07/20/2005 11 : 41

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)

ADDRESS (number and street) ▼ 655 Beach Street

Check if different than previously reported. (ACC)

CITY ▲ San Francisco STATE ▲ CA ZIPCODE ▲ 94109

2. **FEC IDENTIFICATION NUMBER** ▼

C00196246

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

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report(Q1)

July 15 Quarterly Report(Q2)

October 15 Quarterly Report(Q3)

January 31 Quarterly Report(YE)

July 31 Mid-Year Report(Non-election Year Only) (MY)

Termination Report (TER)

(b) Monthly Report Due On:

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

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

Election on in the State of

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

Election on in the State of

5. Covering Period 03 01 2005 through 03 31 2005

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 Steve Rausch

Signature of Treasurer Electronically Filed by Steve Rausch Date 07 19 2005

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

Office Use Only							

FEC FORM 3X
(Rev. 02/2003)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

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

Report Covering the Period: From: 03 01 2005 To: 03 31 2005

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2005		313215.30
(b) Cash on Hand at Begining of Reporting Period	278031.93	
(c) Total Receipts (from Line 19)	16751.92	64336.14
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	294783.85	377551.44
7. Total Disbursements (from Line 31)	54359.26	137126.85
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	240424.59	240424.59
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)

Report Covering the Period: From: 03 01 2005 To: 03 31 2005

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)	15916.25	54556.25
(ii) Unitemized	778.75	9264.75
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	16695.00	63821.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ▶	16695.00	63821.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	56.92	515.14
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	16751.92	64336.14
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	16751.92	64336.14

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	359.26	2126.85
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)) ▶	359.26	2126.85
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	54000.00	135000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26. Loan Repayments Made	0.00	0.00
27. Loans Made	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) ▶	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	54359.26	137126.85
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)	54359.26	137126.85

DETAILED SUMMARY PAGE

of Disbursements

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

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	16695.00	63821.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	16695.00	63821.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	359.26	2126.85
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	359.26	2126.85

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 25
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

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

A.
Full Name (Last, First, Middle Initial): Steven Avner
Mailing Address: 193 Viscount Drive
City: Williamsville | State: NY | Zip Code: 14221-1771
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 03 02 2005
Transaction ID: 5ATN6Y44AN27
Amount of Each Receipt this Period: 500.00
PACWEB GENERATED CONTRIBUTION

B.
Full Name (Last, First, Middle Initial): Michael Belin
Mailing Address: 156 Thornberry Lane
City: Rensselaer | State: NY | Zip Code: 12144-8448
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 365.00
Date of Receipt: 03 16 2005
Transaction ID: 72NKQ0015386
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C.
Full Name (Last, First, Middle Initial): Michael Bloome
Mailing Address: Houston Eye Associates, 2855 Gramercy Street
City: Houston | State: TX | Zip Code: 77025-1635
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 375.00
Date of Receipt: 03 06 2005
Transaction ID: 55446-951B7014341355
Amount of Each Receipt this Period: 125.00
PAC

SUBTOTAL of Receipts This Page (optional) ..... ▶ 990.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 25
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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

A.
Full Name (Last, First, Middle Initial): Steven Bodine
Mailing Address: Retina Consultations, 915 Palmer Road
City: Bronxville | State: NY | Zip Code: 10708-3304
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 03 11 2005
Transaction ID: 55446-04085940122604
Amount of Each Receipt this Period: 250.00
PAC

B.
Full Name (Last, First, Middle Initial): Donald Cinelli
Mailing Address: 600 Pavonia Avenue, Sixth Floor
City: Jersey City | State: NJ | Zip Code: 07306-2929
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 03 31 2005
Transaction ID: 776XVT917363
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

C.
Full Name (Last, First, Middle Initial): Gary Cowen
Mailing Address: Suite 3200, 1350 S Main Street
City: Fort Worth | State: TX | Zip Code: 76104-7811
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 750.00
Date of Receipt: 03 06 2005
Transaction ID: 55446-093D7497739791
Amount of Each Receipt this Period: 250.00
PAC

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1000.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 25
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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)

