amount of Each Receipt this Period: 500.00
Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶ 958.25

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): H Miller Richert
Mailing Address: 1750 Pine St
City: Abilene State: TX Zip Code: 79601-3044
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 16 2003
Transaction ID: 0106200452C44125
Amount of Each Receipt this Period: 300.00
Receipt

B.
Full Name (Last, First, Middle Initial): Kenneth Rosenthal
Mailing Address: Ste 102, 310 East Shore Rd
City: Great Neck State: NY Zip Code: 11023-
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 375.00
Date of Receipt: 12 04 2003
Transaction ID: 0106200452C44021
Amount of Each Receipt this Period: 125.00
Receipt

C.
Full Name (Last, First, Middle Initial): David Rothberg
Mailing Address: 3820 Tampa Rd, Ste 101
City: Palm Harbor State: FL Zip Code: 34684-3809
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 865.00
Date of Receipt: 12 23 2003
Transaction ID: 0106200452C44173
Amount of Each Receipt this Period: 500.00
Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶ 925.00

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): Gary Rubin
Mailing Address: 7001 W Archer Ave
City: Chicago | State: IL | Zip Code: 60638-2201
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 730.00
Date of Receipt: 12 18 2003
Transaction ID: 0106200452C44158
Amount of Each Receipt this Period: 365.00
Receipt

B.
Full Name (Last, First, Middle Initial): Chander Sarny
Mailing Address: 3040 SW 53rd St
City: Ocala | State: FL | Zip Code: 34474-5802
FEC 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: 12 04 2003
Transaction ID: 0106200452C44016
Amount of Each Receipt this Period: 500.00
Receipt

C.
Full Name (Last, First, Middle Initial): Daile Sang
Mailing Address: 73 Chatham St
City: Brookline | State: MA | Zip Code: 02446-
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 6250.00
Date of Receipt: 12 04 2003
Transaction ID: 0106200452C44025
Amount of Each Receipt this Period: 1250.00
Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶ 2115.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 40 / 62

[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)
Sharad Saraf

Mailing Address Rt 94 S & Bunn Rd
PO Box 458

City: Hamburg | State: NJ | Zip Code: 07419-0458

FEC 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: 12 04 2003

Transaction ID: 0106200452C44028

Amount of Each Receipt this Period: 1000.00

Receipt

B. Full Name (Last, First, Middle Initial)
Timothy Schneider

Mailing Address Ste 100
8761 Perimeter Park Blvd

City: Jacksonville | State: FL | Zip Code: 32216-6397

FEC 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: 12 16 2003

Transaction ID: 0106200452C44135

Amount of Each Receipt this Period: 365.00

Receipt

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

Mailing Address 360 Saint Charles Way

City: York | State: PA | Zip Code: 17402-

FEC ID number of contributing federal political committee: C

Name of Employer: self | Occupation: Ophthalmologist

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date: 1125.00

Date of Receipt: 12 04 2003

Transaction ID: D1062D0452C43979

Amount of Each Receipt this Period: 375.00

Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1740.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 41 / 62
(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): Glenn Shear
Mailing Address: 33 SW Upper Riverdale Rd Ste 114
City: Riverdale | State: GA | Zip Code: 30274-
FEC 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: 12 11 2003
Transaction ID: 0106200452C44090
Amount of Each Receipt this Period: 500.00
Receipt

B.
Full Name (Last, First, Middle Initial): Edward Shubert
Mailing Address: 17115 Red Oak Dr Ste 121
City: Houston | State: TX | Zip Code: 77090-
FEC 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: 12 11 2003
Transaction ID: 0106200452C44095
Amount of Each Receipt this Period: 300.00
Receipt

C.
Full Name (Last, First, Middle Initial): James Sikora
Mailing Address: 20 Trinity Ct
City: Granville | State: OH | Zip Code: 43023-
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 730.00
Date of Receipt: 12 23 2003
Transaction ID: D1062D0452C44176
Amount of Each Receipt this Period: 365.00
Receipt

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

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 62
(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)
N Niki Silverstein
Mailing Address 198 North Rd
City: Chester State: NJ Zip Code: 07930-
FEC 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: 12 18 2003
Transaction ID: 0106200452C44141
Amount of Each Receipt this Period: 500.00
Receipt

