FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT ▼** Example: If typing, type over the lines. 12FE4M5

American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)

ADDRESS (number and street) ▼ 655 Beach Street

☐ Check if different than previously reported. (ACC)

CITY ▲	STATE ▲	ZIP CODE ▲
San Francisco	CA	94109 –

2. **FEC IDENTIFICATION NUMBER ▼** C C00196246

3. IS THIS REPORT ☒ NEW (N) **OR** ☐ 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 Year-End 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)
☒ 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 (12S)

Election on M M / D D / Y Y Y Y in the State of

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

Election on M M / D D / Y Y Y Y in the State of

5. Covering Period 03 / 01 / 2016 through 03 / 31 / 2016

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 Jill Boyett

Signature of Treasurer *Jill Boyett* ***[Electronically Filed]*** Date 04 / 20 / 2016

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							

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: MM 03 / DD 01 / YYYY 2016 To: MM 03 / DD 31 / YYYY 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, YYYY 2016		288757.48
(b) Cash on Hand at Beginning of Reporting Period	242818.89	
(c) Total Receipts (from Line 19)	49091.35	100638.56
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	291910.24	389396.04
7. Total Disbursements (from Line 31)	58101.87	155587.67
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	233808.37	233808.37
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	

☒ 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. 06/2004)

Write or Type Committee Name

American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)

Report Covering the Period: From: 03 / 01 / 2016 To: 03 / 01 / 2016

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)	38832.21	74539.29
(ii) Unitemized	10259.14	21099.27
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	49091.35	95638.56
(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) ▶	49091.35	95638.56
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	5000.00
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)) ▶	49091.35	100638.56
20. Total Federal Receipts (subtract Line 18(c) from Line 19) ▶	49091.35	100638.56

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) 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	101.87	238.74
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶	101.87	238.74
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	58000.00	142000.00
24. Independent Expenditures (use Schedule E)	0.00	13348.93
25. Coordinated Party Expenditures (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) 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))	58101.87	155587.67
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) ▶	58101.87	155587.67

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)	49091.35	95638.56
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	49091.35	95638.56
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	101.87	238.74
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ▶	101.87	238.74

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)
[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): Patrick Aiello
Mailing Address: 275 W 28th St
City: Yuma | State: AZ | Zip Code: 85364-7308
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 ▼: 249.99
Date of Receipt: 03 / 15 / 2016
Transaction ID : 5AB2D491-D9B9-4519-9
Amount of Each Receipt this Period: 83.33
[ ] Memo Item

B. Full Name (Last, First, Middle Initial): Nicholas Barna
Mailing Address: 1060 N Church St
City: Hazleton | State: PA | Zip Code: 18202-1444
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 / 24 / 2016
Transaction ID : F386EB5D-56A4-4DFA-B
Amount of Each Receipt this Period: 500.00
[ ] Memo Item

C. Full Name (Last, First, Middle Initial): Gregg Berdy
Mailing Address: 12990 Manchester Rd Ste 200
City: Des Peres | State: MO | Zip Code: 63131-1860
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 / 28 / 2016
Transaction ID : ABB3848C-6204-4BBC-A
Amount of Each Receipt this Period: 365.00
[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 948.33

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

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

A. Full Name (Last, First, Middle Initial): Terry Bergstrom
Mailing Address: 1000 Wall St Rm 649
City: Ann Arbor State: MI Zip Code: 48105-1986
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 / 2016
Transaction ID : 6578F5FF-1870-425A-A
Amount of Each Receipt this Period: 365.00
[ ] Memo Item

B. Full Name (Last, First, Middle Initial): Steven Bodine
Mailing Address: 915 Palmer Road
City: Bronxville State: NY Zip Code: 10708
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 / 21 / 2016
Transaction ID : 23189FB2-258B-494E-8
Amount of Each Receipt this Period: 500.00
[ ] Memo Item

C. Full Name (Last, First, Middle Initial): Evelyne Bouchard Kindy
Mailing Address: PO Box 5020
City: Minot State: ND Zip Code: 58702-5020
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 / 01 / 2016
Transaction ID : F3E90FDF-9FD8-42C7-9
Amount of Each Receipt this Period: 250.00
[ ] Memo Item

