REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

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

ADDRESS (number and street) ☐ Check if different than previously reported
655 Beach Street

CITY, STATE and ZIP CODE
San Francisco, CA 94109

2. FEC IDENTIFICATION NUMBER
C00196146

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

4. TYPE OF REPORT

(a) ☐ April 15 Quarterly Report
☐ July 15 Quarterly Report
☐ October 15 Quarterly Report
☐ January 31 Year End Report
☐ July 31 Mid Year Report (Non-election Year Only)
☐ Termination Report

Monthly Report Due On:

☐ February 20	☐ June 20	☐ October 20
☒ March 20	☐ July 20	☐ November 20
☐ April 20	☐ August 20	☐ December 20
☐ May 20	☐ September 20	☐ January 31

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

☐ Thirtieth day report following the General Election on _____ in the State of _____.

(b) Is this Report an Amendment? ☐ YES ☒ NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 02/01/94 through 02/28/94		
6. (a) Cash on Hand January 1, 19		$ 529,891.05
(b) Cash on Hand at Beginning of Reporting Period	$ 638,023.08	
(c) Total Receipts (from Line 19)	$ 117,682.31	$ 236,066.61
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 755,705.39	$ 765,957.66
7. Total Disbursements (from Line 30)	$ 41,540.50	$ 51,792.77
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 714,164.89	$ 714,164.89
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$ 0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$ 0	

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

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

Type or Print Name of Treasurer
Paula E. Lent

Signature of Treasurer
Paula E Lent

Date
March 20, 1994

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

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

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

(revised 1/1/91)

NAME OF COMMITTEE

REPORT COVERING PERIOD FROM 02/01/94 TO: 02/28/94

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
i. Itemized (use Schedule A)	93,074.33	187,074.33
ii. Unitemized	24,255.00	48,380.00
iii. Total (add i and ii) ➤	117,329.33	235,454.33
b. Political Party Committees	0	0
c. Other Political Committees (such as PACs)	0	0
d. Total Contributions (add a iii, b and c) ➤	117,329.33	235,454.33
12. Transfers From Affiliated/Other Party Committees	0	0
13. All Loans Received	0	0
14. Loan Repayments Received	0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0	0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0	0
17. Other Federal Receipts (Dividends, Interest, etc.)	352.98	612.28
18. Transfers from Nonfederal Account for Joint Activity	0	0
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	117,682.31	236,066.61
20. Total Federal Receipts (subtract line 18 from line 19) ➤	117,682.31	236,066.61
II. Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share	0	0
ii. Non-Federal Share	0	0
b. Other Federal Operating Expenditures	12,540.50	9,824.77
c. Total Operating Expenditures (Add a i, a ii, and b) ➤	12,540.50	9,824.77
22. Transfers to Affiliated/Other Party Committees	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees	29,000.00	41,968.00
24. Independent Expenditures (use Schedule E)	0	0
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0	0
26. Loan Repayments Made	0	0
27. Loans Made	0	0
28. Refunds of Contributions To:	0	0
a. Individuals/Persons Other Than Political Committees		
b. Political Party Committees	0	0
c. Other Political Committees (such as PACs)	0	0
d. Total Contribution Refunds (Add a, b and c) ➤	0	0
29. Other Disbursements	0	0
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	41,540.50	51,792.77
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	41,540.50	51,792.77
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans)(from line 11d)	117,329.33	235,454.33
33. Total Contribution Refunds (from line 28d)	0	0
34. Net Contributions (other than loans)(subtract line 33 from 32)	117,329.33	235,454.33
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	12,540.50	9,824.77
36. Offsets to Operating Expenditures (from line 15)	0	0
37. Net Operating Expenditures (subtract line 36 from 35) ➤	0	9,824.77

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SCHEDULE A ITEMIZED RECEIPTS

For each category of the Detailed Summary Page: 1

FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

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

A. Full Name, Mailing Address and ZIP Code Union Bank 50 California Street San Francisco, CA 94109	Name of Employer N/A	Date (month, day, year) 02/28/94	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [X] Other (specify): Income Interest	Occupation N/A Aggregate Year-to-Date $		303.10
B. Full Name, Mailing Address and ZIP Code Dean Witter Reynolds, Inc. 167 East Second Avenue San Mateo, CA 94401	Name of Employer N/A	Date (month, day, year) 02/28/94	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [X] Other (specify): Income Interest	Occupation N/A Aggregate Year-to-Date $		49.88
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Occupation Aggregate Year-to-Date $		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Occupation Aggregate Year-to-Date $		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Occupation Aggregate Year-to-Date $		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Occupation Aggregate Year-to-Date $		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Occupation Aggregate Year-to-Date $		
SUBTOTAL of Receipts This Page (optional)			
TOTAL This Period (last page this line number only)			352.98

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CONTRIBUTIONS FROM INDIVIDUALS OTHER THAN POLITICAL COMMITTEES
SCHEDULE A
FROM 02/01/94 TO 02/28/94

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NAME AND ADDRESS	EMPLOYER/OCCUPATION	DATE	RECEIPT AMOUNT	YTD AMOUNT
Rossman III MD*Allen N 13122 120th Avenue NE Kirkland WA 98034	Self-Employed PHYSICIAN	02/10/94	300.00	450.00
Karlstad MD*Gary L 3035 Demers Avenue Grand Forks ND 58201	ND Eye Clinic PHYSICIAN	02/07/94	250.00	250.00
Fishkind MD*William J Northwest Eye Specialists 5599 North Oracle Road Tucson AZ 85704	Self-Employed PHYSICIAN	02/18/94	300.00	300.00
Wooten MD*Margrove F Suite 842 2000 Crawford Houston TX 77002	SELF EMPLOYED OPHTHALMOLOGIST	02/16/94	1000.00	1000.00
Robertson Jr MD*Joseph E Casey Eye Institute/OHSU 3375 SW Terwilliger Boulevard Portland OR 97201-4197	ASSIST PROF OF OPHTH PHYSICIAN	02/14/94	500.00	500.00
Pao MD*David S Suite 201 1018 Street Road Southampton PA 18966	Self-Employed OPHTHALMOLOGIST	02/18/94	500.00	500.00
Cheek MD*Charles W 500 Keene Street Columbia MO 65201	Self-Employed PHYSICIAN	02/22/94	250.00	250.00
Shear MD*Glenn S Suite 114 33 Upper Riverdale Road Riverdale GA 30274	Self-Employed OPHTHALMOLOGIST	02/01/94	1000.00	1000.00
	SUBTOTAL		4100.00	

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PROGRAM: RRL
DATE: 030194

AMERICAN ACADEMY OF OPHTHALMOLOGY INC POLITICAL COMMITTEE (OPHTHPAC)
ITEMIZED RECEIPTS
CONTRIBUTIONS FROM INDIVIDUALS OTHER THAN POLITICAL COMMITTEES
SCHEDULE A
FROM 02/01/94 TO 02/28/94