B.
Full Name (Last, First, Middle Initial)
Rodger Silverstein
Mailing Address 198 North Rd
City: Chester State: NJ Zip Code: 07930-2323
FEC 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: 12 18 2003
Transaction ID: 0106200452C44140
Amount of Each Receipt this Period: 500.00
Receipt

C.
Full Name (Last, First, Middle Initial)
Samuel Solish
Mailing Address Eyecare Med Group, 53 Sewall St
City: Portland State: ME Zip Code: 04102-2625
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 730.00
Date of Receipt: 12 04 2003
Transaction ID: D1062D0452C44031
Amount of Each Receipt this Period: 365.00
Receipt

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

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 43 / 62

[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): Mitchell Brian Stein
Mailing Address: 89 S Moger Ave
City: Mount Kisco | State: NY | Zip Code: 10549-2217
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 865.00
Date of Receipt: 12 23 2003
Transaction ID: 0106200452C44174
Amount of Each Receipt this Period: 365.00
Receipt

B.
Full Name (Last, First, Middle Initial): Gwen Sterns
Mailing Address: 1425 Portland Ave
City: Rochester | State: NY | Zip Code: 14621-
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 515.00
Date of Receipt: 12 22 2003
Transaction ID: 0106200452C44168
Amount of Each Receipt this Period: 150.00
Receipt

C.
Full Name (Last, First, Middle Initial): Jonathan Stock
Mailing Address: Baraboo Regional Eye Associates 703 14th St
City: Baraboo | State: WI | Zip Code: 53913-
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 800.00
Date of Receipt: 12 09 2003
Transaction ID: D1062D0452C44068
Amount of Each Receipt this Period: 250.00
Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶ 765.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 44 / 62

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

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

A.
Full Name (Last, First, Middle Initial): Paul Tornambe
Mailing Address: #104, 12630 Monte Vista Road
City: Poway | State: CA | Zip Code: 92064-
FEC 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: 12 11 2003
Transaction ID: 0106200452C44097
Amount of Each Receipt this Period: 250.00
Receipt

B.
Full Name (Last, First, Middle Initial): Gregory Trubowitsch
Mailing Address: 741 Los Miradores Dr
City: El Paso | State: TX | Zip Code: 79912-
FEC ID number of contributing federal political committee: C
Name of Employer: self | Occupation: Ophthalmologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1375.00
Date of Receipt: 12 18 2003
Transaction ID: 0106200452C44161
Amount of Each Receipt this Period: 500.00
Receipt

C.
Full Name (Last, First, Middle Initial): David Ugland
Mailing Address: 135 S Sharon Amity Rd 100
City: Charlotte | State: NC | Zip Code: 28211-
FEC 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: 12 04 2003
Transaction ID: D1062D0452C43951
Amount of Each Receipt this Period: 300.00
Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1050.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 45 / 62
(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): Prem Virdi
Mailing Address: 2202 18th Ave
City: Rock Island | State: IL | Zip Code: 61201-
FEC 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: 12 09 2003
Transaction ID: 0106200452C44066
Amount of Each Receipt this Period: 250.00
Receipt

B.
Full Name (Last, First, Middle Initial): Martin Wand
Mailing Address: Ste 622, 85 Seymour St
City: Hartford | State: CT | Zip Code: 06106-
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 600.00
Date of Receipt: 12 11 2003
Transaction ID: 0106200452C44089
Amount of Each Receipt this Period: 500.00
Receipt

C.
Full Name (Last, First, Middle Initial): Bruce Weinberger
Mailing Address: 700 Quail Creek Drive
City: Amarillo | State: TX | Zip Code: 79124-
FEC 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: 12 11 2003
Transaction ID: 0106200452C44082
Amount of Each Receipt this Period: 300.00
Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶ 1050.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 46 / 62
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

A.
Full Name (Last, First, Middle Initial): Gary Weiner
Mailing Address: 18 Crestview Dr
City: Salina | State: KS | Zip Code: 67401-3586
FEC 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: 12 09 2003
Transaction ID: 0106200452C44070
Amount of Each Receipt this Period: 500.00
Receipt

