



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**CONNECTICUT ASSOCIATION OF OPTOMETRISTS INC PAC; THE**

Report Covering the Period: From:  /  /  To:  /  /

|  | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand<br>January 1, <input type="text" value="2011"/>  |                         | 10603.00                          |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....  | 8503.00                 |                                   |
| (c) Total Receipts (from Line 19) .....  | 3250.00                 | 7450.00                           |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | 11753.00                | 18053.00                          |
| 7. Total Disbursements (from Line 31).....   | 384.00                  | 6684.00                           |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)).....                         | 11369.00                | 11369.00                          |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                   |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | 0.00                    |                                   |

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**CONNECTICUT ASSOCIATION OF OPTOMETRISTS INC PAC; THE**

Report Covering the Period: From:  /  /  To:  /  /

| I. Receipts   | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:  |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees   |                               |                                   |
| (i) Itemized (use Schedule A).....  | 1300.00                       | 3800.00                           |
| (ii) Unitemized .....   | 1950.00                       | 3650.00                           |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶  | 3250.00                       | 7450.00                           |
| (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) .....  | 3250.00                       | 7450.00                           |
| 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.).....   | 0.00                          | 0.00                              |
| 18. Transfers from Non-Federal and Levin Funds  |                               |                                   |
| (a) Non-Federal Account (from Schedule H3).....   | 0.00                          | 0.00                              |
| (b) Levin Funds (from Schedule H5) .....  | 0.00                          | 0.00                              |
| (c) Total Transfers (add 18(a) and 18(b))..   | 0.00                          | 0.00                              |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶                        | 3250.00                       | 7450.00                           |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶                                  | 3250.00                       | 7450.00                           |

**DETAILED SUMMARY PAGE**  
of Disbursements

| II. Disbursements  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures:  |                               |                                   |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4)                                  |                               |                                   |
| (i) Federal Share .....  | 0.00                          | 0.00                              |
| (ii) Non-Federal Share.....  | 0.00                          | 0.00                              |
| (b) Other Federal Operating Expenditures .....   | 0.00                          | 0.00                              |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 0.00                          | 0.00                              |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 0.00                          | 6300.00                           |
| 24. Independent Expenditures (use Schedule E) .....  | 0.00                          | 0.00                              |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....                   | 384.00                        | 384.00                            |
| 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) Allocated Federal Election Activity (from Schedule H6)                                     |                               |                                   |
| (i) Federal Share .....  | 0.00                          | 0.00                              |
| (ii) "Levin" Share.....  | 0.00                          | 0.00                              |
| (b) Federal Election Activity Paid Entirely With Federal Funds .....                           | 0.00                          | 0.00                              |
| (c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....           | 0.00                          | 0.00                              |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..      | 384.00                        | 6684.00                           |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 384.00                        | 6684.00                           |

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

| III. Net Contributions/Operating Expenditures  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....        | 3250.00                       | 7450.00                           |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                            | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....    | 3250.00                       | 7450.00                           |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... | 0.00                          | 0.00                              |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                 | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....              | 0.00                          | 0.00                              |

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

|   |   |                              |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 6 OF 8                  |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 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)  
**CONNECTICUT ASSOCIATION OF OPTOMETRISTS INC PAC; THE**

**A. Dr. Robert Aube**  
Full Name (Last, First, Middle Initial)

Mailing Address 7 Autumn Circle

City Rocky Hill State CT Zip Code 06067

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation optometrist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 28 / 2011

**Transaction ID : SA11AI.4290**

Amount of Each Receipt this Period  
 250.00

contribution

**B. Dr. James Boccuzzi**  
Full Name (Last, First, Middle Initial)

Mailing Address 689 Mansfield City Road

City Storrs State CT Zip Code 06268

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation optometrist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 28 / 2011

**Transaction ID : SA11AI.4291**

Amount of Each Receipt this Period  
 250.00

contribution

**c. Laura Dake-Roche**  
Full Name (Last, First, Middle Initial)

Mailing Address 177 Steele Rd.