LINE NUMBER 11a i

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NAME AND ADDRESS	EMPLOYER/OCCUPATION	DATE	RECEIPT AMOUNT	YTD AMOUNT
White MD*William O Suite 1008 Med Ctr Plaza 979 East Third Street Chattanooga TN 37403	SELF-EMPLOYED OPHTHALMOLOGIST	02/28/94	300.00	300.00
Cook MD*Loran D Suite 204 1055 North 300 West Provo UT 84604	Self-Employed OPHTHALMOLOGIST	02/28/94	1000.00	1000.00
Hamako MD*Conrad 238 Green Valley Road Freedom CA 95019	Self-Employed PHYSICIAN	02/18/94	250.00	250.00
Turner MD*Stephen G 420 Estudillo Avenue San Leandro CA 94577	SELF EMPLOYED OPHTHALMOLOGIST	02/24/94	1000.00	1000.00
Fishman MD*Martin L 431 Monterey Avenue Los Gatos CA 95030	Self-Employed PHYSICIAN	02/24/94	300.00	300.00
Kelly MD*James B 1513 Huffman Road Birmingham AL 35215	SELF EMPLOYED OPHTHALMOLOGIST	02/16/94	500.00	500.00
Molekamp MD*Timothy 500 Keene Street Columbia MO 65201	Columbia Ret Clnc PHYSICIAN	02/14/94	250.00	250.00
Davidson MD*Andrew 802 McCarthy Blvd New Bern NC 28560	Coastal Eye Clinic OPHTHALMOLOGIST	02/28/94	500.00	500.00
		SUBTOTAL	4100.00	

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CONTRIBUTIONS FROM INDIVIDUALS OTHER THAN POLITICAL COMMITTEES
SCHEDULE A
FROM 02/01/94 TO 02/28/94

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NAME AND ADDRESS	EMPLOYER/OCCUPATION	DATE	RECEIPT AMOUNT	YTD AMOUNT
Pacuraria MD*Rado I Suite 103 920 Wyoming Avenue Forty Fort PA 18704	SELF-EMPLOYED OPHTHALMOLOGIST	02/10/94	250.00	250.00
Davenport MD*Richard B 2400 South 90th Street West Allis WI 53227	R B DAVENPORT MD SC PHYSICIAN	02/01/94	250.00	250.00
Ludwig MD*Gerrit R 47 Lanihuli Centre Hilo HI 96720	Self-Employed PHYSICIAN	02/10/94	1000.00	1000.00
Sullivan MD*Stephen F 540 Hawthorn Street North Dartmouth MA 02747	Self-Employed OPHTHALMOLOGIST	02/11/94	300.00	300.00
Schwartzfarb MD*David L 5162 Linton Blvd Suite 203 Delray Beach FL 33484	SELF EMPLOYED PHYSICIAN	02/11/94	300.00	300.00
Levine MD*Stephen B Suite 440 5671 Peachtree-Dunwoody Rd NE Atlanta GA 30342	SELF EMPLOYED OPHTHALMOLOGIST	02/08/94	250.00	250.00
Pape MD*Lawrence G Nine East Sixty-Third Street New York NY 10021	Self-Employed PHYSICIAN	02/01/94	50.00	1050.00
Manno III MD*Joseph A Suite 329 3193 Howell Mill Rd Atlanta GA 30327	SELF EMPLOYED OPHTHALMOLOGIST	02/28/94	500.00	500.00
		SUBTOTAL	2900.00	

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AMERICAN ACADEMY OF OPHTHALMOLOGY INC POLITICAL COMMITTEE (OPHTHPAC)
ITEMIZED RECEIPTS
CONTRIBUTIONS FROM INDIVIDUALS OTHER THAN POLITICAL COMMITTEES
SCHEDULE A
FROM 02/01/94 TO 02/28/94

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NAME AND ADDRESS	EMPLOYER/OCCUPATION	DATE	RECEIPT AMOUNT	YTD AMOUNT
Bruce Jr MD*Robert A 340 East Town Street Columbus OH 43215	Self-Employed PHYSICIAN	02/08/94	1000.00	1000.00
Cestano MD*Lucien M Suite 1B 4523 Broadway New York NY 10040	SELF EMPLOYED OPHTHALMOLOGIST	02/16/94	500.00	500.00
Grignon MD*Constance C 3700 Aspen Drive West Des Moines IA 50265	DES MOINES VA MED CN OPHTHALMOLOGIST	02/01/94	300.00	300.00
Moses MD*James L 130 South Davis Avenue Columbus OH 43222	Self-Employed OPHTHALMOLOGIST	02/18/94	250.00	250.00
Kazam MD*Ezra S 2 Washington Place Morristown NJ 07960	Self-Employed OPHTHALMOLOGIST	02/16/94	250.00	250.00
Rigsby III MD*Jesse M Box 1207 Galesburg IL 61401	GALESBURG CLINIC OPHTHALMOLOGIST	02/08/94	500.00	500.00
Davidoff MD*Elliot Center For Sight 1371 West Main Street Newark OH 43055-3676	CENTER FOR SIGHT OPHTHALMOLOGIST	02/01/94	300.00	300.00
Raju MD*U K 1224 Pineview Drive Morgantown WV 26505	Self-Employed PHYSICIAN	02/16/94	250.00	250.00
	SUBTOTAL		3350.00	

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CONTRIBUTIONS FROM INDIVIDUALS OTHER THAN POLITICAL COMMITTEES

SCHEDULE A

FROM 02/01/94 TO 02/28/94

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NAME AND ADDRESS	EMPLOYER/OCCUPATION	DATE	RECEIPT AMOUNT	YTD AMOUNT
Matzkin MD*M Gene 2230 Lynn Road Thousand Oaks CA 91360	Lynn Eye Med Group PHYSICIAN	02/01/94	300.00	300.00
Van Dyke MD*Roger S Mameaug Medical Building 21 Montauk Avenue New London CT 06320	SELF EMPLOYED OPHTHALMOLOGIST	02/24/94	250.00	250.00
Walsh MD*Joseph B NY Eye & Ear Inf/420 South 310 East 14th Street New York NY 10003	DR MULBOOM MD OPHTHALMOLOGIST	02/18/94	250.00	250.00
Dew Jr MD*James H Suite 325 2200 Northlake Parkway Tucker GA 30084	SELF EMPLOYED OPHTHALMOLOGIST	02/16/94	250.00	250.00
Krenz MD*Marlin Paul 1781 Peck Street Muskegon MI 49441	Self-Employed OPHTHALMOLOGIST	02/01/94	750.00	750.00
Cupples MD*Howard P Georgetown University Med Ctr 3800 Reservoir Road NW Washington DC 20007	GEORGETOWN UNIVERSIY PHYSICIAN	02/01/94	300.00	300.00
Morimoto MD*Paul K 219 North Hammes Avenue PO Box 2937 Joliet IL 60434	Self-Employed OPHTHALMOLOGIST	02/08/94	250.00	500.00
Vygantas MD*Charles M Suite 201 8901 West Golf Road Des Plaines IL 60016-4081	SELF-EMPLOYED PHYSICIAN	02/07/94	1000.00	1000.00
	SUBTOTAL		3350.00	

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CONTRIBUTIONS FROM INDIVIDUALS OTHER THAN POLITICAL COMMITTEES
SCHEDULE A
FROM 02/01/94 TO 02/28/94

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NAME AND ADDRESS	EMPLOYER/OCCUPATION	DATE	RECEIPT AMOUNT	YTD AMOUNT
Leja MD*Stanley Allen Suite B 1225 Eureka Way Redding CA 96001	Self-Employed OPHTHALMOLOGIST	02/14/94	500.00	500.00
Perlmutter MD*Harold S 183 High Street Newton NJ 07860	Eye Phys of Sussex PHYSICIAN	02/22/94	1000.00	1000.00
Taylor MD*Bruce C 2811 Lemmon Avenue East Dallas TX 75204	Self-Employed PHYSICIAN	02/07/94	300.00	300.00
Try MD*Luther L 310 East Walnut Street Garden City KS 67846-5500	Self-Employed OPHTHALMOLOGIST	02/10/94	1000.00	1000.00
Berman MD*Gerald 314 Medical Towers North 233 East Gray Street Louisville KY 40202	Self-Employed OPHTHALMOLOGIST	02/10/94	300.00	300.00
Goldbaum MD*Michael H Shiley Eye Center 9415 Campus Point Drive La Jolla CA 92093-0946	SELF EMPLOYED OPHTHALMOLOGIST	02/07/94	300.00	300.00
Blackman MD*William M 1111 Professional Boulevard Dalton GA 30720	Self-Employed PHYSICIAN	02/08/94	333.00	666.00
Fargason MD*Crayton A 5246 Brittany Drive Baton Rouge LA 70809	EYE MEDICAL CENTER PHYSICIAN	02/18/94	250.00	250.00
	SUBTOTAL		3983.00	

