07/21/2006 18:06

Image# 26950374485

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

| FURINI 3X | For C | Other Than An Aut | horized Com | mittee | | Office Use Only |
|--|--|---|---|------------------------------|---------------------|----------------------------|
| NAME OF COMMITTEE (in full) | | FEC MAILING LABEL YPE OR PRINT | Example:If ty over the lines | | | |
| | Association P | olitical Action Committe | e | | 1 1 1 1 1 | |
| | | | | | | |
| ADDRESS (number and si | treet) 15 | 05 Prince Street | | | | <u> </u> |
| Check if differer than previously reported. (ACC) | nt L⊥ | ite 300 | | | VA L | 22314 |
| 2. FEC IDENTIFICATION | ON NUMBER | ▼ Cl | TY 🛕 | | STATE | ZIPCODE 🛕 |
| C00024968 | | | S THIS REPORT | NEW (N) OR | X AMI | ENDED |
| 4. TYPE OF REPOR (Choose One) (a) Quarterly Report April 15 Quarterly F Quarterly F Quarterly F Quarterly F January 31 Quarterly F July 31 Mic Report(Not Year Only) Terminatio (TER) | Report(Q1) Report(Q2) Report(Q3) Report(YE) d-Year n-election (MY) | (c) 12-Day PRE-Election Report for the: Election Report for the: | or 20 (M2) or 20 (M3) or 20 (M4) Primary Convent on on General on on | Jul 20 (M7) (12P) cion (12C) | Sep 2 | in the State of |
| 5. Covering Period | 0.5 | 01 2006 | throu | igh 0.5 | 3 1 | 2006 |
| I certify that I have examine Type or Print Name of Tree | | and to the best of my kr incent Brandys, O.D. | nowledge and belie | f it is true, correct | and complete. | |
| Signature of Treasurer | Electronically | Filed by Vincent Bran | dys, O.D. | | Date 07 | 21 2006 |
| NOTE : Submission of fa | lse, erroneous, | or incomplete information | on may subject the | person signing th | nis Report to the p | penalties of 2 U.S.C 437g. |
| Office Use | | | | | | FEC FORM 3X |

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) OF RECEIPTS AND DISBURSEMENTS
Page 2

| Report Covering the Period: From: | 01 2006 | To: 05 31 2006 |
|--|------------------------------|--------------------------------|
| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
| (a) Cash on Hand January 1 Yellow Y | | 202047.35 |
| (b) Cash on Hand at Begining of Reporting Period | 159168.38 | |
| (c) Total Receipts (from Line 19) | 50779.55 | 141928.54 |
| (d) Subtotal (add lines 6(b) and | | |
| 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 209947.93 | 343975.89 |
| Total Disbursements (from Line 31) | 64050.47 | 198078.43 |
| Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 145897.46 | 145897.46 |
| Debts and Obligations owed TO | | |
| the committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |
| . Debts and Obligations owed BY | | |
| the committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |
| X This Committee has qualified as a multicandidate | committee. (see FEC FORM 1M) | |

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

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

Write or Type Committee Name

American Optometric Association Political Action Committee

From:

Report Covering the Period:

м м 0 5 01

^Y 2 0 0 6

To:

м м 0 5 ^D 3 1

^Y 2006

| | 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) | 29777.50 | 51887.50 |
| | (ii) Unitemized | 20984.40 | 89043.88 |
| | (iii) TOTAL (add Lines 11(a)(i) and (ii) | 50761.90 | 140931.38 |
| | (b) Political Party Committees | 0.00 | 0.00 |
| | (c) Other Political Committees (such as PACs) | 0.00 | 0.00 |
| | 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) | 50761.90 | 140931.38 |
| 2. | Transfers From Affiliated/Other Party Committees | 0.00 | 0.00 |
| 3. | All Loans Received | 0.00 | 0.00 |
| | Loan Repayments Received Offsets To Operating Expenditures | 0.00 | 0.00 |
| | (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made | 0.00 | 0.00 |
| • | to Federal candidates and Other Political Committees | 0.00 | 0.00 |
| 7. | Other Federal Receipts (Dividends, Interest, etc.) | 17.65 | 997.16 |
| 8. | 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 |
| 9. | Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) | 50779.55 | 141928.54 |
| 20. | Total Federal Receipts (subtract Line 18(c) from Line 19) | 50779.55 | 141928.54 |

(subtract Line 21(a)(ii) from Line 30(a)(ii)

from Line 31).....

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 4 **COLUMN A COLUMN B II. DISBURSEMENTS Total This Period** Calendar Year-to-Date 21. Operating Expenditures: (a) Shared Federal/Non-Federal Activity (from Schedule H4) 0.00 0.00 (i) Federal Share..... 0.00 0.00 (ii) Non-Federal Share..... (b) Other Federal Operating 1050.47 4578.43 Expenditures..... (c) Total Operating Expenditures 1050.47 4578.43 (add 21(a)(i), (a)(ii) and (b))............ 22. Transfers to Affiliated/Other Party 0.00 0.00 Committees..... Contributions to 23. Federal Candidates/Committees.....and Other Political Committees..... 63000.00 193500.00 24. Independent Expenditure 0.00 0.00 0.00 0.00 0.00 0.00 26. Loan Repayments Made..... 0.00 0.00 27. Loans Made..... 28. Refunds of Contributions To: Individuals/Persons Other 0.00 0.00 Than Political Committees 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 0.00 (such as PACs) (d) Total Contribution Refunds 0.00 0.00 (add Lines 28(a), (b), and (c)) 0.00 0.00 29. Other Disbursements..... 30. Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity (from Schedule H6) 0.00 0.00 (i) Federal Share 0.00 0.00 (ii) "Levin" Share (b) Federal Election Activity Paid Entirely 0.00 0.00 With Federal Funds (c) Total Federal Election Activity (add 0.00 0.00 Lines 30(a)(i), 30(a)(ii) and 30(b)).... 31. Total Disbursements (add Lines 21(c), 22, 64050.47 198078.43 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. 32. Total Federal Disbursements

64050.47

198078.43

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| 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) | 50761.90 | 140931.38 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 50761.90 | 140931.38 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 1050.47 | 4578.43 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 1050.47 | 4578.43 |

| SCHEDULE A (FEC Form 3X) | | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 6 / 44 |
|--------------------------|--|----------------|-------------------------------------|--|
| ITEMIZED RECEIPTS | | | or each category of the | (check only one) |
| | | | Detailed Summary Page | X 11a 11b 11c 12 15 16 17 |
| Any inf | formation copied from such Reports and State | omonte may | y not be cold or used by any perso | |
| or for c | commercial purposes, other than using the na | me and add | lress of any political committee to | solicit contributions from such committee. |
| \ NA | ME OF COMMITTEE (In Full) | | | |
| An | nerican Optometric Association Politic | al Action (| Committee | |
| / Full | Name (Last, First, Middle Initial) | | | |
| _ | J. Scott Richardson | | | Date of Receipt |
| Mai | ling Address 142 Randall Road | | | M M / D D / Y Y Y Y |
| City | , | State | Zip Code | 05 05 2006 |
| • | rroll | IA | 51401 | Transaction ID: 23971763 Amount of Each Receipt this Period |
| | C ID number of contributing | | 31401 | |
| | eral political committee. | C | | 300.00 |
| Nar Sel | ne of Employer f Employed | Occupation | 1 | |
| | ceipt For: | O.D. Aggregate | Year-to-Date ▼ | \dashv |
| | Primary General | , iggi ogalo | | |
| | Other (specify) ▼ | | 300.00 | |
| Full | Name (Last, First, Middle Initial) | | | |
| | Beverly B Miller | | | Date of Receipt |
| Mai | Mailing Address 19011 Old Baltimore Road | | | 05 05 2006 |
| City | / | State | Zip Code | Transaction ID: 23971767 |
| Bro | ookeville | MD | 20833-3223 | Amount of Each Receipt this Period |
| | C ID number of contributing | C | | 500.00 |
| fed | eral political committee. | <u> </u> | | 666.55 |
| Nar | ne of Employer f Employed | Occupation | 1 | 7 |
| | | | Optometry | |
| Red | ceipt For: Primary General | Aggregate | Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | | 500.00 | |
| | | | 0 0 0 0 0 0 0 | ' |
| _ | Name (Last, First, Middle Initial) | | | Date of Receipt |
| | Jerald F Combs ling Address 472 Rt Fork Bull Creek | | | Date of Receipt |
| | 7/2 III I OIN DUII OIGEN | | | 05 05 2006 |
| City | | State | Zip Code | Transaction ID: 23971769 |
| <u>Pre</u> | estonsburg | KY | 41653-8090 | Amount of Each Receipt this Period |
| | C ID number of contributing eral political committee. | C | | 500.00 |
| Nar | ne of Employer f Employed | Occupation | 1 | 7 |
| | | | Optometry | |
| Red | ceipt For: | Aggregate | Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | | 500.00 | |
| | V-F 77 ▼ | | | |
| CLIDT | OTAL of Populate This Dags (antique) | _ | | 1300.00 |
| SUBI | OTAL of Receipts This Page (optional) | | ······ | |
| TOTA | I This Period (last page this line number on | v) | • | |

| SCHEDULE A (FEC Form 3X |) | Use separate schedule(s) | FOR LINE NUMBER: PAGE 7 / 44 |
|---|--------------------------------------|---|--|
| ITEMIZED RECEIPTS | | or each category of the | (check only one) X 11a 11b 11c 12 |
| | | Detailed Summary Page | 13 14 15 16 17 |
| Any information copied from such Reports and or for commercial purposes, other than using t | d Statements may the name and add | y not be sold or used by any persodress of any political committee to | on for the purpose of soliciting contributions of solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) | | | |
| American Optometric Association P | olitical Action | Committee | |
| Full Name (Last, First, Middle Initial) A. Dr James H Tillman, Jr | | | Date of Receipt |
| Mailing Address Route 6 Box 31M | | | 05 05 2006 |
| City | State | Zip Code | Transaction ID: 23971770 |
| Andalusia | AL | 36420 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 500.00 |
| Name of Employer Self Employed | Occupation Doctor of | n f Optometry | 7 |
| Receipt For: | | e Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 0 0 | 500.00 | |
| Full Name (Last, First, Middle Initial) 3. Dr Stephen M Gross | | | Date of Receipt |
| Mailing Address 37300 Hwy 59 North | 1 | | 05 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State | Zip Code | Transaction ID: 23971771 |
| Bay Minette | AL | 36507 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 500.00 |
| Name of Employer Self Employed | Occupation | | |
| Receipt For: | | f Optometry e Year-to-Date ▼ | |
| Primary General | 139.19 | | 1 |
| Other (specify) ▼ | | 500.00 | |
| Full Name (Last, First, Middle Initial) Dr Ian B Gaddie | | | Date of Receipt |
| Mailing Address 5600 Schuler Lane | | | 05 / 05 / 2006 |
| City | State | Zip Code | Transaction ID: 23971772 |
| Prospect | KY | 40059-9501 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 225.00 |
| Name of Employer Self Employed | Occupation Doctor of | n f Optometry | |
| Receipt For: | Aggregate | e Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 0 0 | 225.00 | |
| SUBTOTAL of Receipts This Page (optional) | · | | 1225.00 |
| , (,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | |
| TOTAL This Period (last page this line numb | er only) |) | |