A.
Full Name (Last, First, Middle Initial)
Erich Bryan Gross
Mailing Address Comes Consultants of Nashville
2011 Murphy Avenue Suite 602
City: Nashville State: TN Zip Code: 37203-2023
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 03 16 2005
Transaction ID: 72NKQ0716833
Amount of Each Receipt this Period: 1000.00
Batch Tool - PAC

B.
Full Name (Last, First, Middle Initial)
Allan Jensen
Mailing Address Suite 426
200 E 33rd Street
City: Baltimore State: MD Zip Code: 21218-3322
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 03 31 2005
Transaction ID: 776XVT628060
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

C.
Full Name (Last, First, Middle Initial)
Mark Johnson
Mailing Address 1824 Island Way
City: Osprey State: FL Zip Code: 34229-9321
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 375.00

Date of Receipt: 03 15 2005
Transaction ID: 55446-8772729754448D
Amount of Each Receipt this Period: 125.00
PAC

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1625.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 25
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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)

A.
Full Name (Last, First, Middle Initial)
Randolph Johnston
Mailing Address Cheyenne Eye Clinic
1300 E 20th Street
City: Cheyenne State: WY Zip Code: 82001-4021
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 03 08 2005
Transaction ID: 72NE2Z231672
Amount of Each Receipt this Period: 250.00
Batch Tool - PAC

B.
Full Name (Last, First, Middle Initial)
Gregory Kenny
Mailing Address Suite 103D
2300 N Mayfair Road
City: Milwaukee State: WI Zip Code: 53226-1505
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 365.00

Date of Receipt: 03 16 2005
Transaction ID: 72NKPC366034
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C.
Full Name (Last, First, Middle Initial)
Stephen Lane
Mailing Address 280 N Smith Avenue
Suite 640
City: St. Paul State: MN Zip Code: 55102-2424
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 03 11 2005
Transaction ID: 5572T7YFGN273
Amount of Each Receipt this Period: 500.00
PACWEB GENERATED CONTRIBUTION

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

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 25
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)

A.
Full Name (Last, First, Middle Initial)
Elbert Magoon
Mailing Address 800 McKinley Avenue Northwest
City: Canton State: OH Zip Code: 44703-2463
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 03 31 2005
Transaction ID: 776XVT644532
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

B.
Full Name (Last, First, Middle Initial)
Timothy Malone
Mailing Address 731-F Walker Road
City: Great Falls State: VA Zip Code: 22066-2834
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 365.00
Date of Receipt: 03 16 2005
Transaction ID: 72NKPC228925
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C.
Full Name (Last, First, Middle Initial)
Richard Mills
Mailing Address Suite 1124
1221 Madison Street
City: Seattle State: WA Zip Code: 98104-3588
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 365.00
Date of Receipt: 03 16 2005
Transaction ID: 72NKPC327225
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

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

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 25
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[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)

A.
Full Name (Last, First, Middle Initial)
David Pao
Mailing Address Suite 201
1018 Street Road
City: Southampton State: PA Zip Code: 18966-4221
FEC ID number of contributing federal political committee: C
Name of Employer
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 03 15 2005
Transaction ID: 72NIBL153624
Amount of Each Receipt this Period: 1000.00
Batch Tool - PAC

B.
Full Name (Last, First, Middle Initial)
David Parke
Mailing Address Dean A McGee Eye Inst
608 Stanton L Young Blv
City: Oklahoma City State: OK Zip Code: 73104-5014
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 03 16 2005
Transaction ID: 72NKQ0021679
Amount of Each Receipt this Period: 1000.00
Batch Tool - PAC

C.
Full Name (Last, First, Middle Initial)
William Penland
Mailing Address the Eye Group of Southern Indiana
1020 West Buena Vista R
City: Evansville State: IN Zip Code: 47710
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 03 31 2005
Transaction ID: 5H3ODH41Y6778
Amount of Each Receipt this Period: 500.00
PACWEB GENERATED CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 2500.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 25
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)

A.
Full Name (Last, First, Middle Initial): William Rich
Mailing Address: Suite 808, 6231 Leesburg Pike
City: Falls Church State: VA Zip Code: 22044-2102
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 2500.00
Date of Receipt: 03 14 2005
Transaction ID: 72NHD8671788
Amount of Each Receipt this Period: 2500.00
Batch Tool - PAC