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) for each category of the Detailed Summary Page

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

A. Full Name (Last, First, Middle Initial): Joyce Cassen
Mailing Address: 850 W Hind Dr Ste 212
City: Honolulu State: HI Zip Code: 96821-1845
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: 03/30/2016
Transaction ID : BE5084CA-0A16-449E-B
Amount of Each Receipt this Period: 365.00
[ ] Memo Item

B. Full Name (Last, First, Middle Initial): Denise Chamblee
Mailing Address: 10 Jacobs Ln
City: Newport News State: VA Zip Code: 23606-2815
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: 03/29/2016
Transaction ID : DA638EE9-0021-4A95-8
Amount of Each Receipt this Period: 365.00
[ ] Memo Item

C. Full Name (Last, First, Middle Initial): William Clifford
Mailing Address: 102 Drury Ln
City: Garden City State: KS Zip Code: 67846-9671
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: 03/29/2016
Transaction ID : 342DFF7E-CC0A-4FB7-A
Amount of Each Receipt this Period: 2500.00
[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 3230.00

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

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ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial): Sander M. Zeskin Cohen
Mailing Address: 509 S Lenola Rd Bldg 11
City: Moorestown State: NJ Zip Code: 08057-1556
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: 249.99
Date of Receipt: 03 / 15 / 2016
Transaction ID : DE246684-2B66-4BCC-A
Amount of Each Receipt this Period: 83.33
[ ] Memo Item

B. Full Name (Last, First, Middle Initial): Brian Connolly
Mailing Address: 28 Delancey Ct
City: Pittsford State: NY Zip Code: 14534-2700
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 / 28 / 2016
Transaction ID : 500D61B9-973D-4303-B
Amount of Each Receipt this Period: 365.00
[ ] Memo Item

C. Full Name (Last, First, Middle Initial): Jing Dong
Mailing Address: 651 S Milledge Ave
City: Athens State: GA Zip Code: 30605
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 / 21 / 2016
Transaction ID : 3611E365-96ED-48A0-9
Amount of Each Receipt this Period: 250.00
[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 698.33

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial): Paul Andrew Edwards
Mailing Address: 4260 Apple Valley Lane
City: West Bloomfield | State: MI | Zip Code: 48323
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 / 29 / 2016
Transaction ID : 6E831E9F-35D9-4C9B-9
Amount of Each Receipt this Period: 500.00
[ ] Memo Item

B. Full Name (Last, First, Middle Initial): Randy Ennen
Mailing Address: 3312 S 70th St
City: Fort Smith | State: AR | Zip Code: 72903
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 / 21 / 2016
Transaction ID : 28F997E1-7D08-47F5-8
Amount of Each Receipt this Period: 1000.00
[ ] Memo Item

C. Full Name (Last, First, Middle Initial): Brett Taylor Foxman
Mailing Address: 1500 Tilton Rd
City: Northfield | State: NJ | Zip Code: 08225
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 / 20 / 2016
Transaction ID : 680F628D-5C44-4F86-A
Amount of Each Receipt this Period: 365.00
[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1865.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial): Lyle Freedman
Mailing Address: 11803 South Fwy Ste 114
City: Burleson | State: TX | Zip Code: 76028-7028
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 / 18 / 2016
Transaction ID : 12F98BDC-B2A0-4CA6-9
Amount of Each Receipt this Period: 365.00
[ ] Memo Item

B. Full Name (Last, First, Middle Initial): Sidney Gicheru
Mailing Address: 440 W Lbj Fwy Ste 300
City: Irving | State: TX | Zip Code: 75063-3841
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 ▼: 625.03
Date of Receipt: 03 / 15 / 2016
Transaction ID : C44DDE99-71EC-491D-8
Amount of Each Receipt this Period: 208.37
[ ] Memo Item