| S | CHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 8 / 44 |
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| ıT | EMIZED RECEIPTS | | or each category of the | (check only one) |
| 11 | EMIZED RECEIPTS | | Detailed Summary Page | X 11a 11b 11c 12 |
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| Ar | ry information copied from such Reports and Stat for commercial purposes, other than using the na | tements may ame and add | not be sold or used by any persodress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| abla | NAME OF COMMITTEE (In Full) | | | |
| \rangle | American Optometric Association Politic | al Action (| Committee | |
| Α. | Full Name (Last, First, Middle Initial) Dr Michael Douglas Jones | | | Date of Receipt |
| | Mailing Address 565 Autumn Bluff Drive | 05 05 2006 | | |
| | City | State | Zip Code | Transaction ID: 23971785 |
| | Ellisville | MO | 63021-5962 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 250.00 |
| | Name of Employer Self Employed | Occupation | n | |
| | Receipt For: | Aggregate | e Year-to-Date ▼ | |
| | Primary General | 1 1 | | 1 |
| | Other (specify) | 0 0 | 500.00 | |
| В. | Full Name (Last, First, Middle Initial) Dr Joe Floyd Chaney, Jr | | | Date of Receipt |
| | Mailing Address Rt 4 Box 149 | | | 05 05 2006 |
| | City | State | Zip Code | Transaction ID: 23995393 |
| | Nashville | AR | 71852 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 250.00 |
| | Name of Employer Self Employed | Occupation O.D. | n | |
| | Receipt For: | Aggregate | e Year-to-Date ▼ | |
| | Primary General | 1 1 | | 1 |
| | Other (specify) | 0 0 | 250.00 | |
| <u>с</u> . | Full Name (Last, First, Middle Initial) Dr Jerry H Ellis | | | Date of Receipt |
| | Mailing Address 74 Isleta Dr | | | 05 05 7 2006 |
| | City | State | Zip Code | Transaction ID: 23995395 |
| | Cherokee Vlge | AR | 72529-5013 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 500.00 |
| | Name of Employer Self Employed | Occupation Doctor of | n f Optometry | |
| | Receipt For: | Aggregate | Year-to-Date ▼ | |
| | Primary General | | | 1 |
| | Other (specify) | | 500.00 | |
| s | UBTOTAL of Receipts This Page (optional) | | | 1000.00 |
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| SCHEDULE A (FEC Form 3X) | | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 9 / 44 |
|---|---|------------------------------|---|---|
| | EMIZED RECEIPTS | | or each category of the | (check only one) |
| • | EWIZED RECEIP 13 | | Detailed Summary Page | X 11a 11b 11c 12 |
| | | | | 13 14 15 16 17 |
| Ar or | ny information copied from such Reports and State for commercial purposes, other than using the r | atements may name and add | not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| | NAME OF COMMITTEE (In Full) | | | |
| \rangle | American Optometric Association Politi | cal Action (| Committee | |
| Α. | Full Name (Last, First, Middle Initial) Dr Melvin Jackson | | | Date of Receipt |
| | Mailing Address 404 Prince Of Wales Dr | | | 0 5 0 5 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City | State | Zip Code | Transaction ID: 23995396 |
| | Virginia Bch | VA | 23452-5758 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 500.00 |
| | Name of Employer Self Employed | Occupation Doctor of | n Optometry | |
| | Receipt For: | | Year-to-Date ▼ | |
| | Primary General | | | 1 |
| | Other (specify) ▼ | 0 0 | 500.00 | |
| В. | Full Name (Last, First, Middle Initial) Dr Anita Susan Keene | | | Date of Receipt |
| | Mailing Address 70 Cove Hills Lane | | | 05 05 YYYYY 2006 |
| | City | State | Zip Code | Transaction ID: 23995397 |
| | Wytheville | VA | 24382 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 300.00 |
| | Name of Employer Self Employed | Occupation Doctor of | n Optometry | 7 |
| | Receipt For: | | Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | | 400.00 | |
| <u> </u> | Full Name (Last, First, Middle Initial) Dr Mark K Colip | | | Date of Receipt |
| | Mailing Address Illinois College Of Opt 3241 S Michigan Ave | | | M M / D D / Y Y Y Y Y O O O O O |
| | City | State | Zip Code | Transaction ID: 23995400 |
| | Chicago | IL | 60616 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 400.00 |
| | Name of Employer Self Employed | Occupation Doctor of | n Optometry | |
| | Receipt For: | - | Year-to-Date ▼ | |
| | Primary General Other (specify) | | 400.00 | |
| Г | _ | | | |
| s | UBTOTAL of Receipts This Page (optional) | | | 1200.00 |

| S | CHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 10 / 44 | | |
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| ••• | LIVIIZED RECEIP 13 | | Detailed Summary Page | X 11a 11b 11c 12 | | |
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| Ar or | ny information copied from such Reports and Stat for commercial purposes, other than using the na | ements may ame and add | y not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. | | |
| \setminus | NAME OF COMMITTEE (In Full) | | | | | |
| \rangle | American Optometric Association Politic | al Action (| Committee | | | |
| Α. | Full Name (Last, First, Middle Initial) Dr Gilbert G Wong | | | Date of Receipt | | |
| | Mailing Address 7810 W Maui Lane | | | 05 10 7 2006 | | |
| | City | State | Zip Code | Transaction ID: 23995440 | | |
| | Peoria | AZ | 85381-3414 | Amount of Each Receipt this Period | | |
| | FEC ID number of contributing federal political committee. | С | | 300.00 | | |
| | Name of Employer Self Employed | Occupation Doctor of | n f Optometry | | | |
| | Receipt For: | Aggregate | e Year-to-Date ▼ | 7 | | |
| | Primary General | | 000,00 | 1 | | |
| | Other (specify) | | 300.00 | | | |
| В. | Full Name (Last, First, Middle Initial) Dr Michele A Donovan | | | Date of Receipt | | |
| | Mailing Address 1440 Harbor Mist Court | 05 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | | | |
| | City | State | Zip Code | Transaction ID: 23995511 | | |
| | Charleston | SC | 29492 | Amount of Each Receipt this Period | | |
| | FEC ID number of contributing federal political committee. | C | | 300.00 | | |
| | Name of Employer | Occupation | n | 7 | | |
| | Self Employed | Doctor of | f Optometry | | | |
| | Receipt For: | Aggregate | e Year-to-Date ▼ | 7 | | |
| | Primary General | | 202.02 | 1 | | |
| | Other (specify) | 0 0 | 300.00 | | | |
| <u> </u> | Full Name (Last, First, Middle Initial) Dr Frank Edward Greteman | | | Date of Receipt | | |
| | Mailing Address 915 Highridge Rd Apt 9 | | | 05 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | |
| | City | State | Zip Code | Transaction ID: 23995512 | | |
| | Carroll | IA | 51401 | Amount of Each Receipt this Period | | |
| | FEC ID number of contributing federal political committee. | C | | 500.00 | | |
| | Name of Employer Self Employed | Occupation Doctor of | n f Optometry | 7 | | |
| | Receipt For: | Aggregate | e Year-to-Date ▼ | | | |
| | Primary General | - | F00.00 | 1 | | |
| | Other (specify) ▼ | | 500.00 |] | | |
| _ | LIDTOTAL of Devices Title D. (1911) | | | 1100.00 | | |
| L | UBTOTAL of Receipts This Page (optional) | | | | | |

| SCHEDULE A (FEC For | m 3X) | Lisa sanarate sahadula(s) | FOR LINE NUMBER: PAGE 11 / 44 |
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| ITEMIZED RECEIPTS | , | Use separate schedule(s) or each category of the Detailed Summary Page | (check only one) X 11a 11b 11c 12 |
| | | , , | 13 14 15 16 17 |
| Any information copied from such Re or for commercial purposes, other that | ports and Statements may in using the name and add | y not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) American Optometric Associ | ation Political Action | Committee | |
| Full Name (Last, First, Middle Initial) A. Dr Michael T Cady | al) | | Date of Receipt |
| Mailing Address 10 Winding 0 | Creek Way | | 05 05 2006 |
| City | State | Zip Code | Transaction ID: 23995515 |
| Ormond Beach | FL | 32174 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 100.00 |
| Name of Employer Self Employed | Occupation Doctor of | n f Optometry | |
| Receipt For: | | e Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 0 0 | 250.00 | |
| Full Name (Last, First, Middle Initial) 3. Dr Darby C Chiasson | al) | | Date of Receipt |
| Mailing Address 231 E 26Th F | Place | | 05 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State | Zip Code | Transaction ID: 23995520 |
| Cut Off | LA | 70345-2261 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 500.00 |
| Name of Employer Self Employed | Occupation | | |
| Receipt For: | | f Optometry e Year-to-Date ▼ | |
| Primary General | 33 13 | | 1 |
| Other (specify) | L | 500.00 | |
| Full Name (Last, First, Middle Initial) Dr Michael W W Raies | al) | | Date of Receipt |
| Mailing Address 2915 Noddin | Way | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State | Zip Code | Transaction ID: 23995521 |
| Portsmouth | OH | 45662-2412 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 250.00 |
| Name of Employer Self Employed | Occupation Doctor of | n f Optometry | |
| Receipt For: | Aggregate | e Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 0 0 | 250.00 | |
| SUBTOTAL of Receipts This Page | (optional) | | 850.00 |
| TOTAL This Period (last page this li | ne number only) | • | |
| I TIME I THIS I THOU (IAST PAYE THIS II | no namber omy/ | ······································ | |