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CONTRIBUTIONS FROM INDIVIDUALS OTHER THAN POLITICAL COMMITTEES
SCHEDULE A
FROM 02/01/94 TO 02/28/94

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NAME AND ADDRESS	EMPLOYER/OCCUPATION	DATE	RECEIPT AMOUNT	YTD AMOUNT
Starr MD*Henry J 6201 Riverdale Road Riverdale MD 20737	Self-Employed PHYSICIAN	02/18/94	300.00	300.00
Eggleston MD*Robert B Suite 210 101 North Main Street Harrisonburg VA 22801	SELF-EMPLOYED OPHTHALMOLOGIST	02/23/94	500.00	500.00
Gettelfinger MD*Thomas C 6485 Poplar Avenue Memphis TN 38119	Self-Employed OPHTHALMOLOGIST	02/08/94	500.00	1000.00
Appleby Jr MD*Reid S 390 Tollgate Road Warwick RI 02886	SELF EMPLOYED OPHTHALMOLOGIST	02/08/94	500.00	500.00
Read MD*Frank W 15 Lowell Street Portland ME 04102	Self-Employed OPHTHALMOLOGIST	02/01/94	300.00	300.00
Bakewell MD*Brock Kuehner Northwest Eye Specialists 5599 North Oracle Road Tucson AZ 85704-3821	WILLIAM J FISHKIND MD PHYSICIAN	02/15/94	300.00	300.00
Ogawa MD*Andrew S 11900 E 12 Mile Road Suite 206 Warren MI 48093	SELF-EMPLOYED OPHTHALMOLOGIST	02/01/94 02/24/94	300.00 300.00	600.00
Basso MD*Victor J 15 Professional Park Webster TX 77598	Self-Employed OPHTHALMOLOGIST	02/16/94	333.00	633.00
	SUBTOTAL		3333.00	

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CONTRIBUTIONS FROM INDIVIDUALS OTHER THAN POLITICAL COMMITTEES
SCHEDULE A
FROM 02/01/94 TO 02/28/94

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NAME AND ADDRESS	EMPLOYER/OCCUPATION	DATE	RECEIPT AMOUNT	YTD AMOUNT
Mullan MD*Gerald J 21731 Greater Mack St Clair Shores MI 48080	Self-Employed OPHTHALMOLOGIST	02/10/94	400.00	400.00
Soron MD*Terry A 600 Orondo Avenue PO Box 3027 Wenatchee WA 98801	SELF EMPLOYED OPHTHALMOLOGIST	02/16/94	500.00	500.00
Rickhof MD*F Tempel Suite 200 4400 South 700 East Salt Lake City UT 84107	Self-Employed OPHTHALMOLOGIST	02/10/94	300.00	300.00
Schnellmann MD*Donald C 12 Nameoki Village Granite City IL 62040	. PHYSICIAN	02/18/94	250.00	250.00
Pfoff MD*David S Suite 350 930 East Harvard Denver CO 80210	. OPHTHALMOLOGIST	02/14/94	250.00	250.00
Nunn MD*Robert F 2401 Bay Avenue Ocean City NJ 08226	Cape Ophth Assoc OPHTHALMOLOGIST	02/19/94	1000.00	1000.00
Lees MD*John 2715 SW Willetta Albany OR 97321	SELF EMPLOYED OPHTHALMOLOGIST	02/14/94	500.00	500.00
Montana MD*Jerome A Bldg 2 3100 Princeton Pike Lawrenceville NJ 08648	MONTANA-WEINSTOCK PA PHYSICIAN	02/16/94	500.00	500.00
	SUBTOTAL		3700.00	

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CONTRIBUTIONS FROM INDIVIDUALS OTHER THAN POLITICAL COMMITTEES
SCHEDULE A
FROM 02/01/94 TO 02/28/94

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NAME AND ADDRESS	EMPLOYER/OCCUPATION	DATE	RECEIPT AMOUNT	YTD AMOUNT
Kraut MD*Joel A 16 Webster Street Brookline MA 02146-4938	Self-Employed PHYSICIAN	02/01/94	300.00	300.00
Merey MD*John H Suite 102 333 Southern Boulevard West Palm Beach FL 33405	JOHN H MEREY MD PA PHYSICIAN	02/11/94	300.00	300.00
Winslow MD*Richard L 2811 Lemmon Avenue East Dallas TX 75204	Self-Employed OPHTHALMOLOGIST	02/01/94	300.00	300.00
Carboy MD*David T PO Box 4108 Middletown NJ 07748	SELF EMPLOYED OPHTHALMOLOGIST	02/24/94	250.00	250.00
Gerstein MD*Douglas B Suite 201 1460 North Carlos Alto Vallejo CA 94589	Self-Employed OPHTHALMOLOGIST	02/01/94	300.00	300.00
Reinstein MD*Ned H 7171 South Yale Avenue Tulsa OK 74136	Oph Assn Inc OPHTHALMOLOGIST	02/07/94	250.00	250.00
Nensher MD*John H Virginia Mason Clin/PO Box 900 1100 Ninth Avenue Seattle WA 98111	Virginia Mason Clinic OPHTHALMOLOGIST	02/23/94	300.00	300.00
Holtz MD*S Jerome 108-112 Broughton Avenue Bloomfield NJ 07003	Self Employed PHYSICIAN	02/07/94	250.00	250.00
	SUBTOTAL		2250.00	

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AMERICAN ACADEMY OF OPHTHALMOLOGY INC POLITICAL COMMITTEE (OPHTHPAC)

ITEMIZED RECEIPTS

CONTRIBUTIONS FROM INDIVIDUALS OTHER THAN POLITICAL COMMITTEES

SCHEDULE A

FROM 02/01/94 TO 02/28/94

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NAME AND ADDRESS	EMPLOYER/OCCUPATION	DATE	RECEIPT AMOUNT	YTD AMOUNT
Ball MD*Charles J 331 Millburn Avenue Short Hills NJ 07078	Short Hills Ophth Gp PHYSICIAN	02/11/94	500.00	500.00
Hyman MD*Bruce M 133 East 64th Street New York NY 10021	SELF-EMPLOYED OPHTHALMOLOGIST	02/01/94	300.00	300.00
Smithline MD*Martin L 44 Godwin Avenue Midland Park NJ 07432	Self-Employed OPHTHALMOLOGIST	02/01/94	500.00	500.00
Berler MD*David K 3454 Wisconsin Avenue Washington DC 20815	SELF-EMPLOYED OPHTHALMOLOGIST	02/08/94	250.00	250.00
Muchnick MD*Richard S 69 East 71st Street New York NY 10021	SELF EMPLOYED OPHTHALMOLOGIST	02/10/94	300.00	300.00
Dahlstrom MD*Ralph Los Alamos Medical Center Los Alamos NM 87544	SELF EMPLOYED OPHTHALMOLOGIST	02/14/94	1000.00	1000.00
Crawford III MD*John R Crawford Professional Bldg 310 North Main Street Salisbury NC 28144	SELF-EMPLOYED OPHTHALMOLOGIST	02/18/94	500.00	500.00
Warner MD*Russell E 7C Cleveland Court Greenville SC 29607	Self-Employed OPHTHALMOLOGIST	02/01/94	250.00	250.00
	SUBTOTAL		3600.00	