B.
Full Name (Last, First, Middle Initial): Tey Weinman
Mailing Address: 571 W 7th St
City: San Pedro | State: CA | Zip Code: 90731-3115
FEC 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: 12 11 2003
Transaction ID: 0106200452C44091
Amount of Each Receipt this Period: 100.00
Receipt

C.
Full Name (Last, First, Middle Initial): Charles Weisley
Mailing Address: Ste 101
18051 River Ave
City: Noblesville | State: IN | Zip Code: 46060-6329
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 730.00
Date of Receipt: 12 05 2003
Transaction ID: D1062D0452C44042
Amount of Each Receipt this Period: 365.00
Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶ 965.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 / 62
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

A.
Full Name (Last, First, Middle Initial): Maynard Wheeler
Mailing Address: PO Box 538, 10 Sandy Brae
City: Grantham | State: NH | Zip Code: 03753-0538
FEC ID number of contributing federal political committee: C
Name of Employer: self | Occupation: Ophthalmologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 12 09 2003
Transaction ID: 0106200452C44067
Amount of Each Receipt this Period: 250.00
Receipt

B.
Full Name (Last, First, Middle Initial): Scott Zeigen
Mailing Address: Suite 202-B, 130 Almshouse
City: Richboro | State: PA | Zip Code: 18954-
FEC ID number of contributing federal political committee: C
Name of Employer: self | Occupation: Ophthalmologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 865.00
Date of Receipt: 12 16 2003
Transaction ID: 0106200452C44121
Amount of Each Receipt this Period: 500.00
Receipt

C.
Full Name (Last, First, Middle Initial): Ares Zlotka
Mailing Address: Assoc Ophthal, 219 N Hammes
City: Joliet | State: IL | Zip Code: 60435-
FEC 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: 12 11 2003
Transaction ID: 0106200452C44100
Amount of Each Receipt this Period: 500.00
Receipt

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

TOTAL This Period (last page this line number only) ..... ▶ **52712.50**

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 / 62
(check only one)
☐ 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)
Union Bank

Mailing Address PO Box 24512

City: San Francisco
State: CA
Zip Code: 94124-0512

FEC ID number of contributing federal political committee: C

Name of Employer

Occupation

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
810.85

Date of Receipt
12 31 2003

Transaction ID: 01142004490C44248

Amount of Each Receipt this Period
60.19

Other Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶	60.19
TOTAL This Period (last page this line number only) ..... ▶	60.19

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)
Union Bank

Mailing Address PO Box 24512

City: San Francisco
State: CA
Zip Code: 94124-0512

Purpose of Disbursement
UB CKING ACCT EXP 12/03

Candidate Name

Category/Type

Office Sought: House / Senate / President
State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: D1142D0450E3579
Date of Disbursement: 12 / 31 / 2003

Amount of Each Disbursement this Period: 1503.19

UB CKING ACCT EXP 12/03

SUBTOTAL of Disbursements This Page (optional) ▶	1503.19
TOTAL This Period (last page this line number only) ▶	1503.19

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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

A.
Full Name (Last, First, Middle Initial): Berkley For Congress
Mailing Address: 9069 Conquista Ct
City: Las Vegas State: NV Zip Code: 89121-3866
Purpose of Disbursement: HOUSE NV-1 PRIMARY
Candidate Name
Category/Type
Office Sought: House / Senate / President / State: District
Disbursement For: 2004 X Primary General Other (specify)
Transaction ID: 12092D0355E3561
Date of Disbursement: 12/03/2003
Amount of Each Disbursement this Period: 2000.00
HOUSE NV-1 PRIMARY

B.
Full Name (Last, First, Middle Initial): Brown-Waite For Congress
Mailing Address: 704 Ponce De Leon Blvd Brooksville
City: Brooksville State: FL Zip Code: 34601-
Purpose of Disbursement: HOUSE FL-5 PRIMARY
Candidate Name
Category/Type
Office Sought: House / Senate / President / State: District
Disbursement For: 2004 X Primary General Other (specify)
Transaction ID: 12092D0355E3543
Date of Disbursement: 12/03/2003
Amount of Each Disbursement this Period: 2000.00
HOUSE FL-5 PRIMARY