| S | CHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUI | |
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| | EMIZED RECEIPTS | | or each category of the | (check only one | ´ — — |
| | LIMIZED RECEIP 13 | | Detailed Summary Page | | 11b 11c 12 |
| _ | | | | | 14 15 16 17 |
| Ar or | y information copied from such Reports and State for commercial purposes, other than using the na | ements may me and ado | not be sold or used by any perso dress of any political committee to | n for the purpose solicit contributio | of soliciting contributions ns from such committee. |
| $\overline{}$ | NAME OF COMMITTEE (In Full) | | 71 | | |
| \rangle | American Optometric Association Politica | al Action (| Committee | | |
| ۹. | Full Name (Last, First, Middle Initial) Dr Jeffrey E Schultz | | | Date of Rec | eeipt |
| | Mailing Address 150 Jackson Drive | | | 0 5 | 05 2006 |
| | City | State | Zip Code | | ı ID: 23995522 |
| | Orange Village | ОН | 44022-1500 | Amount of E | Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | | 250.00 |
| | Name of Employer Self Employed | Occupation Doctor of | n Optometry | | |
| | Receipt For: | | Year-to-Date ▼ | 7 | |
| | Primary General Other (specify) ▼ | 1 1 | 250.00 | | |
| 3. | Full Name (Last, First, Middle Initial) Dr Mark E Swan | | | Date of Rec | ceipt |
| | Mailing Address 474 Shaw Estates Dr Ne | | | 0 5 | 05 / 2006 |
| | City | State | Zip Code | Transaction | ı ID: 23995523 |
| | Rockford | MI | 49341 | Amount of E | Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | | 100.00 |
| | Name of Employer Self Employed | Occupation | า | 7 | |
| | | | Optometry | | |
| | Receipt For: | Aggregate | e Year-to-Date ▼ | . | |
| | Primary General Other (specify) ▼ | | 300.00 | | |
|) . | Full Name (Last, First, Middle Initial) Dr Kelly Lynn Raies | | | Date of Rec | ceipt |
| | Mailing Address 2915 Noddin Way | | | 05 | 05 / Y Y Y Y Y Y 2006 |
| | City | State | Zip Code | Transaction | ı ID: 23995524 |
| | Portsmouth | ОН | 45662-2412 | Amount of I | Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | | 250.00 |
| | Name of Employer Self Employed | Occupation Doctor of | n Optometry | | |
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| \setminus | NAME OF COMMITTEE (In Full) American Optometric Association Politic | al Action (| Committee | |
| Α. | Full Name (Last, First, Middle Initial) Dr Joseph W W Myers | | | Date of Receipt |
| | Mailing Address 511 5Th St | | | 05 05 2006 |
| | City Moundsville | State WV | Zip Code 26041-1901 | Transaction ID: 23995526 Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | С | | 250.00 |
| | Name of Employer Self Employed | Occupation Doctor of | n Optometry | |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 250.00 | |
| В. | Full Name (Last, First, Middle Initial) Marilyn Myers | | | Date of Receipt |
| | Mailing Address 801 Wheeling Avenue | | | 05 05 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City | State | Zip Code | Transaction ID: 23995527 |
| | Glen Dale | WV | 26038-1644 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | С | | 250.00 |
| | Name of Employer Self Employed | Occupation O.D. | n | |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 250.00 | |
| <u> </u> | Full Name (Last, First, Middle Initial) Dr John N Breiwa | | | Date of Receipt |
| | Mailing Address 2032 Honeysuckle Court | | | 05 05 7 2006 |
| | City | State | Zip Code | Transaction ID: 23995529 |
| | Bowling Green | KY | 42104-3804 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 500.00 |
| | Name of Employer Self Employed | Occupation | n | |
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| NAME OF COMMITTEE (In Full) | | | |
| American Optometric Association Politi | ical Action (| Committee | |
| Full Name (Last, First, Middle Initial) A. Dr Deborah A Long | | | Date of Receipt |
| Mailing Address 1115 John Short Rd | | | 05 15 2006 |
| City | State | Zip Code | Transaction ID: 24024169 |
| Fort Mill | SC | 29715-7633 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 365.00 |
| Name of Employer Self Employed | Occupation Doctor of | n Optometry | |
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| Primary General Other (specify) ▼ | | 365.00 | |
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| Full Name (Last, First, Middle Initial) 3. Dr Kathy C Yang-Williams | | | Date of Receipt |
| Mailing Address 2505 Ne 92Nd St | | | M M / D D / Y Y Y Y |
| City | State | Zip Code | 05 16 2006 |
| Seattle | WA | 98115-3469 | Transaction ID: 24024227 Amount of Each Receipt this Period |
| FEC ID number of contributing | | 1 1 1 1 1 1 1 1 | |
| federal political committee. | C | | 187.50 |
| Name of Employer Self Employed | Occupation | | |
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| Other (specify) ▼ | 0 0 | 250.00 | |
| Full Name (Last, First, Middle Initial) Dr Lilien Anna Vogl | | | Date of Receipt |
| Mailing Address 13603 W La Reata Ave |) | | 05 16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State | Zip Code | Transaction ID: 24024228 |
| Goodyear | AZ | 85338-9771 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | С | | 1000.00 |
| Name of Employer Self Employed | Occupation Doctor of | n Optometry | |
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| | NAME OF COMMITTEE (In Full) | | | |
| \rangle | American Optometric Association Politic | al Action (| Committee | |
| Α. | Full Name (Last, First, Middle Initial) Dr Alan H Stone | | | Date of Receipt |
| | Mailing Address 119 Crown Lane | | | 05 16 2006 |
| | City | State | Zip Code | Transaction ID: 24024236 |
| | Bellingham | WA | 98229-5933 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 225.00 |
| | Name of Employer Self Employed | Occupation Doctor of | n f Optometry | |
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| | Primary General Other (specify) | | 225.00 | 1 |
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| В. | Full Name (Last, First, Middle Initial) Dr Richard Barton Payne | | | Date of Receipt |
| | Mailing Address 9508 S E 95Th St | | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City | State | Zip Code | Transaction ID: 24024237 |
| | Vancouver | WA | 98664 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 365.00 |
| | Name of Employer Self Employed | Occupation Doctor of | n f Optometry | |
| | Receipt For: | | Year-to-Date ▼ | |
| | Primary General | | 205.00 | 1 |
| | Other (specify) ▼ | | 365.00 | |
| <u> </u> | Full Name (Last, First, Middle Initial) Dr Randall Hoch | | | Date of Receipt |
| | Mailing Address Rri Box 1621 | | | 05 16 2006 |
| | City | State | Zip Code | Transaction ID: 24024242 |
| | Lewistown | MT | 59457-1621 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 250.00 |
| | Name of Employer | Occupation | n | |
| | Self Employed | | Optometry | |
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| or | for commercial purposes, other than using the r | name and add | froit be sold of used by any personal disease of any political committee to | o solicit contributions from such committee. |
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| | 7 interregal option on a 7 too or all of 1. on a | 04171011011 | 5011111111100 | |
| _ | Full Name (Last, First, Middle Initial) | | | |
| A. | Dr Thomas Tell Tyl Thompson | | | Date of Receipt |
| | Mailing Address Po Box 250406 | | | M M / D D / Y Y Y Y |
| | <u></u> | <u> </u> | 7. 0. | 05 17 2006 |
| | City | State | Zip Code | Transaction ID: 24044731 |
| | Little Rock | AR | 72225-0406 | Amount of Each Receipt this Period |
| | FEC ID number of contributing | С | | 250.00 |
| | federal political committee. | <u> </u> | | |
| | Name of Employer | Occupation | 1 | ┥ |
| | Name of Employer Self Employed | | Optometry | |
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| | Other (specify) ▼ | | 250.00 | |
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| | Full Name (Last, First, Middle Initial) | | | |
| В. | Dr Paul W Bohac | | | Date of Receipt |
| | Mailing Address 5775 Wyncliff Drive | | | M M / D D / Y Y Y Y |
| | | | | 05 17 2006 |
| | City | State | Zip Code | Transaction ID: 24044733 |
| | N Charleston | SC | 29418 | Amount of Each Receipt this Period |
| | FEC ID number of contributing | С | | 350.00 |
| | federal political committee. | • | | |
| | Name of Employer | Occupation | 1 | |
| | Self Employed | Doctor of | Optometry | |
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| | Primary General | 1 1 | 500.00 | 1 |
| | Other (specify) ▼ | | 500.00 | |
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| _ | Full Name (Last, First, Middle Initial) Dr Gilan L Cockrell | | | Date of Receipt |
| Ο. | Mailing Address 739 Road 200 | | | M M / D D / Y Y Y Y |
| | Maining Address 7.59 Hoad 200 | | | 05 17 2006 |
| | City | State | Zip Code | Transaction ID: 24044734 |
| | Emporia | KS | 66801 | Amount of Each Receipt this Period |
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| | federal political committee. | C | | 500.00 |
| | N (5) | 10 | | _ |
| | Name of Employer Self Employed | Occupation | | |
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| | Primary General | | 500.00 | |
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| \setminus | NAME OF COMMITTEE (In Full) American Optometric Association Politic | cal Action (| Committee | |
| Α. | Full Name (Last, First, Middle Initial) Dr Samuel Cooper Smart | | | Date of Receipt |
| | Mailing Address 7 Derby Drive | O: : | 7:01 | 05 17 2006 |
| | City Fredricksburg | State VA | Zip Code 22405 | Transaction ID: 24044735 Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 500.00 |
| | Name of Employer Self Employed | Occupation Doctor of | n Optometry | |
| | Receipt For: Primary General Other (specify) | Aggregate | Year-to-Date ▼ 500.00 | |
| В. | Full Name (Last, First, Middle Initial) Dr Donald Ray Murphy | | | Date of Receipt |
| | Mailing Address 4750 Ranchwood Road | | | 05 17 2006 |
| | City | State | Zip Code | Transaction ID: 24044736 |
| | Akron FEC ID number of contributing federal political committee. | ОН | 44333-1340 | Amount of Each Receipt this Period 500.00 |
| | Name of Employer Self Employed | Occupation Doctor of | n Optometry | |
| | Receipt For: ☐ Primary ☐ General Other (specify) ▼ | Aggregate | Year-to-Date ▼ 500.00 | |
| <u>с</u> . | Full Name (Last, First, Middle Initial) Dr Jerry P Davidoff Mailing Address 13 Katie Way | | | Date of Receipt 0 5 1 7 2 0 0 6 |
| | City | State | Zip Code | Transaction ID: 24044738 |
| | West Chester | PA | 19380 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 600.00 |
| | Name of Employer Self Employed | Occupation Doctor of | n Optometry | |
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| \setminus | NAME OF COMMITTEE (In Full) | | | |
| \rangle | American Optometric Association Politic | al Action (| Committee | |
| Α. | Full Name (Last, First, Middle Initial) Joseph C Maycock | | | Date of Receipt |
| | Mailing Address Po Box 311 | | | 05 17 2006 |
| | City | State | Zip Code | Transaction ID: 24044739 |
| | Gillette | WY | 82717-0311 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 500.00 |
| | Name of Employer Self Employed | Occupation Doctor of | n f Optometry | |
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| | Other (specify) | 0 0 | 500.00 | |
| В. | Full Name (Last, First, Middle Initial) Dana Mc Dermott | | | Date of Receipt |
| | Mailing Address 2423 12Th Avenue | | | 05 17 2006 |
| | City | State | Zip Code | Transaction ID: 24044740 |
| | Forest Grove | OR | 97116-2908 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 500.00 |
| | Name of Employer Self Employed | Occupation | n | 7 |
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| <u> </u> | Full Name (Last, First, Middle Initial) Dr Roger L L Jordan | | | Date of Receipt |
| | Mailing Address 3329 Paintbrush | | | 05 17 2006 |
| | City | State | Zip Code | Transaction ID: 24044742 |
| | Gillette | WY | 82718-7568 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 500.00 |
| | Name of Employer Oct Self Employed Do | | n f Optometry | 7 |
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| or for commercial purposes, other than using th | e name and ad | dress of any political committee to | solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) | | _ | |
| American Optometric Association Po | litical Action | Committee | |
| Full Name (Last, First, Middle Initial) A. Dr Robert Leroy Mills | | | Date of Receipt |
| Mailing Address 907 Fairway Dr | | | 0 5 1 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State | Zip Code | Transaction ID: 24044743 |
| Gillette | WY | 82718 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 500.00 |
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| Full Name (Last, First, Middle Initial) 3. Dr Carol D Record | • | | Date of Receipt |
| Mailing Address 1700 Lambs Road | | | 05 17 2006 |
| City | State | Zip Code | Transaction ID: 24044744 |
| <u>Charlottesville</u> | VA | 22901-8910 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 500.00 |
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| Full Name (Last, First, Middle Initial) Dr Joanne Hendrick | • | | Date of Receipt |
| Mailing Address Po Box 509 | | | 05 17 2006 |
| City | State | Zip Code | Transaction ID: 24044746 |
| Monument | CO | 80132 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 500.00 |
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| | NAME OF COMMITTEE (In Full) | | | | |
| | American Optometric Association Polit | cal Action (| Committee | | |
| Α. | Full Name (Last, First, Middle Initial) Dr Candace D D Hamel | | | Date of Receipt | |
| | Mailing Address Po Box 358 405 Ne Main St City | State | Zip Code | 0 5 1 7 2 0 0 6 Transaction ID: 24044748 | |
| | Estacada | OR | 97023 | Amount of Each Receipt this Period | |
| | | | 37023 | | |
| | FEC ID number of contributing federal political committee. | C | | 500.00 | |
| | Name of Employer Self Employed | Occupation Doctor of | n Optometry | | |
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| | Primary General | - | 500.00 | | |
| | Other (specify) | 0 0 | | | |
| В. | Full Name (Last, First, Middle Initial) Dr Riley F Uglum | | | Date of Receipt | |
| | Mailing Address P O Box 470 | | | 05 17 2006 | |
| | City | State | Zip Code | Transaction ID: 24044826 | |
| | New Hampton | <u>IA</u> | 50659 | Amount of Each Receipt this Period | |
| | FEC ID number of contributing federal political committee. | С | | 250.00 | |
| | Name of Employer Self Employed | Occupation | n | 7 | |
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| <u> </u> | Full Name (Last, First, Middle Initial) Dr Scott A Jens | | | Date of Receipt | |
| | Mailing Address 6 Boulder Creek Circle | | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | 1 |
| | City | State | Zip Code | Transaction ID: 24044828 | |
| | Madison | WI | 53717-2702 | Amount of Each Receipt this Period | |