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CONTRIBUTIONS FROM INDIVIDUALS OTHER THAN POLITICAL COMMITTEES
SCHEDULE A
FROM 02/01/94 TO 02/28/94

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NAME AND ADDRESS	EMPLOYER/OCCUPATION	DATE	RECEIPT AMOUNT	YTD AMOUNT
Bezahler MD*Ronald C #3G 55 Meriden Avenue Southington CT 06489	SELF EMPLOYED OPHTHALMOLOGIST	02/01/94	250.00	250.00
Reinhart MD*William J 32590 Burlwood Drive Solon OH 44139	UOI Inc OPHTHALMOLOGIST	02/01/94	250.00	250.00
Everett MD*Charles J 3207 South Campbell Street Sandusky OH 44870	SELF-EMPLOYED OPHTHALMOLOGIST	02/01/94	300.00	300.00
Luo MD*Solomon C W 201 East Laurel Boulevard Pottsville PA 17901	Self-Employed OPHTHALMOLOGIST	02/16/94	500.00	500.00
Beck MD*Sylvia R 1810 Delancey Place Philadelphia PA 19103-6607	Self-Employed PHYSICIAN	02/18/94	300.00	300.00
Sherman MD*Roger M 106 East Gambier Street Mount Vernon OH 43050	SELF-EMPLOYED OPHTHALMOLOGIST	02/16/94	300.00	300.00
Migliori MD*Michael Edward Suite 2 120 Dudley Street Providence RI 02905	SELF-EMPLOYED PHYSICIAN	02/01/94	500.00	500.00
Carter MD*Thomas M 400 Fairview Ponca City OK 74601	Self-Employed OPHTHALMOLOGIST	02/10/94	300.00	300.00
	SUBTOTAL		2700.00	

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ITEMIZED RECEIPTS
CONTRIBUTIONS FROM INDIVIDUALS OTHER THAN POLITICAL COMMITTEES
SCHEDULE A
FROM 02/01/94 TO 02/28/94

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NAME AND ADDRESS	EMPLOYER/OCCUPATION	DATE	RECEIPT AMOUNT	YTD AMOUNT
East MD*Samuel R 1501 NE Medical Center Drive Bend OR 97701	Bend Memorial Center OPHTHALMOLOGIST	02/08/94	500.00	500.00
Case MD*Thomas D 27878 Shannon Ln NE Kingston WA 98346	Self-Employed OPHTHALMOLOGIST	02/14/94	500.00	500.00
Hinson MD*William A Suite 7 6160 North Davis Highway Pensacola FL 32504	SELF OPHTHALMOLOGIST	02/01/94	250.00	250.00
Jones MD*David G 501 North 17th Street Allentown PA 18104	Self-Employed PHYSICIAN	02/10/94	125.00	375.00
Bowman MD*David H Blair Medical Center 501 Howard Avenue Altoona PA 16601	Self-Employed PHYSICIAN	02/10/94	1000.00	1000.00
Bedrossian MD*E Howard 4501 State Road Drexel Hill PA 19026	SELF-EMPLOYED OPHTHALMOLOGIST	02/22/94	1000.00	1000.00
Stoller MD*Gerald S 251 East Oakland Avenue Port Jefferson NY 11777	SELF PHYSICIAN	02/01/94	500.00	500.00
Stephenson MD*Harry C 4001 Kresge Way 200 Baptist East Office Park Louisville KY 40207-4604	SELF-EMPLOYED OPHTHALMOLOGIST	02/01/94	300.00	300.00
	SUBTOTAL		4175.00	

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CONTRIBUTIONS FROM INDIVIDUALS OTHER THAN POLITICAL COMMITTEES
SCHEDULE A
FROM 02/01/94 TO 02/28/94

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NAME AND ADDRESS	EMPLOYER/OCCUPATION	DATE	RECEIPT AMOUNT	YTD AMOUNT
Armstrong MD*John R 911 Sixth Avenue Fort Worth TX 76104	Self-Employed PHYSICIAN	02/01/94 02/10/94	150.00 200.00	350.00
Fiore Jr MD*John V Suite 220 1401 North Tustin Avenue Santa Ana CA 92701	Self-Employed OPHTHALMOLOGIST	02/18/94	300.00	300.00
Cole MD*Rex W 1300 Wonder World Drive San Marcos TX 78666	Self-Employed OPHTHALMOLOGIST	02/23/94	300.00	300.00
Jones MD*John D 3802-22nd Street Lubbock TX 79410	Self-Employed OPHTHALMOLOGIST	02/28/94	250.00	250.00
Lehmann MD*Jerry S PO Box 3465 Beaumont TX 77726-3465	Beaumont Eye Assn OPHTHALMOLOGIST	02/01/94	300.00	300.00
Wyll MD*Shelby W 1626 Forest Lane Garland TX 75042	SELF-EMPLOYED OPHTHALMOLOGIST	02/08/94	250.00	1000.00
Aldous MD*Richard A 857 East Second South Salt Lake City UT 84102	Self-Employed OPHTHALMOLOGIST	02/07/94	300.00	300.00
Pare MD*Paul Donald 304 SE Hospital Avenue Stuart FL 34994	SELF PHYSICIAN	02/16/94	333.33	333.33
	SUBTOTAL		2383.33	

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AMERICAN ACADEMY OF OPHTHALMOLOGY INC POLITICAL COMMITTEE (OPHTHPAC)
ITEMIZED RECEIPTS
CONTRIBUTIONS FROM INDIVIDUALS OTHER THAN POLITICAL COMMITTEES
SCHEDULE A
FROM 02/01/94 TO 02/28/94

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NAME AND ADDRESS	EMPLOYER/OCCUPATION	DATE	RECEIPT AMOUNT	YTD AMOUNT
Finke MD*Robert Scott 66 Sunset Strip Suite 107 Succasunna NJ 07876	Baylor College Med OPHTHALMOLOGIST	02/22/94	500.00	500.00
Baker MD*Robert E Suite 3C 3640 High Street Portsmouth VA 23707	Self-Employed OPHTHALMOLOGIST	02/18/94	1000.00	1000.00
Straw MD*Thomas W Marshfield Clinic 1000 North Oak Avenue Marshfield WI 54449	SELF EMPLOYED OPHTHALMOLOGIST	02/28/94	250.00	250.00
Bollheimer MD*Donald A 321 East Wayne Street Fort Wayne IN 46802	Self employed OPHTHALMOLOGIST	02/22/94	500.00	500.00
Chang MD*Lung-Hsiung Suite 205 850 S Atlantic Blvd Monterey Park CA 91754	SELF EMPLOYED OPHTHALMOLOGIST	02/14/94	500.00	500.00
Noguchi MD*Nelson M Suite 104 3400 West Ball Road Anaheim CA 92804	SELF-EMPLOYED OPHTHALMOLOGIST	02/01/94	500.00	500.00
Sanchez MD*Juan L 5340 Gulf Drive Suite 101 New Port Richey FL 34652	Amer Eye Clinic OPHTHALMOLOGIST	02/16/94	250.00	500.00
Cohen MD*Sander M Zeskind Blason III 509 South Lenola Rd/ Ste 11 Moorestown NJ 08057	So Jersey Eye Phys OPHTHALMOLOGIST	02/01/94	300.00	1300.00
	SUBTOTAL		3800.00	