C.
Full Name (Last, First, Middle Initial): Michael Burgess For Congress
Mailing Address: PO Box 2334
City: Denton State: TX Zip Code: 76202-
Purpose of Disbursement: HOUSE TX-26
Candidate Name
Category/Type
Office Sought: House / Senate / President / State: District
Disbursement For: 2004 Primary X General Other (specify)
Transaction ID: 0114200450E3578
Date of Disbursement: 12/03/2003
Amount of Each Disbursement this Period: 2000.00
HOUSE TX-26

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 6000.00

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): Michael Burgess For Congress
Mailing Address: PO Box 2334
City: Denton State: TX Zip Code: 76202-
Purpose of Disbursement: HOUSE TX-26 PRIMARY
Candidate Name:
Office Sought: House / Senate / President / State: District
Disbursement For: 2004 X Primary General Other (specify)
Transaction ID: 1209200355E3554
Date of Disbursement: 12 / 03 / 2003
Amount of Each Disbursement this Period: 1500.00
Category/Type: HOUSE TX-26 PRIMARY

B.
Full Name (Last, First, Middle Initial): Cardoza For Congress
Mailing Address: 555 Capitol Mall, Suite 1425
City: Sacramento State: CA Zip Code: 05814-
Purpose of Disbursement: HOUSE CA-18 PRIMARY
Candidate Name:
Office Sought: House / Senate / President / State: District
Disbursement For: 2004 X Primary General Other (specify)
Transaction ID: 1209200355E3557
Date of Disbursement: 12 / 03 / 2003
Amount of Each Disbursement this Period: 1000.00
Category/Type: HOUSE CA-18 PRIMARY

C.
Full Name (Last, First, Middle Initial): Charles A Gonzalez Congressional Campa
Mailing Address: PO Box 12612
City: San Antonio State: TX Zip Code: 78212-0612
Purpose of Disbursement: HOUSE TX-20 PRIMARY
Candidate Name:
Office Sought: House / Senate / President / State: District
Disbursement For: 2004 X Primary General Other (specify)
Transaction ID: 1209200355E3565
Date of Disbursement: 12 / 03 / 2003
Amount of Each Disbursement this Period: 1000.00
Category/Type: HOUSE TX-20 PRIMARY

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 3500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

21b	22	X 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): Christopher Shays For Congress Committ
Mailing Address: 98 East Avenue Rear Building
City: Norwalk State: CT Zip Code: 06851-
Purpose of Disbursement: HOUSE CT-4 PRIMARY
Candidate Name:
Office Sought: House / Senate / President / State: District
Disbursement For: 2004 X Primary General / Other (specify)
Transaction ID: 1209200355E3542
Date of Disbursement: 12 / 03 / 2003
Amount of Each Disbursement this Period: 1000.00
Category/Type: HOUSE CT-4 PRIMARY

B.
Full Name (Last, First, Middle Initial): Ciro D Rodriguez For Congress
Mailing Address: PO Box 14528
City: San Antonio State: TX Zip Code: 78214-0528
Purpose of Disbursement: HOUSE TX-28 PRIMARY
Candidate Name:
Office Sought: House / Senate / President / State: District
Disbursement For: 2004 X Primary General / Other (specify)
Transaction ID: 1209200355E3567
Date of Disbursement: 12 / 03 / 2003
Amount of Each Disbursement this Period: 1000.00
Category/Type: HOUSE TX-28 PRIMARY

C.
Full Name (Last, First, Middle Initial): Congressman Joe Barton Committee
Mailing Address: PO Box 1444
City: Ennis State: TX Zip Code: 75120-1444
Purpose of Disbursement: HOUSE TX-6 PRIMARY
Candidate Name:
Office Sought: House / Senate / President / State: District
Disbursement For: 2004 X Primary General / Other (specify)
Transaction ID: 1209200355E3571
Date of Disbursement: 12 / 02 / 2003
Amount of Each Disbursement this Period: 1000.00
Category/Type: HOUSE TX-6 PRIMARY

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

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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