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| | Name of Employer Self Employed | Occupation Doctor of | n f Optometry | | |
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| NAME OF COMMITTEE (In Full) | | |
| American Optometric Association Politic | al Action Committee | |
| Full Name (Last, First, Middle Initial) A. Dr Kristine M Eng | | Date of Receipt |
| Mailing Address 49 La Campana | 7.0 | 05 17 2006 |
| City Orinda | State Zip Code CA 94563-1830 | Transaction ID: 24044829 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 500.00 |
| Name of Employer Self Employed | Occupation Self Employed | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ | 00.00 |
| Full Name (Last, First, Middle Initial) 3. Dr Jeffery James Dutch | | Date of Receipt |
| Mailing Address 16 Cottage St | | 05 17 2006 |
| City | State Zip Code | Transaction ID: 24044830 |
| Belfast | ME 04915-0209 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 500.00 |
| Name of Employer Self Employed | Occupation Doctor of Optometry | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 50 | 00.00 |
| Full Name (Last, First, Middle Initial) Dr Morris F F Sheffer | | Date of Receipt |
| Mailing Address 5611 Ballinard Ln | | 05 17 2006 |
| City | State Zip Code | Transaction ID: 24044832 |
| Charlotte | NC 28277-2548 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 500.00 |
| Name of Employer Self Employed | Occupation Doctor of Optometry | |
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| or for commercial purposes, other than using the | ne name and add | dress of any political committee to | solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) | | | |
| American Optometric Association Po | litical Action | Committee | |
| Full Name (Last, First, Middle Initial) A. Dr Lance I Alpert | | | Date of Receipt |
| Mailing Address 195 Mohawk Drive | | | 05 17 2006 |
| City | State | Zip Code | Transaction ID: 24044833 |
| West Hartford | CT | 06117 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 500.00 |
| Name of Employer Self Employed | Occupatio | n f Optometry | 7 |
| Receipt For: | | e Year-to-Date ▼ | \dashv |
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| Other (specify) ▼ | | 500.00 | |
| | 0 0 | 0 0 0 0 0 0 0 | - |
| Full Name (Last, First, Middle Initial) 3. Dr Karen Riccio | | | Date of Receipt |
| Mailing Address 2683 Berwick Blvd | | | 05 17 2006 |
| City | State | Zip Code | Transaction ID: 24044835 |
| Columbus | OH | 43209-2917 | Amount of Each Receipt this Period |
| FEC ID number of contributing | | | 050.00 |
| federal political committee. | C | | 250.00 |
| N (5) | 10 | | |
| Name of Employer Self Employed | Occupatio | n | |
| Receipt For: | Aggregate | e Year-to-Date ▼ | - |
| Primary General | 7.99.094.0 | | 1 |
| Other (specify) ▼ | | 250.00 | |
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| Full Name (Last, First, Middle Initial) D. Dr David J Dexter | • | | Date of Receipt |
| Mailing Address 56 Lake View Drive | | | 05 17 2006 |
| City | State | Zip Code | Transaction ID: 24044836 |
| Oswego | NY | 13126-6014 | Amount of Each Receipt this Period |
| FEC ID number of contributing | | | |
| federal political committee. | C | | 500.00 |
| Name of Employer Self Employed | Occupatio | n | |
| Receipt For: | Aggregate | e Year-to-Date ▼ | |
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| SUBTOTAL of Receipts This Page (optional) | | ······ | 1230.00 |
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| 51 | CHEDULE A (FEC Form 3X) | Use separate schedule(s) | | (check only one) |
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| ۸r | ny information copied from such Reports and Sta | atomonte may | y not be cold or used by any person | |
| or | for commercial purposes, other than using the r | name and add | lress of any political committee to | o solicit contributions from such committee. |
| | NAME OF COMMITTEE (In Full) | | • • | |
| $ \rangle$ | American Optometric Association Politi | cal Action (| Committee | |
| | American Optometric Association Foliti | cai Action (| Sommittee | |
| | Full Name (Last, First, Middle Initial) | | | |
| A. | Dr Barry J Barresi | | | Date of Receipt |
| | Mailing Address 11 Clarendon Rd | | | M M / D D / Y Y Y Y |
| | | | | 05 17 2006 |
| | City | State | Zip Code | Transaction ID: 24044837 |
| | Belmont | MA | 02478 | Amount of Each Receipt this Period |
| | FEC ID number of contributing | | | 1000.00 |
| | federal political committee. | C | | 1000.00 |
| | | | | |
| | Name of Employer Self Employed | Occupation | | |
| | | | Optometry | |
| | Receipt For: | Aggregate | Year-to-Date ▼ | |
| | Primary General | | 1000.00 | 1 |
| | Other (specify) | | 1000.00 | |
| | | | | |
| ь | Full Name (Last, First, Middle Initial) | | | Data of Baselat |
| В. | Dr Steven L Compton | | | Date of Receipt |
| | Mailing Address 210 Monterey Road | | | 05 17 2006 |
| | City | State | Zip Code | |
| | • | | • | Transaction ID: 24044838 |
| | Franklin | KY | 42134 | Amount of Each Receipt this Period |
| | FEC ID number of contributing | C | | 500.00 |
| | federal political committee. | | | |
| | Name of Employer | Occupation | 1 | \neg |
| | Self Employed | | Optometry | |
| | Receipt For: | Aggregate | Year-to-Date ▼ | 7 |
| | Primary General | | | 7 |
| | Other (specify) ▼ | | 500.00 | |
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| _ | Full Name (Last, First, Middle Initial) | | | |
| C. | Dr Troy W Crist | | | Date of Receipt |
| | Mailing Address 1180 College Drive | | | M M / D D / Y Y Y Y |
| | | | | 05 17 2006 |
| | City | State | Zip Code | Transaction ID: 24044840 |
| | Madisonville | KY | 42431 | Amount of Each Receipt this Period |
| | FEC ID number of contributing | С | | 250.00 |
| | federal political committee. | <u> </u> | | 255.55 |
| | Name of Employer | Occupation | 1 | \dashv |
| | Self Employed | | Optometry | |
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| | Primary General | , .991 09010 | . 541 10 2410 ¥ | 7 |
| | Other (specify) | | 250.00 | |
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| 。 | UBTOTAL of Receipts This Page (optional) | | | 1750.00 |
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| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 24 / 44 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
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| Ar or | y information copied from such Reports and State for commercial purposes, other than using the na | ements may ame and add | not be sold or used by any persodress of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{\ \ }$ | NAME OF COMMITTEE (In Full) American Optometric Association Politic | al Action (| Committee | |
| Α. | Full Name (Last, First, Middle Initial) Dr Lisa Sanford A Howard Mailing Address 1302 Gloucester Ave City Middlesboro FEC ID number of contributing federal political committee. Name of Employer Self Employed Receipt For: Primary General Other (specify) | | Zip Code 40965-2213 Toptometry Year-to-Date ▼ 500.00 | Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| 3. | Full Name (Last, First, Middle Initial) Dr Wiley Curtis Mailing Address 3340 Thorntree Court City | State | Zip Code | Date of Receipt M M |
| | Arlington FEC ID number of contributing federal political committee. | TX | 76016-2065 | Amount of Each Receipt this Period 365.00 |
| | Name of Employer Self Employed Receipt For: Primary General Other (specify) ▼ | | Optometry Year-to-Date ▼ 365.00 | |
| C . | Full Name (Last, First, Middle Initial) Dr Cheryl Runkle Runkle Archer Mailing Address 216 Orange Drive City Wapakoneta FEC ID number of contributing federal political committee. | State OH | Zip Code 45895-1352 | Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | Name of Employer Self Employed Receipt For: Primary General Other (specify) ▼ | | Optometry Year-to-Date ▼ 500.00 | |
| s | UBTOTAL of Receipts This Page (optional) | | ····· | 1365.00 |
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| NAME OF COMMITTEE (In Full) | | | |
| American Optometric Association Pol | itical Action | Committee | |
| Full Name (Last, First, Middle Initial) A. Dr Joseph C Mallinger | | | Date of Receipt |
| Mailing Address 28417 Tricia PI | | | 05 / 20 / 4 2006 |
| City | State | Zip Code | Transaction ID: 24046108 |
| Escondido | CA | 92026-6666 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 500.00 |
| Name of Employer Self Employed | | f Optometry | |
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| Primary General Other (specify) ▼ | | 500.00 | |
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| Full Name (Last, First, Middle Initial) 3. Dr Gene D Calkins | • | | Date of Receipt |
| Mailing Address 1150 Capitol Dr #47 | | | 05 20 YYYYY 05 20 6 |
| City | State | Zip Code | 0 5 2 0 2 0 0 6 Transaction ID: 24046111 |
| San Pedro | CA | 90732 | Amount of Each Receipt this Period |
| FEC ID number of contributing | | 1 1 1 1 1 | |
| federal political committee. | C | | 365.00 |
| Name of Employer Self Employed | Occupatio | n f Optometry | |
| Receipt For: | | e Year-to-Date V | |
| Primary General | 33 13 | | 1 |
| Other (specify) ▼ | | 365.00 | |
| Full Name (Last, First, Middle Initial) Dr Thomas L Lim | | | Date of Receipt |
| Mailing Address 1136 Thorntree Court | | | 05 20 YYYY 2006 |
| City | State | Zip Code | Transaction ID: 24046115 |
| San Jose | CA | 95120 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 300.00 |
| Name of Employer Self Employed | Occupation Doctor of | n f Optometry | |
| Receipt For: | Aggregate | e Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 0 0 | 300.00 | |
| SUBTOTAL of Receipts This Page (optional) | 1 | | 1165.00 |
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| or | for commercial purposes, other than using the | name and add | lress of any political committee to | solicit contributions from such committee. |
| \setminus | NAME OF COMMITTEE (In Full) | | | |
| | American Optometric Association Politi | ical Action (| Committee | |
| Α. | Full Name (Last, First, Middle Initial) Dr Abie R Chadderdon | | | Date of Receipt |
| | Mailing Address 2005 Timberline Rd | | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City | State | Zip Code | Transaction ID: 24046174 |
| | <u>Marshalltown</u> | IA | 50158 | Amount of Each Receipt this Period |
| | | | 00100 | Amount of Each recopt this rende |
| | FEC ID number of contributing federal political committee. | C | | 125.00 |
| | Name of Employer Self Employed | Occupation | n Optometry | |
| | Receipt For: | | Year-to-Date ▼ | - |
| | Primary General | 7.99.094.0 | Tour to Bate V | 1 |
| | Other (specify) ▼ | | 216.25 | |
| | | | 0 0 0 0 0 0 0 | |
| В. | Full Name (Last, First, Middle Initial) Dr Connie C Long | | | Date of Receipt |
| | Mailing Address 40332 Grubbs Springs | Road | | M M / D D / Y Y Y Y |
| | | | | 05 15 2006 |
| | City | State | Zip Code | Transaction ID: 24047532 |
| | <u>Hamilton</u> | MS | 39746 | Amount of Each Receipt this Period |
| | FEC ID number of contributing | | | 150.00 |
| | federal political committee. | C | | 150.00 |
| | Name of Employer | Occupation | | _ |
| | Name of Employer Self Employed | | Optometry | |
| | Receipt For: | _ | Year-to-Date V | |
| | Primary General | Aggregate | Teal-10-Date | 1 |
| | Other (specify) | | 300.00 | |
| | | | | , |
| <u> </u> | Full Name (Last, First, Middle Initial) Dr Susan A Driscoll | | | Date of Receipt |
| | Mailing Address 717 St Dunstan Way | | | 05 30 2006 |
| | City | State | Zip Code | Transaction ID: 24065352 |
| | Winter Park | FL | 32792-4851 | Amount of Each Receipt this Period |
| | FEC ID number of contributing | | | |
| | federal political committee. | C | | 300.00 |
| | Name of Employer Self Employed | Occupation | | |
| | | | Optometry | |
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| | Primary General | | 300.00 | 1 |
| | Other (specify) ▼ | 0 0 | 300.00 | |
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| | | | | 575.00 |
| S | UBTOTAL of Receipts This Page (optional) | | | 373.00 |
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| SCHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 27/44 | | | | | | | | | |
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| NAME OF COMMITTEE (In Full) | | | | | | | | | | | | |
| American Optometric Association Polit | tical Action (| Committee | | | | | | | | | | |
| Full Name (Last, First, Middle Initial) A. Dr Frank Edward Puckett | | | Date of Receipt | | | | | | | | | |
| Mailing Address Po Box 509 | | | 05 30 7 2006 | | | | | | | | | |
| City | State | Zip Code | Transaction ID: 24065362 | | | | | | | | | |
| Monument | CO | 80132-0509 | Amount of Each Receipt this Period | | | | | | | | | |
| FEC ID number of contributing federal political committee. | C | | 500.00 | | | | | | | | | |
| Name of Employer Self Employed | Occupation O.D. | n | | | | | | | | | | |
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| Full Name (Last, First, Middle Initial) 3. Dr David P Guhl | | | Date of Receipt | | | | | | | | | |
| Mailing Address 5170 Wild Rose Lane | | | 05 31 YYYY 2006 | | | | | | | | | |
| City | State | Zip Code | Transaction ID: 24065785 | | | | | | | | | |
| Colorado Sprngs | CO | 90918 | Amount of Each Receipt this Period | | | | | | | | | |
| FEC ID number of contributing federal political committee. | C | | 500.00 | | | | | | | | | |
| Name of Employer | Occupation | n | 7 | | | | | | | | | |
| Self Employèd | | Optometry | | | | | | | | | | |
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| Other (specify) ▼ | 0 0 | 500.00 | | | | | | | | | | |
| Full Name (Last, First, Middle Initial) C. Dr Susan Betts | | | Date of Receipt | | | | | | | | | |
| Mailing Address 9576 Cedar Lane | | | 05 31 YYYYY 2006 | | | | | | | | | |
| City | State | Zip Code | Transaction ID: 24065786 | | | | | | | | | |
| Seaford | DE | 19973-8616 | Amount of Each Receipt this Period | | | | | | | | | |
| FEC ID number of contributing federal political committee. | C | | 365.00 | | | | | | | | | |
| Name of Employer Self Employed | | Optometry | | | | | | | | | | |
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| Primary General Other (specify) ▼ | 0 0 | 365.00 | | | | | | | | | | |
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| SCHEDULE A (FEC Form 3X) | | l lea caparata cabadula(a) | FOR LINE NUMBER: PAGE 28 / 44 |
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| ITEMIZED RECEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
| Any information copied from such Reports and S or for commercial purposes, other than using the | tatements may | y not be sold or used by any perso dress of any political committee to | |
| NAME OF COMMITTEE (In Full) American Optometric Association Poli | | | |
| Full Name (Last, First, Middle Initial) Dr William E Dolan Mailing Address 2900 High Point Rd | | | Date of Receipt M M |