C. Full Name (Last, First, Middle Initial): Michael Gilbert
Mailing Address: 12301 NE 10th Pl Ste 200
City: Bellevue | State: WA | Zip Code: 98005-2487
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 ▼: 250.03
Date of Receipt: 03 / 15 / 2016
Transaction ID : B1660BDE-080C-4C4D-8
Amount of Each Receipt this Period: 83.37
[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 656.74

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial): Robert Green Jr.
Mailing Address: 414 Navarro St Ste 400
City: San Antonio State: TX Zip Code: 78205-2505
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 / 28 / 2016
Transaction ID : D0C07313-951E-4B4C-9
Amount of Each Receipt this Period: 365.00
[ ] Memo Item

B. Full Name (Last, First, Middle Initial): Craig Greven
Mailing Address: 1040 Fieldwood Lane
City: Winston Salem State: NC Zip Code: 27106
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 / 24 / 2016
Transaction ID : DA9706CE-B44A-4440-B
Amount of Each Receipt this Period: 365.00
[ ] Memo Item

C. Full Name (Last, First, Middle Initial): David Harris Jr.
Mailing Address: 1928 Alcoa Hwy Ste 324
City: Knoxville State: TN Zip Code: 37920-1505
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: 500.00
Date of Receipt: 03 / 25 / 2016
Transaction ID : 51791C01-FC52-4743-B
Amount of Each Receipt this Period: 500.00
[ ] Memo Item

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) for each category of the Detailed Summary Page

FOR LINE NUMBER: (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): Robert Haverly
Mailing Address: 311 W 24th St Ste 401
City: Erie | State: PA | Zip Code: 16502-2667
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 / 21 / 2016
Transaction ID : 80AB203F-3948-475D-9
Amount of Each Receipt this Period: 365.00
[ ] Memo Item

B. Full Name (Last, First, Middle Initial): Kurt Heitman
Mailing Address: 113 Doctors Dr
City: Greenville | State: SC | Zip Code: 29605
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 / 22 / 2016
Transaction ID : B690DA16-376D-4EAD-A
Amount of Each Receipt this Period: 1000.00
[ ] Memo Item

C. Full Name (Last, First, Middle Initial): Dale Heuer
Mailing Address: 1900 Norhardt Drive #313
City: Brookfield | State: WI | Zip Code: 53045-5088
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 / 22 / 2016
Transaction ID : C7462DDF-F025-45EF-B
Amount of Each Receipt this Period: 365.00
[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1730.00

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)
[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): Marc Hirsch
Mailing Address: 10714 N San Marino Dr
City: Mequon State: WI Zip Code: 53092-5964
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 / 18 / 2016
Transaction ID : 90ACE177-AE18-492F-A
Amount of Each Receipt this Period: 365.00
[ ] Memo Item

B. Full Name (Last, First, Middle Initial): Anthony Pruett Johnson
Mailing Address: 601 Halton Rd
City: Greenville State: SC Zip Code: 29607-3403
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 / 25 / 2016
Transaction ID : A02017D8-E1D4-44B1-9
Amount of Each Receipt this Period: 250.00
[ ] Memo Item

C. Full Name (Last, First, Middle Initial): Brian Joondeph
Mailing Address: 103 Glenmoor Lane
City: Cherry Hills State: CO Zip Code: 80113
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 / 22 / 2016
Transaction ID : 6F5A6761-3CA8-46C5-8
Amount of Each Receipt this Period: 365.00
[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 980.00

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

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

A. Full Name (Last, First, Middle Initial): Emilio Justo
Mailing Address: 6400 N 61st Place
City: Paradise Valley State: AZ Zip Code: 85253
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: 456.26
Date of Receipt: 03/24/2016
Transaction ID : 10F4A2A1-5EB2-401B-9
Amount of Each Receipt this Period: 365.00
[ ] Memo Item

B. Full Name (Last, First, Middle Initial): Anne Keating
Mailing Address: 3433 Shadow Wood Lane
City: West Fargo State: ND Zip Code: 58078
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: 03/25/2016
Transaction ID : 83A3E606-2737-4479-8
Amount of Each Receipt this Period: 500.00
[ ] Memo Item