B.
Full Name (Last, First, Middle Initial): Joem Solau
Mailing Address: Key Lions Eye Center, 301 E Muhammad Ali
City: Louisville State: KY Zip Code: 40202-1511
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 273.75
Date of Receipt: 03 15 2005
Transaction ID: 55446-77341860532761
Amount of Each Receipt this Period: 91.25
PAC

C.
Full Name (Last, First, Middle Initial): John Stachechulis
Mailing Address: 282 Neil Avenue
City: Columbus State: OH Zip Code: 43215-2382
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 365.00
Date of Receipt: 03 29 2005
Transaction ID: 5FWUBEWFU677B
Amount of Each Receipt this Period: 365.00
PACWEB GENERATED CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ..... ▶ 2956.25

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 25
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

A.
Full Name (Last, First, Middle Initial): Trexler Topping
Mailing Address: Suite 800, 50 Staniford Street
City: Boston State: MA Zip Code: 02114-2517
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 03 29 2005
Transaction ID: 5FWV35JHU6777
Amount of Each Receipt this Period: 1000.00
PACWEB GENERATED CONTRIBUTION

B.
Full Name (Last, First, Middle Initial): Scott Utley
Mailing Address: 1339 Spencer Rd. W
City: St. Paul State: MN Zip Code: 55108-5206
FEC ID number of contributing federal political committee: C
Name of Employer: St. Paul Eye Clinic
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 03 31 2005
Transaction ID: 5H3PEUN2Y6772
Amount of Each Receipt this Period: 500.00
PACWEB GENERATED CONTRIBUTION

C.
Full Name (Last, First, Middle Initial): James Vender
Mailing Address: 910 East Willow Grove Avenue
City: Wyndmoor State: PA Zip Code: 19038-7910
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 03 04 2005
Transaction ID: 72NBYL862655
Amount of Each Receipt this Period: 1000.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ..... ▶ **2500.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 25
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

A.
Full Name (Last, First, Middle Initial): Ruth Williams
Mailing Address: Wheaton Eye Clinic, 2015 North Main Street
City: Wheaton | State: IL | Zip Code: 60187-3152
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 03 22 2005
Transaction ID: G3L295499161
Amount of Each Receipt this Period: 250.00
Batch Tool - PAC

B.
Full Name (Last, First, Middle Initial): Charles Zacks
Mailing Address: Maine Eye Center, 15 Lowell Street
City: Portland | State: ME | Zip Code: 04102-2748
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 03 27 2005
Transaction ID: 5EPU8V1WS677R
Amount of Each Receipt this Period: 250.00
PAC\WEB GENERATED CONTRIBUTION

C.
Full Name (Last, First, Middle Initial): Harry Zink
Mailing Address: 3519 Friendsville Road
City: Wooster | State: OH | Zip Code: 44691-1241
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 03 14 2005
Transaction ID: 72NHD6729111
Amount of Each Receipt this Period: 1000.00
Batch Tool - PAC

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

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 25
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

A. Full Name (Last, First, Middle Initial)
Aras Zlotos

Mailing Address Assoc Ophthal
219 N Hammes

City: Joliet
State: IL
Zip Code: 60435-8114

FEC ID number of contributing federal political committee: C

Name of Employer: self
Occupation: Ophthalmologist

Receipt For:
Primary General
Other (specify)

Aggregate Year-to-Date: 500.00

Date of Receipt: 03 31 2005

Transaction ID: 776XVT772557

Amount of Each Receipt this Period: 500.00

Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) 500.00

TOTAL This Period (last page this line number only) 15916.25

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

[X] 21b	[ ] 22	[ ] 23	[ ] 24	[ ] 25	[ ] 26
[ ] 27	[ ] 28a	[ ] 28b	[ ] 28c	[ ] 29	[ ] 30b

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

Full Name (Last, First, Middle Initial)
A. Union Bank

Mailing Address 400 California Street

City: San Francisco
State: CA
Zip Code: 94104

Purpose of Disbursement
Bank charges 3/05

Candidate Name

Category/Type

Office Sought: House / Senate / President
State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: 1425080504193415881
Date of Disbursement
03 / 31 / 2005

Amount of Each Disbursement this Period
359.26

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 359.26

TOTAL This Period (last page this line number only) ..... ▶ 359.26

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

☐ 21b	☐ 22	☒ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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

