REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
American Academy of Ophthalmology, Inc. Political Committee (OPTHPAC)

ADDRESS (number and street) [ ] Check if different than previous reported
655 Beach Street

CITY, STATE and ZIP CODE
San Francisco, CA 94109

2. FEC IDENTIFICATION NUMBER
C00196146

3. [ ] This committee qualified as a multicandidate committee DURING THIS Reporting Period on _____ (date).

4. TYPE OF REPORT

(a) [ ] April 15 Quarterly Report

[ ] July 15 Quarterly Report

[ ] October 15 Quarterly Report

[ ] January 31 Year End Report

[ ] July 31 Mid Year Report (Non-election Year Only)

[ ] Termination Report

Monthly Report Due On:

[ ] February 20	[ ] June 20	[ ] October 20
[ ] March 20	[ ] July 20	[ ] November 20
[X] April 20	[ ] August 20	[ ] December 20
[ ] May 20	[ ] September 20	[ ] January 31

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

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

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

SUMMARY

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5	Covering Period 03/01/93 through 03/31/93		
6	(a) Cash on Hand January 1, 19 93		$ 173,447.71
	(b) Cash on Hand at Beginning of Reporting Period	$ 227,115.20	
	(c) Total Receipts (from Line 19)	$ 8,627.37	$ 70,360.86
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 235,742.57	$ 243,808.57
7	Total Disbursements (from Line 30)	$ 11,895.12	$ 19,961.12
8	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 223,847.45	$ 223,847.45
9	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-376-3120

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

Type or Print Name of Treasurer
Paula E. Lent

Signature of Treasurer

Date April 19, 1993

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

FEC FORM 3X
(revised 7/1/91)

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

(Revised 1/1/91)

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

REPORT COVERING PERIOD FROM 03/01/93 TO 03/31/93

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year
11. Contributions (other than loans) From:		
a. Individuals/Persons Other Than Political Committees		
i. Itemized (use Schedule A)	6,570.00	56,670.00
ii. Unitemized	1,655.00	13,138.04
iii. Total (add i and ii) ➤	8,225.00	69,808.04
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contributions (add a iii, b and c) ➤	8,225.00	69,808.04
12. Transfers From Affiliated/Other Party Committees		
13. All Loans Received		
14. Loan Repayments Received		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)		21.40
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		
17. Other Federal Receipts (Dividends, Interest, etc.)	402.37	531.42
18. Transfers from Nonfederal Account for Joint Activity		
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	8,627.37	70,360.86
20. Total Federal Receipts (subtract line 18 from line 19) ➤	8,627.37	70,360.86
II. Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share		
ii. Non-Federal Share		
b. Other Federal Operating Expenditures	3,895.12	8,461.12
c. Total Operating Expenditures (Add a i, a ii, and b) ➤	3,895.12	8,461.12
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	8,000.00	11,500.00
24. Independent Expenditures (use Schedule E)		
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
a. Individuals/Persons Other Than Political Committees		
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contribution Refunds (Add a, b and c) ➤		
29. Other Disbursements		
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	11,895.12	19,961.12
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	11,895.12	19,961.12
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans)(from line 11d)	8,225.00	69,808.04
33. Total Contribution Refunds (from line 28d)		
34. Net Contributions (other than loans)(subtract line 33 from 32)	8,225.00	69,808.04
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	3,895.12	8,461.12
36. Offsets to Operating Expenditures (from line 15)		21.40
37. Net Operating Expenditures (subtract line 36 from 35) ➤	3,895.12	8,439.72

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SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF

FOR LINE NUMBER 17

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

NAME OF COMMITTEE (In Full)

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

A. Full Name, Mailing Address and ZIP Code Union Bank 50 California Street San Francisco, CA 94109	Name of Employer N/A Occupation N/A	Date (month, day, year) 3/31/93	Amount of Each Receipt this Period 345.65
Receipt For: [ ] Primary [ ] General [X] Other (specify): Income Interest	Aggregate Year-to-Date > $ 375.17		
B. Full Name, Mailing Address and ZIP Code Dean Witter Reynolds, Inc. 167 East Second Avenue San Mateo, CA 94401	Name of Employer N/A Occupation N/A	Date (month, day, year) 3/31/93	Amount of Each Receipt this Period 56.72
Receipt For: [ ] Primary [ ] General [X] Other (specify): Income Interest	Aggregate Year-to-Date > $ 156.25		
C. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		
D. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		
E. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		
F. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		
G. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional) > 402.37

TOTAL This Period (last page this line number only) > 402.37

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PROGRAM: RRL AMERICAN ACADEMY OF OPHTHALMOLOGY INC POLITICAL COMMITTEE (OPHTHPAC) PAGE: 1
DATE: 041293 ITEMIZED RECEIPTS LINE NUMBER 11a i