| City <u>Greensboro</u> | State NC | Zip Code 27403-3150 | Transaction ID: 24065787 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 400.00 |
| Name of Employer Self Employed | Occupatio O.D. | | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 400.00 | |
| Full Name (Last, First, Middle Initial) Dr Blaine A Littlefield | ! | | Date of Receipt |
| Mailing Address 27 Wilderness Drive | | | 05 31 2006 |
| City | State | Zip Code | Transaction ID: 24065789 |
| <u>Freeport</u> | ME | 04032 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 1000.00 |
| Name of Employer Self Employed | Occupation Doctor of | n f Optometry | |
| Receipt For: Primary General Other (specify) | Aggregate | e Year-to-Date ▼ 1000.00 | |
| Full Name (Last, First, Middle Initial) Dr Samuel J Baron | I | | Date of Receipt |
| Mailing Address Po Box 1543 | | | 05 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State | Zip Code | Transaction ID: 24065790 |
| Golden | CO | 80402-1543 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | С | | 1000.00 |
| Name of Employer Self Employed | | f Optometry | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 1000.00 | |
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| SCHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 29 / 44 |
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| or for commercial purposes, other than using the | e name and add | dress of any political committee to | o solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) | | | |
| American Optometric Association Pol | itical Action | Committee | |
| Full Name (Last, First, Middle Initial) A. Dr Larry V Downer | | | Date of Receipt |
| Mailing Address 1419 Butte View Circle | е | | 05 31 2006 |
| City | State | Zip Code | Transaction ID: 24065794 |
| Emmett | ID | 83617-2757 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 240.00 |
| Name of Employer Self Employed | Occupation Doctor of | n f Optometry | |
| Receipt For: | | e Year-to-Date ▼ | |
| Primary General | 00 0 | | 7 |
| Other (specify) ▼ | | 240.00 | |
| Full Name (Last, First, Middle Initial) B. Dr S. Glenn Bailey | • | | Date of Receipt |
| Mailing Address 6311 Highland Drive | | | 05 25 2006 |
| City | State | Zip Code | Transaction ID: 24084213 |
| Huntington | WV | 25705 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 250.00 |
| Name of Employer Self Employed | Occupation Doctor of | n f Optometry | |
| Receipt For: | | e Year-to-Date ▼ | |
| Primary General | | 050.00 | 7 |
| Other (specify) ▼ | 0 0 | 250.00 | |
| Full Name (Last, First, Middle Initial) | • | | 5. (5.) |
| C. Dr Jack D Miller, Sr Mailing Address 1900 W Park | | | Date of Receipt |
| Mailing Address 1900 W Park | | | 05 30 2006 |
| City | State | Zip Code | Transaction ID: 24084224 |
| Eunice | LA | 70535 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 300.00 |
| Name of Employer Self Employed | Occupation O.D. | n | |
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| American Optometric Association Political | Action Committee | | | | | | | | | | |
| Full Name (Last, First, Middle Initial) | | | | Trans | actio | n ID: | 241553 | 306 | | | |
| A. Bank of America | | | | | of Dis | burse | | v v | V | V | |
| Mailing Address PO Box 790251 | | | | 0 ^M 5 | | ^D 0 | 1 ′ | 2 | 0 Ď 6 | | |
| , | itate Zip Code MO 63179 | | | Amou | ınt of | Each I | Disburse | ement | this P | eriod | 1 |
| Purpose of Disbursement | 03179 | | | | | | | | 30.0 | 0 | 7 |
| Bank of American Service Fee 05/01/2006 | | 00· | 1 | | | | | | | | _ |
| Candidate Name | | Categ Typ | | | | | | | | | |
| Office Sought: House Disburser Senate President | nent For: Primary General Other (specify) | | | Bank Fee 0 | | | an Ser | vice | | | |
| State: District: | | | | | | | | | | | |
| Full Name (Last, First, Middle Initial) Bank of America | | | | Date | | burse | 241553 ment | | | | |
| Mailing Address PO Box 790251 | | | | 0 ^M 5 | M / | 0 | 1 / | ž | 0 Ď 6 | Y | |
| , | itate Zip Code MO 63179 | | | Amou | ınt of | Each I | Disburse | ement | | | |
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| Bank of American Bank Fee 05/01/2006 Candidate Name | | 00 ⁻ Categ Typ | ory/ | | | | | | | | |
| Office Sought: House Disburser Senate President State: District: | nent For: Primary General Other (specify) ▼ | 71- | | Bank 05/01 | of A /200 | meric 6 | an Bar | ık Fe | e | | |
| Full Name (Last, First, Middle Initial) | | | | Trans | sactio | n ID: | 241550 |)13 | | | |
| Wachovia Non Corporate | | | | Date | | burse | | | | | |
| Mailing Address 1650 Tyson Blvd. | | | | o [™] 5 | М / | ^D 0 | 9 / | ž | 0 Ď 6 | Y | |
| , | itate Zip Code /A 22102 | | | Amou | ınt of | Each I | Disburse | ement | this P | eriod | |
| Purpose of Disbursement Wachovia Bank Fee 05/09/2006 | | 00 | 1 | L. | | | | | 455.7 | 5 | |
| Candidate Name | | Categ Typ | | | | | | | | | |
| Office Sought: House Senate President State: District: | nent For: Primary General Other (specify) ▼ | | | Wach 006 | novia | Bank | k Fee 0 | 5/09/ | /2- | | |
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| or | for commercial purposes, other than using the name | ne and address of any po | olitical c | omi | mit | tee to sol | icit cont | ribut | ions fr | om s | uch cor | nmittee | ! |
| $ \rangle$ | NAME OF COMMITTEE (In Full) | Action Committee | | | | | | | | | | | |
| V_{\perp} | American Optometric Association Politica | Action Committee | | | | | | | | | | | |
| Α. | Full Name (Last, First, Middle Initial) | | | | | | | | - | | 55303 | } | |
| Α. | Bank of America | | | | | | | of D | isburs | | it | V V | V |
| | Mailing Address PO Box 790251 | | | | | | o ^M 5 | | 1 | 5 | Ĺ. | ž 0 ŏ | 6 |
| | City St. Louis | State Zip Code MO 63179 | ! | | | | Amou | ınt o | f Each | Disk | ourseme | ent this | Period |
| | Purpose of Disbursement | 100 63179 | 1. | | | | | | | | | 22 | .17 |
| | Bank of American Bank Fee 05/15/2006 | | | | 00 | 1 | | | - | | 0 | | |
| | Candidate Name | | | Ca | iteg | jory/ | | | | | | | |
| | Office Occupies The Line of Pickers | | | | Гур | е | | | | | | | |
| | Office Sought: House Disburs Senate | sement For: Primary Gen | neral | | | | Bank 05/15 | | | can | Bank I | =ee | |
| | President | Other (specify) | | | | | 03/10 |)/ Z U | 00 | | | | |
| | State: District: | | | | | | | | | | | | |
| В. | Full Name (Last, First, Middle Initial) | | | | | | | | | _ | 37679 |) | |
| ٥. | Bank of America | | | | | | Date | of D | isburs | | | Y Y | Y |
| | Mailing Address PO Box 790251 | | | | | | 0 5 | | 1 | 8 | Ĺ. | žoŏ | 6 |
| | City | State Zip Code MO 63179 | • | | | | Amou | ınt o | f Each | Disb | ourseme | ent this | Period |
| | St. Louis MO 63179 Purpose of Disbursement | | | | | | | | | | , | 0 | .01 |
| | Bank of American Bank Fee 04/3/2006 | 1 | | • | - | | | | | | | | |
| | Candidate Name | | | | iteg Γyp | jory/ | | | | | | | |
| | Office Sought: House Disburs | ement For: | | | | | Rank | of A | Δmeri | can | Bank I | Fee | |
| | Senate | - · · - | neral | | | | 04/3/ | 2ÖÓ | 6 | oan | Dank | 00 | |
| | President State: District: | Other (specify) | | | | | | | | | | | |
| | Full Name (Last, First, Middle Initial) | | | | | | Trans | act | ion ID | . 241 | 66203 | } | |
| C. | Bank of America | | | | | | | | isburs | | | , | |
| | Mailing Address PO Box 790251 | | | | | | 0 ^M 5 | М | / D3 | 3 1 | / Y | ž 0 ŏ | 6 ^Y |
| | City | State Zip Code | ; | | | | Amou | ınt o | f Each | Disk | ourseme | ent this | Period |
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| | Bank of American Service Fee 05/31/2006 | | | | 00 | 1 | | - | - | | 0 | 0,12 | .00 |
| | Candidate Name | | | Ca | - | jory/ | | | | | | | |
| | · | ement For: | | | | | Rank | of 4 | Δmeri | can | Servic | e | |
| | Senate | _ ' | neral | | | | Fee C | 5/3 | 1/200 | 6 | 00. 110 | O | |
| | President State: District: | Other (specify) | | | | | | | | | | | |
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| or for commercial purposes, other than using the name | and address of any political co | ommi | ttee to s | Solicit con | tributi | ions tro | m sucn | comn | nittee | | |
| NAME OF COMMITTEE (In Full) American Optometric Association Political A | Action Committee | | | | | | | | | | |
| Full Name (Last, First, Middle Initial) A. HALPAC (Help America's Leaders PAC) | | | | Date | of Di | isburse | | | Y | Y | |
| Mailing Address 1155 21st Street, NW Suite 300 | | | | 0 ^M 5 | | Ō | 2 / | 2 | 0 Ď 6 | | |
| | State Zip Code DC 20036 | | | Amo | unt o | f Each | Disburs | - | | - | 7 |
| Purpose of Disbursement HALPAC (Help America's Leaders PAC) | | 0- | | | - | • | | . 5 | 0.000 | 0 | _ |
| Candidate Name | | Cate Ty | gory/ pe | | | | | | | | |
| President | nent For: Primary General Other (specify) ▼ | | | HAL ader | PAC s PA | (Help C) | Amerio | ca's l | _e- | | |
| State: District: Full Name (Last, First, Middle Initial) | | | | _ | | | | | | | |
| 3. Sali For Congress | | | | | | isburse | | | V * | V | |
| Mailing Address PO Box 71 | | 0.5 | | | | 1 | 2 / | 2 | 0 Ď 6 | | |
| • | State Zip Code D 83634 | | | | | f Each | Disburs | | | - | 7 |
| Purpose of Disbursement 2006 Primary Election | | 0 | | | | • | | . 2 | 500.0 | 0 | _ |
| Candidate Name Mr. William Sali | | Cate Ty | gory/ pe | | | | | | | | |
| President | nent For: 2006 Primary General Other (specify) | | | 2006 | Prir | mary E | Election | ı | | | |
| State: ID District: 1 Full Name (Last, First, Middle Initial) | | | | Tran | sacti | on ID: | 240337 | 701 | | | — |
| Citizens For Gillmor | | | | Date | of Di | isburse | | _ | | | |
| Mailing Address P.O. Box 150 | | | | 0 5 | М | 1 | 7 / | ž | 0 Ď 6 | Y | |
| • | State Zip Code OH 44861 | | | Amo | unt o | f Each | Disburse | | | | _ |
| Purpose of Disbursement 2006 General Election | | Q- | 11 | | | <u> </u> | | 1 | 0.000 | 0 | _ |
| Candidate Name Rep. Paul E. Gillmor | | Cate Ty | gory/ pe | | | | | | | | |
| | nent For: 2006 Primary X General Other (specify) | | | 2006 | Ger | neral E | Election | l | | | |
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| and address of any politica Action Committee | | 22 X 23 24 25 2 28a 28b 28c 29 3 In for the purpose of solicating contributions solicit contributions from such committee Transaction ID: 24034881 Date of Disbursement 05 M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | | | | |
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| Suite 233 State Zip Code Cho NY 11753 | | | | | | | |
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| City State Zip Code Richmond VA 23226 | | | | | | | |
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| | CHEDULE B (FEC Form 3X) | | erate schedule(s) | | | OR LIN | | BE | R: | | | | PAGE | 34 / | 44 | |
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| \setminus | NAME OF COMMITTEE (In Full) | | | | | | | | | | | | | | | |
| $ \rangle$ | American Optometric Association Political | Action Co | mmittee | | | | | | | | | | | | | |
| Α. | Full Name (Last, First, Middle Initial) Chafee for Senate | | | | | | Transaction ID: 24033696 Date of Disbursement | | | | | | | | | |
| | Mailing Address PO Box 623 | | | | | | 05 17 20 | | | | | | | | | |
| | City Providence | | Amount of Each Disbursement this Perio | | | | | | | | | t | | | | |
| | Purpose of Disbursement 2006 Primary Election | | | | Ō. | 11 | | | 0 | | | - | | 1000. | 00 | _ |
| | Candidate Name John H. Chafee | | | | ate Ty | gory/ pe | | | | | | | | | | |
| | | ement For: Primary Other (spe | 2006 General | | | 2006 Primary | | | | | уΕΙ | ectio | n | | | |
| | State: RI District: 0 Full Name (Last, First, Middle Initial) | | | | | | Tre | | ooti | ion | יחו | 24035 | 170 | | | |
| В. | Lucas For Congress | | | | | | _ | te c | | isbu | ırsen | | | YY | Y | |
| | Mailing Address Post Office Box 1726 | | 0 | 5 | | L | 1 7 | 7 | | ž 0 Ŏ | 6 | | | | | |
| | City Oklahoma City | State OK | Zip Code 73101 | | | | Amount of Each Disbur | | | | | | | | | t |
| | Purpose of Disbursement 2006 Primary Election | | | | 0 | 11 | | | - | - | | | | 1000. | 00 | _ |
| | Candidate Name Rep. Frank D. Lucas | Category/ Type | | | | | | | | | | | | | | |
| | - | ement For: Primary Other (spe | 2006 General | | | | 200 | 2006 Primary Election | | | | | | | | |
| | State: OK District: 3 | | | | | | | | | | | | | | | |
| C. | Full Name (Last, First, Middle Initial) Rush Holt For Congress | | | | | | | | | | ID: 2 irsen | 4035 nent | 5002 | | | |
| | Mailing Address PO Box 782 | | | | | | o | 5 | М | ′ | 17 | 7 | Y | ž 0 Ŏ | 6 ^Y | |
| | City Pennington | State NJ | Zip Code 08534 | | | | Am | ou | nt o | f Ea | ch C | isbur | seme | nt this | Perio | t |
| | Purpose of Disbursement 2006 Primary Election | | | | 0. | 11 | | | - | - | - | | | 1000. | 00 | _ |
| | Candidate Name Rep. Rush D. Holt | | | | ate Ty | gory/ pe | | | | | | | | | | |
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| \rangle | American Optometric Association Political | Action Co | mmittee | | | | | | | | | | | |
| | Full Name (Last, First, Middle Initial) | | | | | | Transa | actio | n ID: | 240372 | 92 | | | |
| ۹. | John T. Doolittle For Congress | | | | | | Date o | _ | | | | | | |
| | Mailing Address 2150 River Plaza Dr. #15 | 50 | | | | | 0 5 | / | ^D 1 | 8 / | ž | 0 Ď 6 | Y | |
| | • | State | Zip Code | | | | Amour | nt of E | Each | Disburse | emen | t this F | erio | į |
| | Sacramento | CA | 95833 | | | | | - | | | 2 | 2500.0 | 00 | П |
| | Purpose of Disbursement 2006 Primary Election | | | | 011 | | - | - | - | | | -000.0 | | _ |
| | Candidate Name Rep. John T. Doolittle | | | | egory/ ype | | | | | | | | | |
| | | ement For: Primary Other (spe | 2006 General | | | | 2006 F | Prima | ary E | Election | | | | |
| | Full Name (Last, First, Middle Initial) | | | | | | Transa | actio | n ID: | 240373 | 120 | | | |
| 3. | Jd Hayworth For Congress | | | | | | Date o | | | | ,20 | | | |
| | Mailing Address 14300 N. Northsight Blvd | d. #105 | | | | | 0 5 | / | 1 | 8 / | ^Y 2 | 0 Ď 6 | Υ | |
| | , | State AZ | Zip Code 85260 | | | | Amount of Each Disbursement this | | | | | t this F | erio | į |
| | Purpose of Disbursement 2006 Primary Election | | | |)11 | | <u></u> | _ | | | 1 | 0.000.0 | 00 | _ |
| | Candidate Name Rep. J.D. Hayworth | | | | tegory/ ype | | | | | | | | | |
| | - | ement For: Primary Other (spe | 2006 General | | | : | 2006 F | Prima | ary E | Election | | | | |
| — ک. | Full Name (Last, First, Middle Initial) Hulshof For Congress - District 09 Missour | ri | | | | | Transa Date o | | | 240373 ment | 346 | | | |
| | Mailing Address PO Box 1621 | | | | | | 0 ^M 5 N | _ ` | ^D 1 | D / | Ý Ž | 0 Ď 6 | Y | |
| | , | State MO | Zip Code 65205 | | | | Amour | nt of E | Each | Disburse | emen | t this F | 'erio | j |
| | Purpose of Disbursement 2006 General Election | | | | 011 | | | | | | 1 | 0.000.0 | 00 | _ |
| | Candidate Name Rep. Kenny C. Hulshof | | | Cat | egory/ ype | | | | | | | | | |