A.
Full Name (Last, First, Middle Initial): Charlie Dent for Congress
Mailing Address: PO Box 442
City: Allentown State: PA Zip Code: 18101-
Purpose of Disbursement: HOUSE PA-15 PRIMARY
Candidate Name:
Office Sought: House / Senate / President / State: District
Disbursement For: 2004 X Primary General / Other (specify)
Transaction ID: 1209200355E3553
Date of Disbursement: 12 / 03 / 2003
Amount of Each Disbursement this Period: 2500.00
Category/Type: HOUSE PA-15 PRIMARY

B.
Full Name (Last, First, Middle Initial): Feinstein For Senate
Mailing Address: 601 S. Glencoaks Blvd. Suite 208
City: Burbank State: CA Zip Code: 01502-
Purpose of Disbursement: SENATE-CA
Candidate Name:
Office Sought: House / Senate / President / State: District
Disbursement For: 2004 X Primary General / Other (specify)
Transaction ID: 1209200355E3535
Date of Disbursement: 12 / 03 / 2003
Amount of Each Disbursement this Period: 1000.00
Category/Type: SENATE-CA

C.
Full Name (Last, First, Middle Initial): Friends of Sherrod Brown
Mailing Address: 607 14th St NW Suite 800
City: Washington State: DC Zip Code: 20005-2000
Purpose of Disbursement: HOUSE OH-13 PRIMARY
Candidate Name:
Office Sought: House / Senate / President / State: District
Disbursement For: 2004 X Primary General / Other (specify)
Transaction ID: 1209200355E3563
Date of Disbursement: 12 / 03 / 2003
Amount of Each Disbursement this Period: 5000.00
Category/Type: HOUSE OH-13 PRIMARY

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 8500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

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☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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

A.
Full Name (Last, First, Middle Initial): Friends of Byron Dorgan
Mailing Address: PO Box 871
City: Bismarck | State: ND | Zip Code: 58502-
Purpose of Disbursement: SENATE-ND
Candidate Name:
Category/Type: SENATE-ND
Office Sought: House / Senate / President / State: District
Disbursement For: 2004 X Primary / General / Other (specify)
Transaction ID: 1209200355E3538
Date of Disbursement: 12 / 03 / 2003
Amount of Each Disbursement this Period: 1000.00

B.
Full Name (Last, First, Middle Initial): Friends of Cliff Stearns
Mailing Address: PO Box 308
City: Silver Springs | State: FL | Zip Code: 34489-0308
Purpose of Disbursement: HOUSE FL-6 PRIMARY
Candidate Name:
Category/Type: HOUSE FL-6 PRIMARY
Office Sought: House / Senate / President / State: District
Disbursement For: 2004 X Primary / General / Other (specify)
Transaction ID: 1209200355E3544
Date of Disbursement: 12 / 03 / 2003
Amount of Each Disbursement this Period: 2000.00

C.
Full Name (Last, First, Middle Initial): Gingrey For Congress
Mailing Address: PO Box U
City: Marietta | State: GA | Zip Code: 30060-
Purpose of Disbursement: HOUSE GA-11 GENERAL
Candidate Name:
Category/Type: HOUSE GA-11 GENERAL
Office Sought: House / Senate / President / State: District
Disbursement For: 2004 Primary / X General / Other (specify)
Transaction ID: 1209200355E3569
Date of Disbursement: 12 / 03 / 2003
Amount of Each Disbursement this Period: 5000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 8000.00

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

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

A.
Full Name (Last, First, Middle Initial): Glacier Pac
Mailing Address: 818 Connecticut Ave NW, Suite 1100
City: Washington State: DC Zip Code: 20006-2701
Purpose of Disbursement: LEADERSHIP PAC
Candidate Name:
Office Sought: House / Senate / President / State: District
Disbursement For: 2004 X Primary / General / Other (specify)
Transaction ID: 1209200355E3570
Date of Disbursement: 12 03 2003
Amount of Each Disbursement this Period: 2500.00
Category/Type: LEADERSHIP PAC

B.
Full Name (Last, First, Middle Initial): Gutierrez For Congress
Mailing Address: c/o Raul Vega, 2750 North Ashland Ave
City: Chicago State: IL Zip Code: 60614-1106
Purpose of Disbursement: HOUSE IL-4 PRIMARY
Candidate Name:
Office Sought: House / Senate / President / State: District
Disbursement For: 2004 X Primary / General / Other (specify)
Transaction ID: 1209200355E3559
Date of Disbursement: 12 03 2003
Amount of Each Disbursement this Period: 1000.00
Category/Type: HOUSE IL-4 PRIMARY