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CONTRIBUTIONS FROM INDIVIDUALS OTHER THAN POLITICAL COMMITTEES

SCHEDULE A

FROM 02/01/94 TO 02/28/94

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NAME AND ADDRESS	EMPLOYER/OCCUPATION	DATE	RECEIPT AMOUNT	YTD AMOUNT
Beardsley MD*Allen H Box 2020 Havre MT 59501	SELF EMPLOYED OPHTHALMOLOGIST	02/22/94	350.00	350.00
Gray MD*James B Baylor Medical Plaza/Suite 760 3600 Gaston Avenue Dallas TX 75246	Self-Employed OPHTHALMOLOGIST	02/01/94	500.00	500.00
Levin MD*Andrew J 1703 South Broad Street Philadelphia PA 19148	Self OPHTHALMOLOGIST	02/14/94	300.00	300.00
Rosales MD*Teresa O Suite 408 2840 Long Beach Boulevard Long Beach CA 90806	Self-Employed PHYSICIAN	02/28/94	250.00	250.00
Steedle MD*Thomas O 3257 Hicks Place Clearwater FL 34621-2017	NEWMANN EYE INST OPHTHALMOLOGIST	02/24/94	500.00	500.00
Wetzig MD*Carl K 616 South Tejon Colorado Springs CO 80903	SELF-EMPLOYED OPHTHALMOLOGIST	02/01/94	250.00	250.00
Nicholson MD*John A 522 South Fourth Street Fulton NY 13069	Self-Employed OPHTHALMOLOGIST	02/08/94	400.00	400.00
Thoms MD*Susan Stuckey Suite 802 28 West Adams Detroit MI 48226	SELF EMPLOYED OPHTHALMOLOGIST	02/10/94	250.00	250.00
	SUBTOTAL		2800.00	

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AMERICAN ACADEMY OF OPHTHALMOLOGY INC POLITICAL COMMITTEE (OPHTHPAC)
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NAME AND ADDRESS	EMPLOYER/OCCUPATION	DATE	RECEIPT AMOUNT	YTD AMOUNT
Troia MD*Sebastian J 2605 South 89th Street Omaha NE 68124	PED OPHTH ASSOC PHYSICIAN	02/24/94	250.00	500.00
Wilshire MD*L Brent Suite 135 825 Gum Branch Road Jacksonville NC 28540	Self-Employed OPHTHALMOLOGIST	02/14/94	300.00	300.00
Koch MD*Douglas D Cullen Eye Institute 6501 Fannin/ MC-200 Houston TX 77030	Self-Employed PHYSICIAN	02/18/94	500.00	500.00
Lederer Jr MD*Charles M Suite 310 6650 Troost Avenue Kansas City MO 64131-3249	Self-Employed PHYSICIAN	02/15/94	600.00	600.00
Pope MD*Daniel B Tanglewood Square/Suite A 2225 59th Street West Bradenton FL 34209	Manatee Eye Clinic OPHTHALMOLOGIST	02/07/94	1000.00	1000.00
Wong MD*James J Y 102 East Avenue Norwalk CT 06851	Self-Employed OPHTHALMOLOGIST	02/23/94	500.00	500.00
Epstein MD*Robert L 5400 West Elm Street Suite 120 McHenry IL 60050	OPH OPHTHALMOLOGIST	02/23/94	250.00	250.00
Greenidge MD*Kevin C NY Eye & Ear Infirmary 310 East 14th Street Room 401 New York NY 10003	SELF-EMPLOYED OPHTHALMOLOGIST	02/08/94	500.00	500.00
	SUBTOTAL		3900.00	

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NAME AND ADDRESS	EMPLOYER/OCCUPATION	DATE	RECEIPT AMOUNT	YTD AMOUNT
Lowery MD*Robert B 105 Central Avenue Searcy AR 72143	Lowery Med Surg E Ct OPHTHALMOLOGIST	02/23/94	1000.00	1000.00
Whittington Jr MD*Curtis D Suite 302 1421 N State St Jackson MS 39202-1644	Self-Employed OPHTHALMOLOGIST	02/08/94	300.00	300.00
Goodart MD*Roy A 4400 South 700 East Salt Lake City UT 84107	OPHTHALMOLOGIST	02/07/94	500.00	500.00
Davison MD*James A Wolfe Clinic 309 East Church Street Marshalltown IA 50158	SELF EMPLOYED OPHTHALMOLOGIST	02/16/94	1000.00	1000.00
Brazek MD*George A 3311 East Murdock Wichita KS 67208	WICHITA CLINIC OPHTHALMOLOGIST	02/07/94	400.00	400.00
Erdey MD*Richard Andrew Mt Carmel East Hosp 6001 East Broad Street Columbus OH 43213	PHYSICIAN OPHTHALMOLOGIST	02/01/94	500.00	500.00
Arnoult MD*Jeffrey B 2855 Gramercy Houston TX 77025	SELF EMPLOYED OPHTHALMOLOGIST	02/16/94	500.00	500.00
Garrett III MD*Charles H Springer Clinic 6160 South Yale Avenue Tulsa OK 74136	SPRINGER CLINIC OPHTHALMOLOGIST	02/01/94	300.00	300.00
	SUBTOTAL		4500.00	

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AMERICAN ACADEMY OF OPHTHALMOLOGY INC POLITICAL COMMITTEE (OPHTHPAC)
ITEMIZED RECEIPTS
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NAME AND ADDRESS	EMPLOYER/OCCUPATION	DATE	RECEIPT AMOUNT	YTD AMOUNT
Jordan MD*Jerome M 200 Mifflin Avenue Scranton PA 18503	Self-Employed PHYSICIAN	02/07/94	300.00	300.00
Woodcock MD*Michael G 1629 Owen Drive Fayetteville NC 28304	SELF EMPLOYED OPHTHALMOLOGIST	02/23/94	500.00	500.00
Calenda MD*Charles C 639 Metacom Avenue Warren RI 02885	MED ASSOC OF R.I. OPHTHALMOLOGIST	02/08/94	500.00	500.00
Abel DO*Marc L Triad Eye Medical Clinic 6140 South Memorial Tulsa OK 74133-1231	SELF EMPLOYED OPHTHALMOLOGIST	02/08/94	500.00	500.00
Leo MD*Richard J 3101 North Harlem Avenue Chicago IL 60634	Suburban Heights M/C OPHTHALMOLOGIST	02/16/94	500.00	500.00
Bateman MD*J Bronwyn Jules Stein Eye Institute UCLA 200 Stein Plaza Los Angeles CA 90024	UCLA OPHTHALMOLOGIST	02/24/94	500.00	500.00
Chen MD*Kevin F Suite 707 12665 Garden Grove Boulevard Garden Grove CA 92643	OPHTHALMOLOGIST	02/08/94	300.00	300.00
Ranelle DO*Brian D Suite 109 1401 Airport Freeway Bedford TX 76021-6657	SELF-EMPLOYED OPHTHALMOLOGIST	02/11/94	300.00	300.00
	SUBTOTAL		3400.00	