A.
Full Name (Last, First, Middle Initial): Cantor for Congress
Mailing Address: PO Box 17813
City: Richmond | State: VA | Zip Code: 23226
Purpose of Disbursement: 2006 Primary
Candidate Name: Cantor Eric
Category/Type
Office Sought: X House / Senate / President
State: VA District: 07
Disbursement For: 2006 X Primary / General / Other (specify)
Transaction ID: 9091490503165579429
Date of Disbursement: 03 / 17 / 2005
Amount of Each Disbursement this Period: 1000.00

B.
Full Name (Last, First, Middle Initial): Charles Boustany Jr. for Congress
Mailing Address: Post Office Box 80126
City: Lafayette | State: LA | Zip Code: 70508
Purpose of Disbursement: 2006 Primary
Candidate Name: Boustany Charles
Category/Type
Office Sought: X House / Senate / President
State: LA District: 07
Disbursement For: 2006 X Primary / General / Other (specify)
Transaction ID: 7610840503103114198
Date of Disbursement: 03 / 10 / 2005
Amount of Each Disbursement this Period: 2500.00

C.
Full Name (Last, First, Middle Initial): Committee To Re-Elect Vito Fossella
Mailing Address: PO Box 131403
PO Box 060246
City: Staten Island | State: NY | Zip Code: 10313
Purpose of Disbursement: 2006 Primary
Candidate Name: Fossella Vito
Category/Type
Office Sought: X House / Senate / President
State: NY District: 13
Disbursement For: 2006 X Primary / General / Other (specify)
Transaction ID: 1547990503015494932
Date of Disbursement: 03 / 01 / 2005
Amount of Each Disbursement this Period: 2500.00

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

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

☐ 21b	☐ 22	☒ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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

A.
Full Name (Last, First, Middle Initial): Committee To Re-Elect Vito Fossella
Mailing Address: PO Box 131403, PO Box 060248
City: Staten Island State: NY Zip Code: 10313
Purpose of Disbursement: 2006 Primary
Candidate Name: Fossella Vito
Category/Type
Office Sought: X House / Senate / President
State: NY District: 13
Disbursement For: 2006 X Primary / General / Other (specify)
Transaction ID: 9795430503254999593
Date of Disbursement: 03 / 25 / 2005
Amount of Each Disbursement this Period: 2500.00

B.
Full Name (Last, First, Middle Initial): David Scott for Congress
Mailing Address: 162 Hurt Street Northeast
City: Atlanta State: GA Zip Code: 30307
Purpose of Disbursement: 2006 Primary
Candidate Name: Scott David
Category/Type
Office Sought: X House / Senate / President
State: GA District: 13
Disbursement For: 2006 X Primary / General / Other (specify)
Transaction ID: 4037070503165561114
Date of Disbursement: 03 / 17 / 2005
Amount of Each Disbursement this Period: 5000.00

C.
Full Name (Last, First, Middle Initial): Democratic Congressional Campaign Committee
Mailing Address: 430 South Capitol Street Southeast, 2nd Floor
City: Washington State: DC Zip Code: 20003
Purpose of Disbursement: 2005 Contribution
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District
Disbursement For: Primary / General / Other (specify)
Transaction ID: 8473520503165589140
Date of Disbursement: 03 / 17 / 2005
Amount of Each Disbursement this Period: 2500.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **10000.00**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

☐ 21b	☐ 22	☒ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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

A.
Full Name (Last, First, Middle Initial): Democratic Senatorial Campaign Committee
Mailing Address: 120 Maryland Avenue Northeast
City: Washington State: DC Zip Code: 20002
Purpose of Disbursement: 2005 Contribution
Candidate Name:
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: D2563505031031331 14
Date of Disbursement: 03 / 10 / 2005
Amount of Each Disbursement this Period: 5000.00

B.
Full Name (Last, First, Middle Initial): Ensign for Senate
Mailing Address: PO Box 26568
City: Las Vegas State: NV Zip Code: 89126
Purpose of Disbursement: 2006 Primary
Candidate Name: Ensign John
Category/Type
Office Sought: House / X Senate / President
State: NV District: 00
Disbursement For: 2006 X Primary / General / Other (specify)
Transaction ID: B627520503283247557
Date of Disbursement: 03 / 29 / 2005
Amount of Each Disbursement this Period: 2500.00