C.
Full Name (Last, First, Middle Initial): Hooley For Congress
Mailing Address: PO Box 2050
City: Salem State: OR Zip Code: 97308-
Purpose of Disbursement: HOUSE OR-5 PRIMARY
Candidate Name:
Office Sought: House / Senate / President / State: District
Disbursement For: 2004 X Primary / General / Other (specify)
Transaction ID: 1209200355E3564
Date of Disbursement: 12 03 2003
Amount of Each Disbursement this Period: 2000.00
Category/Type: HOUSE OR-5 PRIMARY

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

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

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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 John for Congress
Mailing Address: PO Box 307
City: Crowley | State: LA | Zip Code: 70527-0307
Purpose of Disbursement: HOUSE LA-7 PRIMARY
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District
Disbursement For: 2004 — X Primary / General / Other (specify)

Transaction ID: 1209200355E3560
Date of Disbursement: 12 03 2003
Amount of Each Disbursement this Period: 2500.00
HOUSE LA-7 PRIMARY

B.
Full Name (Last, First, Middle Initial): John Sullivan For Congress
Mailing Address: 6130 S Maplewood Suite B
City: Tulsa | State: OK | Zip Code: 74136-
Purpose of Disbursement: HOUSE OK-1 PRIMARY
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District
Disbursement For: 2004 — X Primary / General / Other (specify)

Transaction ID: 1209200355E3551
Date of Disbursement: 12 03 2003
Amount of Each Disbursement this Period: 3000.00
HOUSE OK-1 PRIMARY

C.
Full Name (Last, First, Middle Initial): Judd Gregg Committee
Mailing Address: PO Box 1812
City: Concord | State: NH | Zip Code: 03302-1812
Purpose of Disbursement: SENATE-NH
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District
Disbursement For: 2004 — X Primary / General / Other (specify)

Transaction ID: 1209200355E3537
Date of Disbursement: 12 03 2003
Amount of Each Disbursement this Period: 1000.00
SENATE-NH

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

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

A.
Full Name (Last, First, Middle Initial): Keller For Congress
Mailing Address: PO Box 1453
City: Orlando State: FL Zip Code: 32802-1453
Purpose of Disbursement: HOUSE FL-8 PRIMARY
Candidate Name:
Office Sought: House / Senate / President / District / State:
Disbursement For: 2004 X Primary / General / Other (specify)
Transaction ID: 1209200355E3545
Date of Disbursement: 12 / 03 / 2003
Amount of Each Disbursement this Period: 1000.00
Category/Type: HOUSE FL-8 PRIMARY

B.
Full Name (Last, First, Middle Initial): Sue Kelly for Congress
Mailing Address: PO Box 599
City: Katonah State: NY Zip Code: 10536-
Purpose of Disbursement: HOUSE NY-19 PRIMARY
Candidate Name:
Office Sought: House / Senate / President / District / State:
Disbursement For: 2004 X Primary / General / Other (specify)
Transaction ID: 1209200355E3549
Date of Disbursement: 12 / 03 / 2003
Amount of Each Disbursement this Period: 2000.00
Category/Type: HOUSE NY-19 PRIMARY

C.
Full Name (Last, First, Middle Initial): Kind For Congress Committee
Mailing Address: 505 King St Suite 105
City: La Crosse State: WI Zip Code: 54601-9204
Purpose of Disbursement: HOUSE WI-3 PRIMARY
Candidate Name:
Office Sought: House / Senate / President / District / State:
Disbursement For: 2004 X Primary / General / Other (specify)
Transaction ID: 1209200355E3568
Date of Disbursement: 12 / 03 / 2003
Amount of Each Disbursement this Period: 1000.00
Category/Type: HOUSE WI-3 PRIMARY