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CONTRIBUTIONS FROM INDIVIDUALS OTHER THAN POLITICAL COMMITTEES

SCHEDULE A

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NAME AND ADDRESS	EMPLOYER/OCCUPATION	DATE	RECEIPT AMOUNT	YTD AMOUNT
Davis MD*Richard M 9201 Cypress Lake Drive Fort Myers FL 33919-4941	RICHARD DAV MD PA PHYSICIAN	02/18/94	500.00	500.00
Bartolomei MD*Victoria Cond Madreselva Apt 1402 Calle Ibano #7 Guaynabo PR 00968	Self-Employed OPHTHALMOLOGIST	02/10/94	300.00	300.00
Castoro MD*Charles J 620 Boulton Bel Air MD 21014	Self-Employed OPHTHALMOLOGIST	02/08/94	250.00	250.00
Desai MD*Kiritkumar T Building 5 2095 Klockner Road Hamilton Square NJ 08690	MOSIQUE EYE OPHTHALMOLOGIST	02/14/94	300.00	600.00
Belin MD*Michael W Albany Med College/ Ophth Dept 1 Pinnacle Place- McKown Road Albany NY 12203	ALBANY MED COLLEGE PHYSICIAN	02/01/94	500.00	500.00
Self Jr MD*William G 8403 Bryant Street Westminster CO 80030	SELF EMPLOYED OPHTHALMOLOGIST	02/18/94	1000.00	1000.00
Radtke MD*Norman B Suite 240 3 Audubon Plaza Drive Louisville KY 40217	Self-Employed OPHTHALMOLOGIST	02/22/94	350.00	350.00
Mruczek Sr MD*Arthur W Lake Plains Eye Center 500 Erie Street South Medina NY 14103	Self-Employed OPHTHALMOLOGIST	02/16/94	300.00	300.00
	SUBTOTAL		3500.00	

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CONTRIBUTIONS FROM INDIVIDUALS OTHER THAN POLITICAL COMMITTEES
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NAME AND ADDRESS	EMPLOYER/OCCUPATION	DATE	RECEIPT AMOUNT	YTD AMOUNT
Hester MD*Joe D 2713 Chaffin Lane Magnolia AR 71753	SELF-EMPLOYED OPHTHALMOLOGIST	02/01/94	1000.00	1000.00
Arnold MD*Colin B Suite 204 7601 Timberlake Way Sacramento CA 95823	Self-Employed PHYSICIAN	02/08/94	500.00	500.00
Alpren MD*Thomas W P Suite 110 2500 West Layton Avenue Milwaukee WI 53221	Self-Employed OPHTHALMOLOGIST	02/24/94	500.00	500.00
Grimm MD*Stephen F 1502 North Tucson Boulevard Tucson AZ 85716	Self-Employed OPHTHALMOLOGIST	02/15/94	500.00	500.00
Bethune MD*Victor G 142 Joralemon Street Brooklyn NY 11201	Self-Employed PHYSICIAN	02/14/94	500.00	500.00
Phinney MD*Richard B 501 Tenth Avenue Moline IL 61265	SELF EMPLOYED OPHTHALMOLOGIST	02/07/94	500.00	500.00
Krasney MD*Ronald Suite 510 29001 Cedar Road Lyndhurst OH 44124	SELF PHYSICIAN	02/16/94	250.00	250.00
Farber MD*Matthew E Suite 300 7900 West Jefferson Fort Wayne IN 46804	SELF OPHTHALMOLOGIST	02/11/94	300.00	300.00
	SUBTOTAL		4050.00	

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NAME AND ADDRESS	EMPLOYER/OCCUPATION	DATE	RECEIPT AMOUNT	YTD AMOUNT
Aiello MD*William F Medical College of Wisconsin 9700 West Wisconsin Avenue Milwaukee WI 53226	SELF EMPLOYED OPHTHALMOLOGIST	02/08/94	250.00	250.00
Dastgir MD*Ghulam 2108 Fourth Street Jackson MI 49203	PARKSIDE EYE CLINIC OPHTHALMOLOGIST	02/07/94	500.00	500.00
Great MD*Robert L 1317 North Elm Street Greensboro NC 27401	SELF EMPLOYED OPHTHALMOLOGIST	02/16/94	250.00	250.00
Sumner MD*David B Suite 418 8101 Ninson Farm Road Alexandria VA 22306	SELF EMPLOYED OPHTHALMOLOGIST	02/28/94	1000.00	1000.00
Womack MD*John W 541 West Main Laurens SC 29360	SELF EMPLOYED OPHTHALMOLOGIST	02/22/94	250.00	250.00
Gottlieb MD*Joel M 600 Mt Pleasant Avenue Dover NJ 07801	Self-Employed PHYSICIAN	02/01/94	1000.00	1000.00
Rosenthal MD*Jeanne L 20 East Ninth Street New York NY 10003	SELF OPHTHALMOLOGIST	02/10/94	300.00	300.00
Graham MD*Robert W 1000 Pine Street Klamath Falls OR 97601	SELF EMPLOYED OPHTHALMOLOGIST	02/14/94	500.00	500.00
	SUBTOTAL		4050.00	

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NAME AND ADDRESS	EMPLOYER/OCCUPATION	DATE	RECEIPT AMOUNT	YTD AMOUNT
Petty MD*Stephen T Suite 505 850 East Harvard Avenue Denver CO 80210	Sliva CPA*David W OPHTHALMOLOGIST	02/07/94	1000.00	1000.00
Kroczek MD*Stephen Eric 1225 East Coolspring Avenue Michigan City IN 46360	SELF EMPLOYED OPHTHALMOLOGIST	02/22/94	350.00	350.00
McCormick III MD*Charles O 30 North Emerson Greenwood IN 46143	Self-Employed PHYSICIAN	02/07/94	250.00	250.00
Bryan MD*John B Tulsa Eye Clinic 7171 South Yale Avenue Tulsa OK 74136-6308	Self-Employed OPHTHALMOLOGIST	02/22/94	250.00	250.00
Schmeyer MD*Jon E 250 East Walnut Street Hanover PA 17331	Self-Employed OPHTHALMOLOGIST	02/28/94	1000.00	1000.00
Wing MD*Glenn L 2668 Winkler Avenue PO Box 06559 Fort Myers FL 33906-6559	OPHTHALMOLOGIST	02/23/94	1000.00	1000.00
Olson MD*James R 1000 South Columbia Road Grand Forks ND 58201	Grand Forks Clinic OPHTHALMOLOGIST	02/01/94	250.00	250.00
Coyle MD*J Terrence 1300 116th NE Avenue Bellevue WA 98004	SELF EMPLOYED OPHTHALMOLOGIST	02/08/94	250.00	250.00
	SUBTOTAL		4350.00	

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CONTRIBUTIONS FROM INDIVIDUALS OTHER THAN POLITICAL COMMITTEES
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NAME AND ADDRESS	EMPLOYER/OCCUPATION	DATE	RECEIPT AMOUNT	YTD AMOUNT
Dangel MD*Matthew E Room 5132 456 West Tenth Avenue Columbus OH 43210	MATTHEW E DANGEL OPHTHALMOLOGIST	02/28/94	1000.00	1000.00
Leifer MD*Alden 210 East 32nd Street Paterson NJ 07514	Self-Employed PHYSICIAN	02/16/94	300.00	300.00
Susi DO*J Richard 7326 Lake Underhill Road Orlando FL 32822-6055	Self-Employed OPHTHALMOLOGIST	02/24/94	300.00	300.00
Colombo MD*John 22835 Kelly Road Eastpointe MI 48021	SELF-EMPLOYED OPHTHALMOLOGIST	02/08/94	250.00	500.00
Soliman MD*Gamil Z 15831 Mack Avenue Detroit MI 48224	SELF EMPLOYED OPHTHALMOLOGIST	02/16/94	250.00	250.00
Lightfoot MD*David W 1120 Montgomery Drive Santa Rosa CA 95405	W & Dan Lightfoot MD PHYSICIAN	02/11/94	250.00	250.00
McNamara MD*J Arch Associated Retinal Surgeons PA 501 Cooper Landing Road Cherry Hill NJ 08002-2514	Retinovitreous Assoc OPHTHALMOLOGIST	02/11/94	250.00	250.00
Foley Jr MD*John A PO Box 687 Exmore VA 23350	. OPHTHALMOLOGIST	02/18/94	250.00	250.00
	SUBTOTAL		2850.00	