CONTRIBUTIONS FROM INDIVIDUALS OTHER THAN POLITICAL COMMITTEES

SCHEDULE A

FROM 03/01/93 TO 03/31/93

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NAME AND ADDRESS	EMPLOYER/OCCUPATION	DATE	RECEIPT AMOUNT	YTD AMOUNT
Schermer MD*Michael J 2620 Hurley Way Sacramento CA 95864	SELF OPHTHALMOLOGIST	03/24/93	300.00	300.00
Khoury MD*Dennis J 8118 Bustleton Avenue Philadelphia PA 19152	SELF EMPLOYED PHYSICIAN	03/23/93	300.00	300.00
Ross MD*Harold S 70 Mason Street Geneva NY 14456	HAROLD S ROSS MD OPHTHALMOLOGIST	03/01/93	300.00	300.00
Keatts MD*James G Suite 520 1140 Westmont at I-10 East Houston TX 77015	NORTHSHORE EYE CLINC OPHTHALMOLOGIST	03/24/93	300.00	300.00
McCaffery MD*James M Suite 105 607 North Central Avenue Glendale CA 91203	Glendale Eye Med Grp PHYSICIAN	03/04/93	300.00	300.00
Reuling Jr MD*Frank H 302 South Cameron Street Winchester VA 22601	Self-Employed OPHTHALMOLOGIST	03/01/93	300.00	300.00
Gutman MD*Francis A Cleveland Clinic Foundation 9500 Euclid Avenue Cleveland OH 44195-5024	CLEV CLINIC PHYSICIAN	03/15/93	250.00	250.00
Lichter MD*Paul R W K Kellogg Eye Center 1000 Wall Street Ann Arbor MI 48105	UNIVERSITY OF MICHIG PHYSICIAN	03/03/93	300.00	300.00
	SUBTOTAL		2350.00	

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CONTRIBUTIONS FROM INDIVIDUALS OTHER THAN POLITICAL COMMITTEES

SCHEDULE A

FROM 03/01/93 TO 03/31/93

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NAME AND ADDRESS	EMPLOYER/OCCUPATION	DATE	RECEIPT AMOUNT	YTD AMOUNT
Mensher MD*John H Virginia Mason Clin/PO Box 900 1100 Ninth Avenue Seattle WA 98111	Virginia Mason Clinc OPHTHALMOLOGIST	03/08/93	300.00	300.00
Taylor Jr MD*Waller L Suite 101-M 1200 First Colonial Road Virginia Beach VA 23454	Self-Employed OPHTHALMOLOGIST	03/01/93	300.00	300.00
Black MD*Robert C Suite A 3885 Beacon Street Fremont CA 94538	Self-Employed OPHTHALMOLOGIST	03/04/93	300.00	300.00
Sponaugle MD*H Dale 3603 County Street Portsmouth VA 23707	Self-Employed OPHTHALMOLOGIST	03/08/93	300.00	300.00
Hughes MD*Susan M 1900 Rittenhouse Square Ste C2 Philadelphia PA 19103	SELF-EMPLOYED OPHTHALMOLOGIST	03/30/93	500.00	500.00
Woesner MD*Randall E 248A Hospital Drive Ukiah CA 95482	Self-Employed PHYSICIAN	03/18/93	300.00	300.00
Ayazi MD*Shahram Suite 7 220 Hamburg Turnpike Wayne NJ 07470	Self-Employed PHYSICIAN	03/08/93	300.00	300.00
Embriano MD*Peter J Suite 102 146 Hazard Avenue Enfield CT 06082	Self-Employed OPHTHALMOLOGIST	03/01/93	300.00	300.00
	SUBTOTAL		2600.00	

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AMERICAN ACADEMY OF OPHTHALMOLOGY INC POLITICAL COMMITTEE (OPHTHPAC)