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

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

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

A.
Full Name (Last, First, Middle Initial): Friends of Blanche Lincoln
Mailing Address: PO Box 3197
City: Little Rock | State: AR | Zip Code: 72203-3197
Purpose of Disbursement: SENATE-AR
Candidate Name:
Category/Type:
Office Sought: House / Senate / President — X Senate
State: District:
Disbursement For: 2004 — X Primary / General / Other (specify)
Transaction ID: 1209200355E3536
Date of Disbursement: 12 / 03 / 2003
Amount of Each Disbursement this Period: 1000.00
SENATE-AR

B.
Full Name (Last, First, Middle Initial): Friends of Blanche Lincoln
Mailing Address: PO Box 3197
City: Little Rock | State: AR | Zip Code: 72203-3197
Purpose of Disbursement: SENATE-AR
Candidate Name:
Category/Type:
Office Sought: House / Senate / President — X Senate
State: District:
Disbursement For: 2004 — Primary / X General / Other (specify)
Transaction ID: D1142D0450E3577
Date of Disbursement: 12 / 03 / 2003
Amount of Each Disbursement this Period: 1000.00
SENATE-AR

C.
Full Name (Last, First, Middle Initial): Marion Berry For Congress
Mailing Address: PO Box 8084
City: Jonesboro | State: AR | Zip Code: 72403-8084
Purpose of Disbursement: HOUSE AR-1
Candidate Name:
Category/Type:
Office Sought: House / Senate / President — X House
State: District: 1
Disbursement For: 2004 — X Primary / General / Other (specify)
Transaction ID: 1209200355E3556
Date of Disbursement: 12 / 03 / 2003
Amount of Each Disbursement this Period: 1000.00
HOUSE AR-1

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

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

A.
Full Name (Last, First, Middle Initial): Martin Frost Campaign Committee
Mailing Address: PO Box 4219
City: Dallas | State: TX | Zip Code: 75208-0219
Purpose of Disbursement: HOUSE TX-24 PRIMARY
Candidate Name:
Office Sought: House / Senate / President — X Primary / General / Other (specify)
State: District
Transaction ID: 1209200355E3586
Date of Disbursement: 12 / 03 / 2003
Amount of Each Disbursement this Period: 1000.00
Category/Type: HOUSE TX-24 PRIMARY

B.
Full Name (Last, First, Middle Initial): Musgrave For Congress
Mailing Address: PO Box 1176
City: Greeley | State: CO | Zip Code: 80632-
Purpose of Disbursement: HOUSE CO-4 PRIMARY
Candidate Name:
Office Sought: House / Senate / President — X Primary / General / Other (specify)
State: District
Transaction ID: 1209200355E3540
Date of Disbursement: 12 / 03 / 2003
Amount of Each Disbursement this Period: 1000.00
Category/Type: HOUSE CO-4 PRIMARY

C.
Full Name (Last, First, Middle Initial): Norwood for Congress
Mailing Address: PO Box 499
City: Evans | State: GA | Zip Code: 30809-
Purpose of Disbursement: HOUSE GA-9 PRIMARY
Candidate Name:
Office Sought: House / Senate / President — X Primary / General / Other (specify)
State: District
Transaction ID: 1209200355E3547
Date of Disbursement: 12 / 03 / 2003
Amount of Each Disbursement this Period: 2500.00
Category/Type: HOUSE GA-9 PRIMARY

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

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

A.
Full Name (Last, First, Middle Initial): Pete Sessions For Congress
Mailing Address: PO Box 38585
City: Dallas State: TX Zip Code: 75238-
Purpose of Disbursement: HOUSE TX-32
Candidate Name:
Category/Type: HOUSE TX-32
Office Sought: House / Senate / President / State: District
Disbursement For: 2004 X Primary General / Other (specify)
Transaction ID: 1209200355E3555
Date of Disbursement: 12 / 03 / 2003
Amount of Each Disbursement this Period: 1000.00

B.
Full Name (Last, First, Middle Initial): Price for Congress
Mailing Address: PO Box 425
City: Roswell State: GA Zip Code: 30077-
Purpose of Disbursement: HOUSE GA-6 PRIMARY
Candidate Name:
Category/Type: HOUSE GA-6 PRIMARY
Office Sought: House / Senate / President / State: District
Disbursement For: 2004 X Primary General / Other (specify)
Transaction ID: 1209200355E3546
Date of Disbursement: 12 / 03 / 2003
Amount of Each Disbursement this Period: 5000.00