| | Office Sought: X House Senate President State: MO District: 9 | ement For: Primary Other (spe | 2006 X General cify) | | | | 2006 (| Gene | eral E | Election | | | | |
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| NAME OF COMMITTEE (In Full) | | | | | | | | | | |
| / American Optometric Association Politica | Il Action Committee | | | | | | | | | |
| Full Name (Last, First, Middle Initial) | | | | Trans | actio | n ID: | 240372 | 90 | | |
| Jim Gerlach For Congress Committee | | | | | of Disl | | | | | |
| Mailing Address PO Box 87 | | | | 0 ⁶ 5 | M / | ^D 1 | 8 / | Ž | 0 ď 6 | Y |
| City | State Zip Code | | | Amou | ınt of E | Each | Disburse | ment | this P | eriod |
| Uwchland | PA 19480 | | | - | | | | 2! | 500.0 | 0 |
| Purpose of Disbursement 2006 General Election | | 01 | 1 | | | | | | | |
| Candidate Name | | Cateo | | | | | | | | |
| Rep. James W. Gerlach | 2000 | Тур | e | | | | | | | |
| Office Sought: X House Disburs Senate | sement For: 2006 Primary X General | | | 2006 | Gene | eral E | lection | | | |
| President | Other (specify) ▼ | | | | | | | | | |
| State: PA District: 6 | | | | | | | | | | |
| Full Name (Last, First, Middle Initial) Committee To Re-Elect Trent Franks To | Congress | | | | actio | | 240373 | 19 | | |
| | Dongress | | | | OI DISI | | | / Y | Υ | Υ |
| Mailing Address 12416 N. 57th Drive | | | | 0 ^M 5 | | ^D 1 | 8 | 2 (| 0 Ď 6 | |
| City Glendale | State Zip Code AZ 85304 | | | Amount of Each Disbursement this | | | | | this P | eriod |
| Purpose of Disbursement 2006 Primary Election | | 01 | 1 | <u> </u> | | | | . 10 | 0.00 | 0 |
| Candidate Name Rep. Trent Franks | | Cateo | • | | | | | | | |
| Office Sought: X House Disburs | sement For: 2006 | | | 2006 | Drim | arv E | lection | | | |
| | C Primary General | | | 2006 | ГШП | ary 🗅 | lection | | | |
| President State: AZ District: 2 | Other (specify) ▼ | | | | | | | | | |
| Full Name (Last, First, Middle Initial) | | | | Trans | eaction | n ID: | 240373 | 47 | | |
| Schmidt For Congress Committee | | | | | of Dist | | | 71 | | |
| Mailing Address 771 Wards Corner Roa | b | | | 0 ^M 5 | M / | ^D 1 | 8 / Y | ž | 0 Ď 6 | Y |
| City | State Zip Code | | | Amou | ınt of E | Each I | Disburse | ment | this P | eriod |
| Loveland | OH 45140 | | | | - | | | 47 | 200.0 | ^ |
| Purpose of Disbursement Reported 06/2005 - Void - Wrong designat | | 01 | 1 | | - | - | - | -10 | 0.00 | U . |
| Candidate Name Jeannette Schmidt | | Categ Typ | gory/ | | | | | | | |
| | sement For: 2005 | . ,, | | | مانيد | | 05 17 | : | | |
| Senate | Primary General | | | Wron | rtea (g des | 16/20 signa | 05 - Vo tion | ola - | | |
| | C Other (specify) ▼ Special - Gener | | | | | | | | | |
| State. Of 1 District. 2 2003 3 | ppeciai - Genel | | | | | | | | | |
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| NAME OF COMMITTEE (In Full) | ic and address of any political co | minutee to St | mon continuutions II | om such committee | | | | | | | |
| American Optometric Association Politica | Action Committee | | | | | | | | | | |
| Full Name (Last, First, Middle Initial) | | | Transaction ID: | | | | | | | | |
| Friends Of Mark Foley | | | Date of Disburs | | | | | | | | |
| Mailing Address 1316 Lake Victoria Dr | | | 0 5 M / D 2 6 / Y 2 0 0 6 Y | | | | | | | | |
| City Lake Worth | State Zip Code FL 33461 | | Amount of Each | Disbursement this Period | | | | | | | |
| Purpose of Disbursement | 12 33401 | | | 1000.00 | | | | | | | |
| 2006 Primary Election | | 011 | | | | | | | | | |
| Candidate Name Rep. Mark A. Foley | | Category/ Type | | | | | | | | | |
| Senate President | ement For: 2006 Primary General Other (specify) | | 2006 Primary | Election | | | | | | | |
| State: FL District: 16 Full Name (Last, First, Middle Initial) | | | | 0.400.400.4 | | | | | | | |
| Blue Dog PAC | | | Transaction ID: Date of Disburs | ement | | | | | | | |
| Mailing Address 227 Massachusetts Ave Suite 101 | nue, N.E. | | 05 | 26 7 2006 | | | | | | | |
| City Washington | State Zip Code DC 20002 | | Amount of Each | Disbursement this Period | | | | | | | |
| Purpose of Disbursement | Г | 044 | | 5000.00 | | | | | | | |
| Event 5/10/06, Contributions to Federal Candidate Name | | 011 Category/ Type | | | | | | | | | |
| Office Sought: Senate President State: Disburs | ement For: Primary General Other (specify) ▼ | | Event 5/10/06, ons to Federal | , Contributi- PACS (204) | | | | | | | |
| Full Name (Last, First, Middle Initial) Friends Of John Boehner | | | Transaction ID: | | | | | | | | |
| - | | | | 2 6 Y 2 0 0 6 | | | | | | | |
| Mailing Address 7908-I Cincinnati Dayto | | | 0 5 2 | 2000 | | | | | | | |
| City West Chester | State Zip Code OH 45069 | | Amount of Each | Disbursement this Period | | | | | | | |
| Purpose of Disbursement 2006 General Election | | 011 | | 2500.00 | | | | | | | |
| Candidate Name Rep. John A. Boehner | | Category/ Type | | | | | | | | | |
| Office Sought: X House Senate President State: OH District: 8 | ement For: 2006 Primary X General Other (specify) | | 2006 General | Election | | | | | | | |
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| \vdash | NAME OF COMMITTEE (In Full) | | <u> </u> | | | | | | | | | | | | |
| $ \rangle$ | American Optometric Association Political | Action Co | mmittee | | | | | | | | | | | | |
| Α. | Full Name (Last, First, Middle Initial) Boswell For Congress | | | | | | | | | ID: 2 ursem | 24061 nent | 244 | | | |
| | Mailing Address PO Box 6220 | | | | | | 0 ^M 5 | М | / | 26 |) } | Y | ž o ŏ (| 3 Y | |
| | City Des Moines | State IA | Zip Code 50309 | | | | Amo | unt d | of Ea | ach D | isbur | | nt this | - | _ |
| | Purpose of Disbursement 2006 Primary Election | | | | 01 | 1 | | _ | _ | | _ | | 1500. | 00 | _ |
| | Candidate Name Rep. Leonard L. Boswell | | | | ate Ty | gory/ oe | | | | | | | | | |
| | | ement For: Primary Other (spe | 2006 General | | | | 2006 | Pri | maı | ry El | ectio | n | | | |
| | State: IA District: 3 Full Name (Last, First, Middle Initial) | | | | | | Tran | caol | ion | יחו | 24061 | 206 | | | |
| В. | KOMPAC | | | | | | Date | | Disbu | ırsen | nent | | Y Y | Y | |
| | Mailing Address P O B 20209 | | | | | | 0.5 | | L | 26 | 3 | 2 | ž 0 Ŏ 6 | 3 | |
| | City Alexandria | State VA | Zip Code 22320 | | | | Amo | unt d | of Ea | ach D | isbur | | nt this I | | |
| | Purpose of Disbursement Contributions to Federal PACS (204) Candidate Name | | | | 01 ate | gory/ | | | • | • | • | | 5000. | 00 | |
| | Office Sought: House Disburse Senate President State: District: | ement For: Primary Other (spe | General ♥ | | | | Cont PAC | ribu S (2 | ition 204) | ıs to | Fede | eral | | | |
| С. | Full Name (Last, First, Middle Initial) Norwood For Congress | | | | | | | | | ID: 2 ursen | 24061 nent | 245 | | | |
| | Mailing Address PO Box 499 | | | | | | 0 ^M 5 | М | / | ^D 2 6 | 3 / | Y | 2006 | 3 Y | |
| | City Evans | State GA | Zip Code 30809 | | | | Amo | unt d | of Ea | ach D | isbur | | nt this | | _ |
| | Purpose of Disbursement 2006 Primary Election 011 | | | | | | | | | | _ | | 1000. | 00 | _ |
| | Candidate Name Rep. Charles W. Norwood | | | | ate Ty | gory/ oe | | | | | | | | | |
| | | ement For: Primary Other (spe | 2006 General ecify) | | | | 2006 | Pri | maı | ry El | ectio | n | | | |
| s | UBTOTAL of Disbursements This Page (optional) | | | | | • | | | · | | | 7 | '500 .0 | 00 | ī |
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| | CHEDULE B (FEC Form 3X) | Use sepe | | | - | NE NUMBER: PAGE 39 / 44 only one) | | | | | | | 44 | |
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| | EMIZED DISBURSEMENTS | Detailed S | category of the Summary Page | | È | 21b 27 | 22 28a | X | 23 28b | | 24 28c | | 25 29 | 2 3 |
| | y Information copied from such Reports and Statem for commercial purposes, other than using the name | | | | | | | | | | | | | s |
| \vdash | NAME OF COMMITTEE (In Full) | | 71 | | | | | | | | | | | |
| $ \rangle$ | American Optometric Association Political | Action Co | mmittee | | | | | | | | | | | |
| Α. | Full Name (Last, First, Middle Initial) Pascrell For Congress Inc. | | | | | | Trans Date | | | | | 242 | | |
| | Mailing Address Pob 640 | | | | | | 0 ^M 5 | М | / D | 2 6 | ′ [| Y 2 | οŏε | S Y |
| | | State NJ | Zip Code 07511 | | | | Amou | int o | f Eac | h Di | sburs | emen | t this f | Period |
| | Purpose of Disbursement 2006 Primary Election | | | | 01 | 1 | L. | _ | | | | 1 | 000. | 00 |
| | Candidate Name Rep. William J. Pascrell, Jr. | | | | ate Ty | gory/ oe | | | | | | | | |
| | Senate X President | ment For: Primary Other (spe | 2006 General | | | | 2006 | Prir | mary | / Ele | ection | 1 | | |
| В. | State: NJ District: 8 Full Name (Last, First, Middle Initial) Earl Pomeroy For Congress | | | | | | Trans | | - | _ | | 565 | | |
| | Mailing Address P.O. Box 9336 | | | | | | 0 ^M 5 | М | / D | 2 ^D | ′ [| Ý Ž | οŏε | S Y |
| | • | State ND | Zip Code 58106 | | | | Amou | int o | f Eac | h Di | sburs | | t this f | |
| | Purpose of Disbursement 2006 Primary Election Candidate Name | | | | 01 | | | 0 | | • | • | . 1 | 500. | 00 |
| | Rep. Earl Pomeroy | | | | Ty _l | gory/ oe | | | | | | | | |
| | Senate X President | ment For: Primary Other (spe | 2006 General | | | | 2006 | Prir | mary | / Ele | ection | 1 | | |
| | State: ND District: 1 Full Name (Last, First, Middle Initial) | | | | | | Trans | ooti | on II | D. 2 | 1061 | 242 | | |
| C. | Snyder For Congress Campaign Committee | ee | | | | | Date | | isbur | sem | ent | | Y | Y |
| | Mailing Address PO Box 250998 | | | | | | | | L | 26 | | . 2 | 0 ŏ 6 | 5 |
| | Little Rock | State AR | Zip Code 72225 | | | | Amou | int o | f Eac | h Di | sburs | | t this f | Period |
| | Purpose of Disbursement 2006 Primary Election Candidate Name | 01 | | | | - | • | • | | 000. | 00 | | | |
| | Rep. Vic Snyder | ment For: | 2006 | | Ty _l | gory/ oe | | | | | | | | |
| | | Primary Other (spe | General | | | | 2006 | Prir | mary | / Ele | ection | 1 | | |
| s | UBTOTAL of Disbursements This Page (optional) . | | | | | • | | | | | | 3 | 500.0 | 00 |
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| | SCHEDULE B (FEC Form 3X) | | Use seperate schedule(s) | | | OR LINE | NE NUMBER: PAGE 40 / 44 | | | | | | | |
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| | EMIZED DISBURSEMENTS | Detailed | category of the Summary Page | | È | 21b 27 | 22 28a | X | 23 28b | | 24 28c | 25 29 | | 26 30b |
| | y Information copied from such Reports and Statem for commercial purposes, other than using the name | | | | | | | | | | | | | |
| \vdash | NAME OF COMMITTEE (In Full) | | | | | | | | | | | | | |
| $ \rangle$ | American Optometric Association Political | Action Co | mmittee | | | | | | | | | | | |
| Α. | Full Name (Last, First, Middle Initial) Rob Bishop For Congress | | | | | | Trans Date | | | | 06124 nt | 6 | | |
| | Mailing Address PO Box 2004 | | | | | | 0 ^M 5 | М | / D | 2 6 | / Y | žoŏ | 6 ^Y | |
| | | State UT | Zip Code 84302 | | | | Amou | int o | f Eacl | n Dis | bursen | nent this | Period | _ |
| | Purpose of Disbursement 2006 Primary Election | | | | 01 | 1 | | | | | | 2000 | .00 | |
| | Candidate Name Rep. Robert Bishop | | | С | ate Typ | gory/ pe | | | | | | | | |
| | Senate X President | ment For: Primary Other (spe | 2006 General | | | | 2006 | Prir | mary | Ele | ction | | | |
| | State: UT District: 1 Full Name (Last, First, Middle Initial) | | | | | | Trans | acti | on ID | . 24 | 06156 | 3 | | |
| В. | Kevin Mccarthy For Congress | | | | | | Date | | isburs | eme | | ž 0 č | Y | |
| | Mailing Address 455 Capitol Mall Suite 80 | | | | | | 0 5 | | | 26 | | | | |
| | Sacramento | State CA | Zip Code 95814 | | | | Amou | int o | f Eacl | n Dis | bursen | nent this | | 7 |
| | Purpose of Disbursement 2006 Primary Election | | | | 01 | | | | - | • | | 2000 | .00 | _ |
| | Candidate Name Mr. Kevin McCarthy | | | С | ate Typ | gory/ oe | | | | | | | | |
| | Senate X President | ment For: Primary Other (spe | 2006 General | | | | 2006 | Prir | mary | Ele | ction | | | |
| | State: CA District: 22 Full Name (Last, First, Middle Initial) | | | | | | | | | | 00477 | | | |
| C. | Jeb Bradley For Congress | | | | | | Date | | isburs | eme | 06477 nt | | V | |
| | Mailing Address 645 South Main Street | | | | | | | | ´ L ; | 3 0 | Ľ | žoŏ | 6 | |
| | | State NH | Zip Code 03894 | | | | Amou | int o | f Eacl | n Dis | bursen | nent this | | 7 |
| | Purpose of Disbursement 2006 General Election 011 | | | | | | | | - | 1 | | 2000 | .00 | _ |
| | Candidate Name Mr. Jeb Bradley | | | С | ate Typ | gory/ oe | | | | | | | | |
| | Office Sought: X House Senate President State: NH District: 1 | ment For: Primary Other (spe | 2006 X General ecify) ▼ | | | | 2006 | Ger | neral | Ele | ction | | | |
| ٩ | UBTOTAL of Disbursements This Page (optional) . | | | | | • | | | * | | • | 6000 | .00 | 7 |
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| SCHEDULE B (FECFOIIII 3X) | Use seperate schedule(s) | FOR LINE | | GE 41 / 44 |
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| ITEMIZED DISBURSEMENTS | for each category of the Detailed Summary Page | (check only 21b 27 | 22 X 23 24 28a 28b 28c | 25 26 29 30b |
| Any Information copied from such Reports and Statem or for commercial purposes, other than using the name | | | | |
| NAME OF COMMITTEE (In Full) American Optometric Association Political | | | | |
| Full Name (Last, First, Middle Initial) A. Andrews For Congress Committee | | | Transaction ID: 2408339 Date of Disbursement | |
| Mailing Address 215 Fourth Avenue Suite 200 | | | 05 7 3 1 7 | ž 0 0 6 ° |
| | State Zip Code NJ 08035 | | Amount of Each Disbursem | |
| Purpose of Disbursement 2006 Primary Election | | 011 | | 1000.00 |
| Candidate Name Rep. Robert E. Andrews | C | Category/ Type | | |
| | ment For: 2006 Primary General Other (specify) | | 2006 Primary Election | |
| Full Name (Last, First, Middle Initial) A Lot Of People Who Support Jeff Bingam | an | | Transaction ID: 2411055 Date of Disbursement | 2 |
| Mailing Address PO Box 16210 | | | M M / D D / Y O 5 3 1 | ž 0 0 6 ° |
| | State Zip Code | | Amount of Each Disbursem | |
| Albuquerque | NM 87191 | | Amount of Each Disbursen | 5000.00 |
| Purpose of Disbursement 2006 Primary Election | | 011 | | 3000.00 |
| Candidate Name Sen. Jeff Bingaman | | Category/ Type | | |
| | ment For: 2006 Primary General Other (specify) | | 2006 Primary Election | |
| Full Name (Last, First, Middle Initial) | | | Transaction ID: 2408369 | 8 |
| Norwood For Congress | | | Date of Disbursement | <u>Y . Y . Y</u> |
| Mailing Address PO Box 499 | | | 05 31 | ž 0 0 6 ° |
| , | State Zip Code GA 30809 | | Amount of Each Disbursem | |
| Purpose of Disbursement 2006 Primary Election | | 011 | | 1000.00 |
| Candidate Name Rep. Charles W. Norwood | C | Category/ Type | | |
| X X | ment For: 2006 Primary General Other (specify) | | 2006 Primary Election | |
| SUBTOTAL of Disbursements This Page (optional) | | ▶ | | 7000.00 |
| TOTAL This Period (last page this line number only) | | | | |