C. Full Name (Last, First, Middle Initial): Craig Kliger
Mailing Address: 100 Galewood Cir
City: San Francisco State: CA Zip Code: 94131-1132
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: 249.98
Date of Receipt: 03/31/2016
Transaction ID : 5F94C11D-6BCF-461F-A
Amount of Each Receipt this Period: 41.63
[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 906.63

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

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

A. Full Name (Last, First, Middle Initial): Daniel Krivoy
Mailing Address: 9808 Venice Blvd Ste 400
City: Culver City | State: CA | Zip Code: 90232-6807
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 / 11 / 2016
Transaction ID : F1A55E4B-4F2F-4047-9
Amount of Each Receipt this Period: 365.00
[ ] Memo Item

B. Full Name (Last, First, Middle Initial): Evan Lagouros
Mailing Address: 8921 Wood Sage Rd
City: Peoria | State: IL | Zip Code: 61615
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 / 2016
Transaction ID : 30BB6AEF-17F8-4381-9
Amount of Each Receipt this Period: 1000.00
[ ] Memo Item

C. Full Name (Last, First, Middle Initial): Pete Lagouros
Mailing Address: 8921 N Wood Sage Rd
City: Peoria | State: IL | Zip Code: 61615-7822
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 / 30 / 2016
Transaction ID : C502C7A1-1185-40C0-B
Amount of Each Receipt this Period: 1000.00
[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 2365.00

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

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

A. Full Name (Last, First, Middle Initial): Daniel Lange
Mailing Address: 1900 South Ave
City: LA Crosse State: WI Zip Code: 54601-5467
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 / 28 / 2016
Transaction ID : 348AF88C-37D0-4021-8
Amount of Each Receipt this Period: 365.00
[ ] Memo Item

B. Full Name (Last, First, Middle Initial): Roger Lash
Mailing Address: 9 Mulberry Ln
City: White Plains State: NY Zip Code: 10605
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 / 24 / 2016
Transaction ID : EC07F56E-C386-4EBB-8
Amount of Each Receipt this Period: 365.00
[ ] Memo Item

C. Full Name (Last, First, Middle Initial): Adrian Lavina
Mailing Address: 3399 Pga Blvd Ste 350
City: Palm Beach Gardens State: FL Zip Code: 33410-2831
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: 249.99

Date of Receipt: 03 / 15 / 2016
Transaction ID : 394D30B1-8591-48B4-A
Amount of Each Receipt this Period: 83.33
[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 813.33

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

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[ ] 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): Mary Lawrence
Mailing Address: 19545 Hampshire Ct.
City: Prior Lake | State: MN | Zip Code: 55372
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 ▼: 1250.01
Date of Receipt: 03 / 31 / 2016
Transaction ID : 8B3FE2A6-5F6B-4CAD-8
Amount of Each Receipt this Period: 416.67
[ ] Memo Item

B. Full Name (Last, First, Middle Initial): Julie Lee
Mailing Address: 3950 Kresge Way Ste 105
City: Louisville | State: KY | Zip Code: 40207-4637
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 ▼: 250.03
Date of Receipt: 03 / 31 / 2016
Transaction ID : A5AC4D72-7477-417F-8
Amount of Each Receipt this Period: 83.37
[ ] Memo Item

C. Full Name (Last, First, Middle Initial): Marcos Lopez
Mailing Address: 9005 W Cermak Rd
City: North Riverside | State: IL | Zip Code: 60546
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 / 21 / 2016
Transaction ID : B16E1632-98EC-4466-A
Amount of Each Receipt this Period: 500.00
[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1000.04

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial): Masud Malik
Mailing Address: 3865 N Mulford Rd
City: Rockford | State: IL | Zip Code: 61114-5603
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 ▼: 499.98
Date of Receipt: 03 / 15 / 2016
Transaction ID : E134F5F3-D095-41EC-A
Amount of Each Receipt this Period: 83.33
[ ] Memo Item