City West Hartford State CT Zip Code 06119

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation optometrist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 25 / 2011

**Transaction ID : SA11AI.4285**

Amount of Each Receipt this Period  
 200.00

contribution

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 700.00

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

|   |  |             |
|---|--|-------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 7 OF 8 |
|   | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12<br><input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 |             |

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NAME OF COMMITTEE (In Full)  
**CONNECTICUT ASSOCIATION OF OPTOMETRISTS INC PAC; THE**

|   |                           |                                    |  |
|---|---------------------------|------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Catherine M. Ferentini O.D.</b>  |                           |                                    | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>10 / 25 / 2011 |
| Mailing Address 14 Birch Hill Drive   |                           |                                    | <b>Transaction ID : SA11AI.4286</b>                          |
| City<br>West Hartford   | State<br>CT               | Zip Code<br>06107                  | Amount of Each Receipt this Period<br>100.00                 |
| FEC ID number of contributing federal political committee.<br>C   |                           |                                    | contribution   |
| Name of Employer<br>self  | Occupation<br>optometrist | Aggregate Year-to-Date ▼<br>300.00 |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                           |                                    |  |

|   |                           |                                    |  |
|---|---------------------------|------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Dr. John Lertora</b>   |                           |                                    | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>12 / 28 / 2011 |
| Mailing Address 155 Silver Creek Drive  |                           |                                    | <b>Transaction ID : SA11AI.4288</b>                          |
| City<br>Suffield  | State<br>CT               | Zip Code<br>06078                  | Amount of Each Receipt this Period<br>250.00                 |
| FEC ID number of contributing federal political committee.<br>C   |                           |                                    | contribution   |
| Name of Employer<br>self  | Occupation<br>optometrist | Aggregate Year-to-Date ▼<br>250.00 |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                           |                                    |  |

|   |                           |                                    |  |
|---|---------------------------|------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Dr. Bradford Newman</b>  |                           |                                    | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>12 / 28 / 2011 |
| Mailing Address 34 Candlewood Lane  |                           |                                    | <b>Transaction ID : SA11AI.4292</b>                          |
| City<br>Avon  | State<br>CT               | Zip Code<br>06001                  | Amount of Each Receipt this Period<br>250.00                 |
| FEC ID number of contributing federal political committee.<br>C   |                           |                                    | contribution   |
| Name of Employer<br>self  | Occupation<br>optometrist | Aggregate Year-to-Date ▼<br>250.00 |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                           |                                    |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 600.00  |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | 1300.00 |

**SCHEDULE F (FEC Form 3X)**  
**ITEMIZED COORDINATED PARTY EXPENDITURES MADE BY**  
**POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)**  
**ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE**  
**(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full)  
**CONNECTICUT ASSOCIATION OF OPTOMETRISTS INC PAC; THE**

|   |                                    |       |          |
|---|------------------------------------|-------|----------|
| Has your committee been designated to make coordinated expenditures by a political party committee?<br><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO<br>If YES, name the designating committee: | Full Name of Subordinate Committee |       |          |
|   | Mailing Address                    |       |          |
|   | City                               | State | ZIP Code |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) of Each Payee<br><b>Red Rock Tavern</b> |  | Purpose of Expenditure<br>In-kind contribution (food and beverage) for fundraiser event | <b>003</b><br>Category/Type  |
| Mailing Address <b>369 Capitol Avenue</b>                                       |  | Date<br>MM / DD / YYYY<br><b>12 / 22 / 2011</b>   |  |
| City<br><b>Hartford</b>   | State<br><b>CT</b>   | Zip Code<br><b>06106</b>  | Amount<br><b>384.00</b>  |
| Name of Federal Candidate Supported<br><b>CHRISTOPHER MURPHY</b>                | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> Presidential | State: <b>CT</b><br>District: <b>05</b>   | Aggregate General Election Expenditure for this Candidate ▶ <b>384.00</b><br><b>Transaction ID : SF.4294</b> |

|   |   |                                 |   |
|---|---|---------------------------------|---|
| Full Name (Last, First, Middle Initial) of Each Payee |   | Purpose of Expenditure          | Category/Type   |
| Mailing Address                                       |   | Date<br>MM / DD / YYYY          |   |
| City  | State   | Zip Code                        | Amount  |
| Name of Federal Candidate Supported                   | Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> Presidential | State: _____<br>District: _____ | Aggregate General Election Expenditure for this Candidate ▶ |

|   |   |                                 |   |
|---|---|---------------------------------|---|
| Full Name (Last, First, Middle Initial) of Each Payee |   | Purpose of Expenditure          | Category/Type   |
| Mailing Address                                       |   | Date<br>MM / DD / YYYY          |   |
| City  | State   | Zip Code                        | Amount  |
| Name of Federal Candidate Supported                   | Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> Presidential | State: _____<br>District: _____ | Aggregate General Election Expenditure for this Candidate ▶ |

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Expenditures This Page (optional).....▶       | <b>384.00</b> |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | <b>384.00</b> |