ITEMIZED RECEIPTS

LINE NUMBER 11a I

CONTRIBUTIONS FROM INDIVIDUALS OTHER THAN POLITICAL COMMITTEES

SCHEDULE A

FROM 03/01/93 TO 03/31/93

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NAME AND ADDRESS	EMPLOYER/OCCUPATION	DATE	RECEIPT AMOUNT	YTD AMOUNT
Latter MD*Mitchell C 10230 E Artesia Blvd Suite 204 Bellflower CA 90706	Self-Employed OPHTHALMOLOGIST	03/24/93	300.00	300.00
Millman MD*Arthur L Suite 212 345 East 37th Street New York NY 10016	Self-Employed OPHTHALMOLOGIST	03/11/93	300.00	300.00
Manning MD*Jean R Suite 103 1330 North Beckley Avenue Dallas TX 75203-1206	Self-Employed PHYSICIAN	03/28/93	300.00	300.00
Taft DO*G Michael South Central Ophthalmology 201 Rosa Lane Florence AL 35630	SELF-EMPLOYED OPHTHALMOLOGIST	03/24/93	300.00	300.00
Hughes MD*Mark S 5th Floor 100 Charles River Plaza Boston MA 02114	MASS EYE & EAR INF'RY PHYSICIAN	03/05/93	300.00	300.00
Novak MD*Anthony F Interstate Medical Center West Highway 61 Red Wing MN 55066	INTERS MED CENTER OPHTHALMOLOGIST	03/08/93	300.00	300.00
	SUBTOTAL		1800.00	
	*** TOTAL ***		6750.00	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE [ ] OF [ ]

FOR LINE NUMBER 21ai

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NAME OF COMMITTEE (In Full)

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

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
A. Union Bank 50 California Street San Francisco, CA 94109	Mastercard/Visa fees/Discovery [ ] Primary [ ] General [X] Other (specify) YTD	3/31/93	30.60
B. American Express 2423 E. Lincoln Drive Phoenix, AZ 85016	Merchant fees [ ] Primary [ ] General [X] Other (specify) YTD		
C. Union Bank 50 California Street San Francisco, CA 94109	Banking fee-analysis [ ] Primary [ ] General [X] Other (specify) YTD		
D. Franchise Tax Board P.O.Box 942857 Sacramento CA 94257	Corp Tax Liability 1992 [ ] Primary [ ] General [ ] Other (specify)	3/27/93	930.37
E. Internal Revenue Service Center Fresno CA 93888	Corp Tax Liability 1992 [ ] Primary [ ] General [ ] Other (specify)	3/27/93	2,934.15
F.	[ ] Primary [ ] General [ ] Other (specify)		
G.	[ ] Primary [ ] General [ ] Other (specify)		
H.	[ ] Primary [ ] General [ ] Other (specify)		
I.	[ ] Primary [ ] General [ ] Other (specify)		

SUBTOTAL of Disbursements This Page (optional) 3,895.12

TOTAL This Period (last page this line number only) 3,895.12

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ITEMIZED DISBURSEMENTS
CONTRIBUTIONS TO FEDERAL CANDIDATES AND OTHER POLITICAL COMMITTEES
SCHEDULE B
FROM 03/01/93 TO 03/31/93

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NAME AND ADDRESS	DISBURSEMENT PURPOSE	DATE	AMOUNT
JOHN MCCAIN REELECTION COMMITTEE 4554 N CENTRAL AVENUE PHOENIX AZ 85012	DEBT RETIREMENT SENATE / /AZ 1992/OTHER	03/31/93	1500.00
BILL BREWSTER FOR CONGRESS P O BOX 10 MADILL OK 73446	HOUSE /3RD /OK 1994/PRIMARY	03/31/93	1000.00
CANTWELL FOR CONGRESS PO BOX 144 MOUNT LAKE TERRAC WA 98043	DEBT RETIREMENT HOUSE /1ST /WA 1992/OTHER	03/31/93	1000.00
SAM FARR FOR CONGRESS 1030 S STREET SACRAMENTO CA 95814	SPECIAL PRIMARY ELECTION HOUSE /17TH/CA 1993/OTHER	03/31/93	2000.00
HENRY ESPY FOR CONGRESS 230-G STREET NE WASHINGTON DC 20002	SPECIAL PRIMARY HOUSE /2ND /MS 1993/OTHER	03/26/93	1000.00
FRIENDS OF GEORGE BROWN PO BOX 1067 COLTON CA 92324	DEBT RETIREMENT HOUSE /42ND/CA 1992/GENERAL	03/24/93	500.00
RMM FOR CONGRESS 115-8TH STREET SE WASHINGTON DC 20003	DEBT RETIREMENT HOUSE /13 /PA 1992/OTHER	03/09/93	1000.00
		SUBTOTAL	8000.00
	*** TOTAL ***		8000.00

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Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

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

☐	Hand Delivered	DATE OF RECEIPT
☐	First Class Mail	POSTMARKED
☑	Registered/Certified Mail	POSTMARKED 4-19-93
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House Office of Records and Registration	DATE OF RECEIPT
☐	Received from the Senate Office of Public Records	DATE OF RECEIPT
☐	Other (Specify):	POSTMARKED and/or DATE OF RECEIPT

SEB.
PREPARER

4-22-93
DATE PREPARED

FEC FORM 70-2 (12/92)

9 3 0 3 8 3 6 2 4 7 5