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| TEMIZED DISBURSEMENTS | for each category of the Detailed Summary Page | 21b 27 | 22 X 28a | | 24 28c | 25 29 | 26 30b |
| Any Information copied from such Reports and Statem or for commercial purposes, other than using the name | | | | | | | |
| NAME OF COMMITTEE (In Full) | and address of any political col | mmuee to St | mon continuu | uona nom St | JOH COHIII | iiiii ce | |
| American Optometric Association Political | Action Committee | | | | | | |
| Full Name (Last, First, Middle Initial) | | | | ion ID: 240 | | | |
| Ros-Lehtinen For Congress | | | | oisbursemen | | · v · \ | 7 |
| Mailing Address P O Box 52-2784 | | | 0 5 | ['] 3 1 | 2 | 0 0 6 | |
| | State Zip Code FL 33152 | | Amount o | of Each Disb | ursemen | t this Pe | eriod |
| Purpose of Disbursement | FL 33152 | | | | 1 | 000.00 |) |
| Replace check 9213/reported 9/05 | | 011 | | | | | |
| Candidate Name Rep. Ileana Ros-Lehtinen | C | Category/ Type | | | | | |
| X | ment For: 2006 Primary General Other (specify) | | Replace ed 9/05 | check 921 | 3/report | t- | |
| State: FL District: 18 | Other (specify) | | | | | | |
| Full Name (Last, First, Middle Initial) | | | Transact | ion ID: 241 | 65987 | | |
| Ros-Lehtinen For Congress | | | | isbursemen | | | _ |
| Mailing Address P O Box 52-2784 | | | 0 5 | 31 | Ž Ž | 0 0 6 | |
| , | State Zip Code FL 33152 | | Amount o | of Each Disb | ursemen | t this Pe | eriod |
| Purpose of Disbursement | Г | | L | | -1 | 000.00 |) |
| Reported 9-5 -Void - Bank lost Check Candidate Name | | 011 Category/ | | | | | |
| Rep. Ileana Ros-Lehtinen | | Type | | | | | |
| President | ment For: 2006 Primary General Other (specify) ▼ | | Reported lost Che | d 9-5 -Voic ck | I - Bank | | |
| State: FL District: 18 | | | | | | | |
| Full Name (Last, First, Middle Initial) Hawkeye PAC | | | | ion ID: 240 Disbursemen | | | |
| Mailing Address P.O. Box 7255 | | | 0 5 | 31 | Ž 2 | 0 0 6 | |
| , | State Zip Code A 50309 | | Amount o | of Each Disb | ursemen | t this Pe | eriod |
| Purpose of Disbursement Hawkeye PAC | | 011 | | | 5 | 5000.00 |) |
| Candidate Name | C | Category/ Type | | | | | |
| Office Sought: House Senate President State: District: | ment For: Primary General Other (specify) ▼ | | Hawkeye | PAC | | | |
| SUBTOTAL of Disbursements This Page (optional) . | | | | | 5 | 000.00 | |
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| TOTAL This Period (last page this line number only) | | | | | | | |