B. Full Name (Last, First, Middle Initial): Masud Malik
Mailing Address: 5 Acadia Dr.
City: S. Barrington | State: IL | Zip Code: 60010
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 ▼: 499.98
Date of Receipt: 03 / 15 / 2016
Transaction ID : 2581ECD5-FFF2-4395-8
Amount of Each Receipt this Period: 83.33
[ ] Memo Item

C. Full Name (Last, First, Middle Initial): Nick Mamalis
Mailing Address: 65 Mario Capecchi Dr
City: Salt Lake City | State: UT | Zip Code: 84132-0001
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 / 2016
Transaction ID : 7CBD4C29-10A3-4067-B
Amount of Each Receipt this Period: 1000.00
[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1166.66

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

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

A. Full Name (Last, First, Middle Initial): Cynthia Mattox
Mailing Address: 72 Chestnut St
City: Weston State: MA Zip Code: 02493-1533
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 / 01 / 2016
Transaction ID : 8480D8FD-39F6-42CF-9
Amount of Each Receipt this Period: 365.00
[ ] Memo Item

B. Full Name (Last, First, Middle Initial): Terrence McCanna
Mailing Address: 2525 County Trunk I
City: Chippewa Falls State: WI Zip Code: 54729
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 / 15 / 2016
Transaction ID : 9398C064-5C70-497C-A
Amount of Each Receipt this Period: 365.00
[ ] Memo Item

C. Full Name (Last, First, Middle Initial): Christopher McDevitt
Mailing Address: 530 Coral Dr
City: Lake City State: MN Zip Code: 55041-2082
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 / 29 / 2016
Transaction ID : 7FD0FDBC-ADEC-493E-8
Amount of Each Receipt this Period: 250.00
[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 980.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial): Michael Edward Edward Migliori
Mailing Address: 392 Rochambeau Avenue
City: Providence State: RI Zip Code: 02906
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: 249.99
Date of Receipt: 03 / 15 / 2016
Transaction ID : CE152450-26ED-4E6A-9
Amount of Each Receipt this Period: 83.33
[ ] Memo Item

B. Full Name (Last, First, Middle Initial): Anne Elizabeth Miller
Mailing Address: 413 W 6th Ave
City: Cheyenne State: WY Zip Code: 82001-1253
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 / 21 / 2016
Transaction ID : 6B32764D-C6F4-4507-B
Amount of Each Receipt this Period: 1000.00
[ ] Memo Item

C. Full Name (Last, First, Middle Initial): Darby Miller
Mailing Address: 108 Newport Lane
City: Ponte Vedra Beach State: FL Zip Code: 32082
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: 210.84
Date of Receipt: 03 / 31 / 2016
Transaction ID : 20AD0F9B-A44F-4402-B
Amount of Each Receipt this Period: 150.00
[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1233.33

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial): Darby Miller
Mailing Address: 108 Newport Ln
City: Ponte Vedra Beach | State: FL | Zip Code: 32082
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 ▼: 210.84
Date of Receipt: 03 / 31 / 2016
Transaction ID : E503E59C-256D-45D4-9
Amount of Each Receipt this Period: 30.42
[ ] Memo Item

B. Full Name (Last, First, Middle Initial): Carl Minning Jr.
Mailing Address: 2935 Maple Ave
City: Zanesville | State: OH | Zip Code: 43701-1748
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 / 24 / 2016
Transaction ID : 82A0D23A-5098-4289-8
Amount of Each Receipt this Period: 500.00
[ ] Memo Item

C. Full Name (Last, First, Middle Initial): Paul Moyer
Mailing Address: 520 Bruton Cir
City: Kettering | State: OH | Zip Code: 45429-1624
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 / 24 / 2016
Transaction ID : F4DB04C2-2CD4-495D-9
Amount of Each Receipt this Period: 500.00
[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1030.42

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial): Janet Neigel
Mailing Address: 254 Columbia Tpke Ste 200
City: Florham Park State: NJ Zip Code: 07932-1237
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 / 28 / 2016
Transaction ID : 6EAA2C6D-50F7-4C77-8
Amount of Each Receipt this Period: 500.00
[ ] Memo Item