C.
Full Name (Last, First, Middle Initial): Friends of Dave Weldon
Mailing Address: PO Box 968
City: Melbourne State: FL Zip Code: 32902
Purpose of Disbursement: 2006 Primary
Candidate Name: Weldon Dave
Category/Type
Office Sought: X House / Senate / President
State: FL District: 15
Disbursement For: 2006 X Primary / General / Other (specify)
Transaction ID: 2455670503015479135
Date of Disbursement: 03 / 01 / 2005
Amount of Each Disbursement this Period: 2500.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **10000.00**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

☐ 21b	☐ 22	☒ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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

A.
Full Name (Last, First, Middle Initial): Friends of Mike Ferguson
Mailing Address: C/O Ron Gravino PO Box 225
City: Colonia | State: NJ | Zip Code: 07067
Purpose of Disbursement: 2006 Primary
Candidate Name: Ferguson Mike
Category/Type
Office Sought: X House / Senate / President
State: NJ District: 07
Disbursement For: 2006 X Primary / General / Other (specify)
Transaction ID: 5430500503254989593
Date of Disbursement: 03 / 25 / 2005
Amount of Each Disbursement this Period: 1000.00

B.
Full Name (Last, First, Middle Initial): Friends of Roy Blunt
Mailing Address: PO Box 50100 PO Box 50100
City: Springfield | State: MO | Zip Code: 65805
Purpose of Disbursement: 2006 Primary
Candidate Name: Blunt Roy
Category/Type
Office Sought: X House / Senate / President
State: MO District: 07
Disbursement For: 2006 X Primary / General / Other (specify)
Transaction ID: 5765290503254224171
Date of Disbursement: 03 / 25 / 2005
Amount of Each Disbursement this Period: 2500.00

C.
Full Name (Last, First, Middle Initial): Hawkeye Pac, the
Mailing Address: PO Box 7255
City: Des Moines | State: IA | Zip Code: 50309
Purpose of Disbursement: 2005 Contribution
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District
Disbursement For: Primary / General / Other (specify)
Transaction ID: 4049090503023197476
Date of Disbursement: 03 / 02 / 2005
Amount of Each Disbursement this Period: 2500.00

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

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

☐ 21b	☐ 22	☒ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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

A.
Full Name (Last, First, Middle Initial): Hudson Valley Victory Fund
Mailing Address: PO Box 464, C/O Megan Davis
City: Katonah State: NY Zip Code: 10536
Purpose of Disbursement: 2005 Contribution
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 1936950503103122190
Date of Disbursement: 03 / 10 / 2005
Amount of Each Disbursement this Period: 2500.00

B.
Full Name (Last, First, Middle Initial): John D. Dingell for Congress Committee
Mailing Address: 607 14th Street Northwest, Suite 800
City: Washington State: DC Zip Code: 20005
Purpose of Disbursement: 2006 Primary
Candidate Name: Dingell John
Category/Type:
Office Sought: X House / Senate / President
State: MI District: 15
Disbursement For: 2006 X Primary / General / Other (specify)
Transaction ID: 3619440503165569648
Date of Disbursement: 03 / 17 / 2005
Amount of Each Disbursement this Period: 2500.00

C.
Full Name (Last, First, Middle Initial): Johnson for Congress Committee
Mailing Address: PO Box 1986
City: New Britain State: CT Zip Code: 06050
Purpose of Disbursement: 2006 Primary
Candidate Name: Johnson Nancy
Category/Type:
Office Sought: X House / Senate / President
State: CT District: 05
Disbursement For: 2006 X Primary / General / Other (specify)
Transaction ID: 4479470503015470457
Date of Disbursement: 03 / 01 / 2005
Amount of Each Disbursement this Period: 2500.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **7500.00**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

☐ 21b	☐ 22	☒ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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

A.
Full Name (Last, First, Middle Initial): Nathan Deal for Congress
Mailing Address: PO Box 902
PO Box 902
City: Gainesville
State: GA
Zip Code: 30503
Purpose of Disbursement: 2006 Primary
Candidate Name: Deal Nathan
Category/Type
Office Sought: X House / Senate / President
State: GA District: 10
Disbursement For: 2006 X Primary / General / Other (specify)
Transaction ID: 1949250503D15487112
Date of Disbursement: 03 / 01 / 2005
Amount of Each Disbursement this Period: 2500.00