| S | CHEDULE B (FEC Form 3X) | Use seperate schedule(s) | | NUMBER: PAGE 43/44 |
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| IT | EMIZED DISBURSEMENTS | for each category of the Detailed Summary Page | (check onl | y one) 22 X 23 24 25 26 28a 28b 28c 29 30b |
| | y Information copied from such Reports and Sta for commercial purposes, other than using the n | | | |
| / | NAME OF COMMITTEE (In Full) | | | |
| | American Optometric Association Politic | cal Action Committee | | |
| | Full Name (Last, First, Middle Initial) | | | Transaction ID: 24083614 |
| ۹. | COLDPAC | | | Date of Disbursement |
| | Mailing Address P O BOX 40385 | | | 05 7 3 1 7 2 0 0 6 |
| | City | State Zip Code | | Amount of Each Disbursement this Period |
| | Washington | DC 20016 | | 1000.00 |
| | Purpose of Disbursement COLDPAC Leadership Pac | 011 | 1000.00 | |
| | Candidate Name | | Category/ Type | |
| | Office Sought: House Disbu | ursement For: | | COLDPAC Leadership Pac |
| | Senate | Primary General | | COLDFAC Leadership Fac |
| | President | Other (specify) | | |
| | State: District: | | | |

| SUBTOTAL of Disbursements This Page (optional) | <u> </u> | 1000.00 |
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| TOTAL This Period (last page this line number only) | • | 63000.00 |

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Form/Schedule: **F3XA**Transaction ID:

The committee (AOA-PAC) moved from manual processing of credit card contributions to on line electronic processing. The bank applied all American Express transactiions to someone else's account.