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CONTRIBUTIONS FROM INDIVIDUALS OTHER THAN POLITICAL COMMITTEES
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NAME AND ADDRESS	EMPLOYER/OCCUPATION	DATE	RECEIPT AMOUNT	YTD AMOUNT
Stanton Jr MD*Francis X Scripps Clinic & Rsch Fndtn 2020 Genesee Avenue San Diego CA 92123	Scripps Clinic OPHTHALMOLOGIST	02/01/94 02/16/94	250.00 250.00	500.00
Steiner MD*Michael D 14031 Ambaum Boulevard SW Seattle WA 98166	Self-Employed OPHTHALMOLOGIST	02/14/94	300.00	300.00
Portis MD*Jon M 1380 Lusitana Street Suite 714 Honolulu HI 96813	SELF EMPLOYED OPHTHALMOLOGIST	02/11/94	250.00	250.00
Rice MD*Geoffrey L 2488 Hospital Drive Ukiah CA 95482	OPTHALMOLOGIST OPHTHALMOLOGIST	02/28/94	250.00	250.00
Nelson MD*Marietta Suite 401 2020 Goldring Las Vegas NV 89106	SELF-EMPLOYED OPHTHALMOLOGIST	02/16/94	900.00	1900.00
Whitman MD*Jeffrey 2801 Lemmon Avenue West Dallas TX 75204	Charles B Key MD PHYSICIAN	02/11/94	500.00	500.00
Gelkin MD*Michelle Suite 201 2835 Smith Avenue Baltimore MD 21209	SOPH OPHTHALMOLOGIST	02/22/94	250.00	250.00
Pascucci MD*Stephen I 200 Mifflin Avenue Scranton PA 18503	SELF EMPLOYED OPHTHALMOLOGIST	02/23/94	250.00	250.00
	SUBTOTAL		3200.00	

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NAME AND ADDRESS	EMPLOYER/OCCUPATION	DATE	RECEIPT AMOUNT	YTD AMOUNT
Reingold MD*Warren J 12139 Riverside Drive North Hollywood CA 91607	SELF EMPLOYED OPHTHALMOLOGIST	02/08/94	250.00	250.00
Saenz Jr MD*Angel Suite 203 1521 South Staples Corpus Christi TX 78404-3122	SELF-EMPLOYED OPHTHALMOLOGIST	02/23/94	250.00	500.00
Rea MD*Robert A 201 East Clinton Street Goshen IN 46526-3340	Self-Employed OPHTHALMOLOGIST	02/14/94	300.00	300.00
Bishop MD*Douglas Scott 700 West El Norte Parkway Escondido CA 92026	Loma Linda Univ OPHTHALMOLOGIST	02/01/94	500.00	500.00
Minning Jr MD*Carl A 2935 Maple Avenue Zanesville OH 43701-1872	Self-Employed PHYSICIAN	02/01/94	300.00	300.00
Budd MD*Robert M Blair Medical Center 501 Howard Avenue Altoona PA 16601	OPHTHALMOLOGIST	02/23/94	500.00	500.00
Manning MD*Jean R Suite 103 1330 North Beckley Avenue Dallas TX 75203-1206	Self-Employed PHYSICIAN	02/16/94	250.00	250.00
Moll MD*Jean M Amrien 375 Thomas More Parkway Crestview Hills KY 41017	SELF-EMPLOYED OPHTHALMOLOGIST	02/01/94	500.00	500.00
	SUBTOTAL		2850.00	

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AMERICAN ACADEMY OF OPHTHALMOLOGY INC POLITICAL COMMITTEE (OPHTHPAC)
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Shultz MD*Sherman C PO Box 607 580 Riverside Adrian MI 49221	THE EYE ASSOCIATES OPHTHALMOLOGIST	02/08/94	500.00	500.00
Goloff MD*Michael H Suite 100 3031 Telegraph Avenue Berkeley CA 94705	SELF EMPLOYED OPHTHALMOLOGIST	02/28/94	250.00	250.00
Reiser MD*Harvey J 390 Pierce Street Kingston PA 18704	Mills Eye Hosp OPHTHALMOLOGIST	02/10/94	250.00	250.00
Durand MD*Julie R 201B Chilhowee Medical Park Maryville TN 37801	SELF-EMPLOYED OPHTHALMOLOGIST	02/08/94	500.00	500.00
Greff MD*Linda J Cincinnati Eye Institute 10494 Montgomery Road Cincinnati OH 45242	OPHTHALMOLOGIST	02/28/94	300.00	300.00
Felter MD*Jeffrey S 2445 East Wilcox Drive Sierra Vista AZ 85635	SELF EMPLOYED OPHTHALMOLOGIST	02/14/94	500.00	500.00
Smith MD*Peter Christian Watson Clinic South 1033 Brane Field Road Lakeland FL 33803	SELF EMPLOYED OPHTHALMOLOGIST	02/24/94	250.00	250.00
Ferrito MD*Carla #2813 3660 North Lake Shore Chicago IL 60613	UNIV OF ILLINOIS OFC OPHTHALMOLOGIST	02/10/94	300.00	300.00
	SUBTOTAL		2850.00	

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AMERICAN ACADEMY OF OPHTHALMOLOGY INC POLITICAL COMMITTEE (OPHTHPAC)
ITEMIZED RECEIPTS
CONTRIBUTIONS FROM INDIVIDUALS OTHER THAN POLITICAL COMMITTEES
SCHEDULE A
FROM 02/01/94 TO 02/28/94

Any information copied from such Reports or 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 AND ADDRESS	EMPLOYER/OCCUPATION	DATE	RECEIPT AMOUNT	YTD AMOUNT
Raskauskas MD*Paul Andrew 2668 Winkler Avenue PO Box 06559 Fort Myers FL 33906-6559	SELF-EMPLOYED OPHTHALMOLOGIST	02/01/94	1000.00	1000.00
Colquhoun MD*Peter Jeffrey 198 College Street Battle Creek MI 49017	SELF EMPLOYED OPHTHALMOLOGIST	02/15/94	250.00	250.00
Mostellar MD*Charles S 3701 Dauphin Street Mobile AL 36608	SELF EMPLOYED OPHTHALMOLOGIST	02/07/94	250.00	250.00
Beale MD*Jerome A 264 Fox Trail Bourbonnais IL 60914-1735	TRAUMA MED CENTER PHYSICIAN	02/01/94	300.00	300.00
Allen MD*J Geoffrey Suite 400 3545 Olentangy River Road Columbus OH 43214	SELF-EMPLOYED OPHTHALMOLOGIST	02/01/94	250.00	250.00
Martin MD*Melanie C Suite 15 8200 Flourtown Avenue Wyndmoor PA 19118	SELF-EMPLOYED OPHTHALMOLOGIST	02/08/94	250.00	250.00
Shaver MD*Jeffrey T 301 South Boulevard Suite 119 Edmond OK 73034	STATE OF OKLAHOMA OPHTHALMOLOGIST	02/08/94	250.00	250.00
Whipple MD*Daniel R 5250 East US 36 890 Prestwick Pointe VIII Danville IN 46122	SELF EMPLOYED OPHTHALMOLOGIST	02/24/94	500.00	500.00

SUBTOTAL 3050.00

*** TOTAL *** 93074.33

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE OF

FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

AMERICAN ACADEMY OF OPHTHALMOLOGY, INC., POLITICAL COMMITTEE (OPHTHPAC)

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: Primary / General / Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
A. Union Bank 350 California Street San Francisco ca 94104	Merchant/Bank Fees Other (specify) 1,309.77	02/28/94	18.20 207.70
B. American Academy of Ophthalmology 655 Beach Street San Francisco CA 94109	EVP Reimbursement Other (specify) 1,734.20	02/28/94	964.60
C. Rent-A-Computer 4701 Patrick Henry Dr #1502 Santa Clara CA 95054	Computer Other (specify) 720.00	02/28/94	480.00
D. Mellman-Lazarus-Lake 1054 31st NW Washington DC 20007	Other (specify) YTD 10,800.00	02/28/94	10,800.00
E. American Express 2423 E. Lincoln Dr Phoenix AZ 85016	Merchant Fees	02/28/94	70.00
F.			
G.			
H.			
I.			