C.
Full Name (Last, First, Middle Initial): Mike Rogers For Congress
Mailing Address: 123 E 13th St
City: Anniston State: AL Zip Code: 36201-
Purpose of Disbursement: HOUSE AL-3 PRIMARY
Candidate Name:
Category/Type: HOUSE AL-3 PRIMARY
Office Sought: House / Senate / President / State: District
Disbursement For: 2004 X Primary General / Other (specify)
Transaction ID: 1209200355E3541
Date of Disbursement: 12 / 03 / 2003
Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **7000.00**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

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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 Scott For Congress
Mailing Address: 162 Hurt St NE
City: Atlanta State: GA Zip Code: 30307-2538
Purpose of Disbursement: HOUSE GA-13
Candidate Name:
Category/Type: HOUSE GA-13
Office Sought: House / Senate / President / State: District
Disbursement For: 2004 X Primary General / Other (specify)
Transaction ID: 1209200355E3558
Date of Disbursement: 12 / 03 / 2003
Amount of Each Disbursement this Period: 2000.00

B.
Full Name (Last, First, Middle Initial): Steve Rothman For Congress Inc
Mailing Address: PO Box 714
City: Hackensack State: NJ Zip Code: 07602-0714
Purpose of Disbursement: HOUSE NJ-9 PRIMARY
Candidate Name:
Category/Type: HOUSE NJ-9 PRIMARY
Office Sought: House / Senate / President / State: District
Disbursement For: 2004 X Primary General / Other (specify)
Transaction ID: D1082200453E3573
Date of Disbursement: 12 / 15 / 2003
Amount of Each Disbursement this Period: 1000.00

C.
Full Name (Last, First, Middle Initial): Ted Strickland For Congress
Mailing Address: PO Box 255
City: Minford State: OH Zip Code: 45653-
Purpose of Disbursement: HOUSE OH-6 PRIMARY
Candidate Name:
Category/Type: HOUSE OH-6 PRIMARY
Office Sought: House / Senate / President / State: District
Disbursement For: 2004 X Primary General / Other (specify)
Transaction ID: 1209200355E3562
Date of Disbursement: 12 / 03 / 2003
Amount of Each Disbursement this Period: 5000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 8000.00

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

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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

A.
Full Name (Last, First, Middle Initial): Tiahrt for Congress
Mailing Address: 2250 N. Rock Road #118-A
City: Wichita State: KS Zip Code: 67226-
Purpose of Disbursement: HOUSE KS-4 PRIMARY
Candidate Name
Office Sought: House / Senate / President / State: District
Disbursement For: 2004 X Primary General / Other (specify)
Transaction ID: 1209200355E3548
Date of Disbursement: 12 03 2003
Amount of Each Disbursement this Period: 1000.00
Category/Type: HOUSE KS-4 PRIMARY

B.
Full Name (Last, First, Middle Initial): Tiberi for Congress
Mailing Address: 2021 E. Dublin Granville Road Suite 2000
City: Columbus State: OH Zip Code: 43229-
Purpose of Disbursement: HOUSE OH-12 PRIMARY
Candidate Name
Office Sought: House / Senate / President / State: District
Disbursement For: 2004 X Primary General / Other (specify)
Transaction ID: 1209200355E3550
Date of Disbursement: 12 03 2003
Amount of Each Disbursement this Period: 1000.00
Category/Type: HOUSE OH-12 PRIMARY

C.
Full Name (Last, First, Middle Initial): Walden For Congress, Inc
Mailing Address: PO Box 1081
City: Hood River State: OR Zip Code: 97031-0037
Purpose of Disbursement: HOUSE OR-2 PRIMARY
Candidate Name
Office Sought: House / Senate / President / State: District
Disbursement For: 2004 X Primary General / Other (specify)
Transaction ID: 1209200355E3552
Date of Disbursement: 12 03 2003
Amount of Each Disbursement this Period: 1000.00
Category/Type: HOUSE OR-2 PRIMARY

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

TOTAL This Period (last page this line number only) ..... ▶ 70500.00