B.
Full Name (Last, First, Middle Initial): Pallone for Congress
Mailing Address: PO Box 3176
City: Long Branch
State: NJ
Zip Code: 07740
Purpose of Disbursement: 2006 Primary
Candidate Name: Pallone Frank
Category/Type
Office Sought: X House / Senate / President
State: NJ District: 06
Disbursement For: 2006 X Primary / General / Other (specify)
Transaction ID: 6594990503254230589
Date of Disbursement: 03 / 25 / 2005
Amount of Each Disbursement this Period: 2500.00

C.
Full Name (Last, First, Middle Initial): Pete Stark Re-Election Committee
Mailing Address: PO Box 8331
City: Fremont
State: CA
Zip Code: 94537
Purpose of Disbursement: 2006 Primary
Candidate Name: Stark Pete
Category/Type
Office Sought: X House / Senate / President
State: CA District: 13
Disbursement For: 2006 X Primary / General / Other (specify)
Transaction ID: 8359270503165546781
Date of Disbursement: 03 / 17 / 2005
Amount of Each Disbursement this Period: 1000.00

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

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

☐ 21b	☐ 22	☒ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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

A.
Full Name (Last, First, Middle Initial): Price for Congress
Mailing Address: PO Box 425
City: Roswell | State: GA | Zip Code: 30077
Purpose of Disbursement: 2006 Primary
Candidate Name: Price Thomas
Category/Type
Office Sought: X House / Senate / President
State: GA District: 06
Disbursement For: 2006 X Primary / General / Other (specify)
Transaction ID: 3915780503254200282
Date of Disbursement: 03 / 25 / 2005
Amount of Each Disbursement this Period: 2500.00

B.
Full Name (Last, First, Middle Initial): Rick Renzi for Congress
Mailing Address: PO Box 2383
City: Prescott | State: AZ | Zip Code: 86302
Purpose of Disbursement: 2006 Primary
Candidate Name: Renzi Richard
Category/Type
Office Sought: X House / Senate / President
State: AZ District: 01
Disbursement For: 2006 X Primary / General / Other (specify)
Transaction ID: 5317730503254191190
Date of Disbursement: 03 / 25 / 2005
Amount of Each Disbursement this Period: 1000.00

C.
Full Name (Last, First, Middle Initial): Santorum 2006
Mailing Address: One Tower Bridge Suite 1440
City: West Conshohocken | State: PA | Zip Code: 19428
Purpose of Disbursement: 2006 Primary
Candidate Name: Santorum Rick
Category/Type
Office Sought: House / X Senate / President
State: PA District: 00
Disbursement For: 2006 X Primary / General / Other (specify)
Transaction ID: 6734830503255010675
Date of Disbursement: 03 / 25 / 2005
Amount of Each Disbursement this Period: 3000.00

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

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

☐ 21b	☐ 22	☒ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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

A.
Full Name (Last, First, Middle Initial): Simpson for Congress
Mailing Address: 1487 Parkway Drive
City: Blackfoot State: ID Zip Code: 83221
Purpose of Disbursement: 2006 Primary
Candidate Name: Simpson Michael
Category/Type
Office Sought: X House / Senate / President
State: ID District: 02
Disbursement For: 2006 X Primary / General / Other (specify)
Transaction ID: 5779470503103104639
Date of Disbursement: 03 / 10 / 2005
Amount of Each Disbursement this Period: 1000.00

B.
Full Name (Last, First, Middle Initial): Talent for Senate Committee
Mailing Address: 147 N Meramec Suite 100
City: St. Louis State: MO Zip Code: 63105
Purpose of Disbursement: 2006 Primary
Candidate Name: Talent James
Category/Type
Office Sought: House / X Senate / President
State: MO District: 00
Disbursement For: 2006 X Primary / General / Other (specify)
Transaction ID: 5603440503015460518
Date of Disbursement: 03 / 01 / 2005
Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶	2000.00
TOTAL This Period (last page this line number only) ..... ▶	54000.00

Form/Schedule: F3XA

Transaction ID:

This amendment is being filed to correct the year-to-date totals for Lines 21(b) and 29 on the Detailed Summary Pages.