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

TOTAL This Period (last page this line number only) 12,540.50

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CONTRIBUTIONS TO FEDERAL CANDIDATES AND OTHER POLITICAL COMMITTEES
SCHEDULE B
FROM 02/01/94 TO 02/28/94

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NAME AND ADDRESS	DISBURSEMENT PURPOSE	DATE	AMOUNT
EFFECTIVE GOVERNMENT COMM 507 CAPITOL COURT NE WASHINGTON DC 20002	MULTICANDIDATE PAC HOUSE /3 /MO 1994/OTHER	02/15/94	5000.00
DEMOCRATIC NATIONAL COMMITTEE 430 SOUTH CAPITOL ST NE WASHINGTON DC 20003	DEMOCRATIC PARTY ACTIVITI ES / / 94 /OTHER	02/25/94	15000.00
MIKE ANDREWS FOR CONGRESS 1300 MAIN STREET STE 612 HOUSTON TX 77002	SENATE / /TX 1994/PRIMARY	02/25/94	2000.00
DEMOCRATIC SENATORIAL CA CAMPAIGN COMMITTEE 430 SOUTH CAPITOL ST SE WASHINGTON DC 20003	SENATE / / 1994/PRIMARY	02/16/94	14250.00
DEMOCRATIC CONGRESSIONAL CMPGN COMM/MAJ LDR FUND 430 SOUTH CAPITOL ST SE WASHINGTON DC 20003	HOUSE / / 1994/PRIMARY	02/15/94	14250.00
		SUBTOTAL	50500.00

~~*** TOTAL ***~~ [redacted]

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 3

FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

AMERICAN ACADEMY OF OPHTHALMOLOGY POLITICAL ACTION COMMITTEE, INC. (OPHTHPAC)

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
A. BIRCH BAYH FOR SMTR COMM C/O IN DEM ST CNTRL COMM PO BOX 3366 INDIANAPOLIS IN 46206-3366	DEBT RETIREMENT SENATE/IN/1980/OTHER Disbursement for: Primary General Other (specify)	02/28/94	<1000.00> VOID CHECK
B. CITIZENS FOR BOBBY RUSH 3361 SOUTH KING DRIVE CHICAGO IL 60619	HOUSE/1ST/IL/94/PRIMARY Disbursement for: Primary General Other (specify)	02/28/94	<2000.00> VOID CHECK
C. BISHOP FOR CONGRESS PO BOX 909 COLUMBUS GA	DEBT RETIREMENT HOUSE/2/GA/1992/GENERAL Disbursement for: Primary General Other (specify)	02/28/94	< 500.00> VOID CHECK
D. MAC COLLINS FOR CONGRESS PO BOX 35 JONESBORO GA 30237	DEBT RETIREMENT HOUSE/3/GA//1992/GENERAL Disbursement for: Primary General Other (specify)	02/28/94	< 500.00> VOID CHECK
E. LEVY FOR CONGRESS COMM PO BOX 323 LYNBROOK NY 11563	DEBT RETIREMENT HOUSE/4/NY/1992/GENERAL Disbursement for: Primary General Other (specify)	02/28/94	< 500.00> VOID CHECK
F. BILL THOMAS CAMPAIGN COMM PO BOX 23175 WASHINGTON DC 20026	HOUSE/21/CA/1994/PRIMARY Disbursement for: Primary General Other (specify)	02/28/94	<1000.00> VOID CHECK
G. KENT CONRAD FOR SENATE 236 MASSACHUSETTS AVE NE, STE 202 WASHINGTON DC 20002	SENATE/MD/1194/PRIMARY Disbursement for: Primary General Other (specify)	02/28/94	<5000.00> VOID CHECK
H. CRAPO FOR CONGRESS 3752 KELLER AVENUE ALEXANDRIA VA 22302	DEBT RETIREMENT HOUSE/2/ID/1992/OTHER Disbursement for: Primary General Other (specify)	02/28/94	< 500.00> VOID CHECK
I. FRIENDS OF PHIL SHARP PO BOX 1046 MUNCIE IN 47305	HOUSE/2/IN/1994/PRIMARY Disbursement for: Primary General Other (specify)	02/28/94	< 500.00> VOID CHECK

SUBTOTAL of Disbursements This Page (optional) ..... <11,500.00>

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

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 3 OF 3

FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

AMERICAN ACADEMY OF OPHTHALMOLOGY POLITICAL ACTION COMMITTEE, INC. (OPHTHPAC)

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. CONGRESSMAN BOB CLEMENT COMMITTEE PO BOX 150608 NASHVILLE TN 37215	HOUSE/5/TN/1994/PRIMARY Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	2/28/94	< 500.00> VOID CHECK
B. COMM REELECT CONGRESSMAN NEAL PO BOX 2884 WASHINGTON DC 01103	HOUSE/2/MA/1994/PRIMARY Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	2/28/94	<1000.00> VOID CHECK
C. CHET EDWARDS FOR CONGRESS PO BOX 70528 SOUTHWEST STATION WASHINGTON DC 20024	DEPT RETIREMENT HOUSE/11/TX/1992/OTHER Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	2/28/94	< 500.00> VOID CHECK
D. PETE STARK REELECTION COM PO BOX 121 HAYWARD CA 94543	HOUSE/13/CA/1994/PRIMARY Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	2/28/94	<3000.00> VOID CHECK
E. GEPHARDT IN CONGRESS 507 CAPITAL COURT NE SUITE 100 WASHINGTON DC 20002	HOUSE/3/MO/1994/PRIMARY Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	2/28/94	<5000.00>
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	<10,000.00>
TOTAL This Period (last page this line number only)	<29,000>

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SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 1 of 1 for
LINE NUMBER 10
(Use separate schedules for each numbered line)

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
American Academy of Ophthalmology, INC. Political Committee (OPHTHPAC)				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Mellman-Lazarus-Lake 1054 31st St. NW Washington DC 20007	10,800	0	10,800	0
Nature of Debt (Purpose): Accrued Liability For Polling Survey				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				

1) SUBTOTALS This Period This Page (optional)	0
2) TOTAL This Period (last page this line only)	0
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	0
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	0

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Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

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

☐	Hand Delivered	DATE OF RECEIPT
☐	First Class Mail	POSTMARKED
☑	Registered/Certified Mail	POSTMARKED 3-21-94
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House Office of Records and Registration	DATE OF RECEIPT
☐	Received from the Senate Office of Public Records	DATE OF RECEIPT
☐	Other (Specify):	POSTMARKED and/or DATE OF RECEIPT

JMN
PREPARER

3-28-94
DATE PREPARED

FEC FORM 70-2 (12/92)

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