B. Full Name (Last, First, Middle Initial): Nina Nordgren
Mailing Address: 7332 N Seagrape Rd
City: Punta Gorda State: FL Zip Code: 33955
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: 300.00
Date of Receipt: 03 / 31 / 2016
Transaction ID : 4245B65F-9DFD-4C33-9
Amount of Each Receipt this Period: 100.00
[ ] Memo Item

C. Full Name (Last, First, Middle Initial): Michael Oats
Mailing Address: 50 Staniford St Ste 600
City: Boston State: MA Zip Code: 02114-2587
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 / 28 / 2016
Transaction ID : BA869D74-F753-4EA7-8
Amount of Each Receipt this Period: 1000.00
[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1600.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial): Stephen Orr
Mailing Address: 8377 Lakewood Dr
City: Findlay State: OH Zip Code: 45840-8885
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 ▼: 1249.99
Date of Receipt: 03 / 15 / 2016
Transaction ID : D9B23057-CEB1-4AEB-A
Amount of Each Receipt this Period: 83.33
[ ] Memo Item

B. Full Name (Last, First, Middle Initial): Stephen Orr
Mailing Address: 8377 Lakewood Dr
City: Findlay State: OH Zip Code: 45840-8885
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 ▼: 1249.99
Date of Receipt: 03 / 29 / 2016
Transaction ID : 05DE2EE7-347F-40A8-A
Amount of Each Receipt this Period: 1000.00
[ ] Memo Item

C. Full Name (Last, First, Middle Initial): Richard Ou
Mailing Address: 3767 Georgetown St
City: Houston State: TX Zip Code: 77005-2821
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 / 30 / 2016
Transaction ID : 83020EEE-7DAD-4E65-A
Amount of Each Receipt this Period: 500.00
[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1583.33

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial): Mark Patron
Mailing Address: 1266 S Gaylord St
City: Denver State: CO Zip Code: 80210
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: M M 03 / D D 22 / Y Y Y Y 2016
Transaction ID : 7DD96A04-5B43-40A7-9
Amount of Each Receipt this Period: 500.00
[ ] Memo Item

B. Full Name (Last, First, Middle Initial): Bryan Phillips
Mailing Address: 3807 Royal Portrush Dr
City: Naperville State: IL Zip Code: 60564-5916
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: M M 03 / D D 10 / Y Y Y Y 2016
Transaction ID : BB4E7525-EB3B-4970-9
Amount of Each Receipt this Period: 500.00
[ ] Memo Item

C. Full Name (Last, First, Middle Initial): Gregory Pinto
Mailing Address: 414 Maple Ave Ste 200
City: Saratoga Springs State: NY Zip Code: 12866-5533
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: M M 03 / D D 22 / Y Y Y Y 2016
Transaction ID : C53C622A-A217-4ABB-B
Amount of Each Receipt this Period: 500.00
[ ] Memo Item

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) for each category of the Detailed Summary Page

FOR LINE NUMBER: (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): Michael Raizman
Mailing Address: 50 Staniford St Ste 600
City: Boston State: MA Zip Code: 02114-2587
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: 03/25/2016
Transaction ID : 14314274-C00C-42A9-9
Amount of Each Receipt this Period: 500.00
[ ] Memo Item

B. Full Name (Last, First, Middle Initial): Michael Repka
Mailing Address: 1018 WINDING WAY
City: Baltimore State: MD Zip Code: 21210-1233
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: 300.00
Date of Receipt: 03/24/2016
Transaction ID : 7FEE42A4-03DF-4DC0-A
Amount of Each Receipt this Period: 300.00
[ ] Memo Item

C. Full Name (Last, First, Middle Initial): David Ringel
Mailing Address: 101A Kings Way W
City: Sewell State: NJ Zip Code: 08080-2233
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: 03/18/2016
Transaction ID : 4FEB7CA7-1616-4982-8
Amount of Each Receipt this Period: 500.00
[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1300.00

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)
[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): Philip Rizzuto
Mailing Address: 120 Dudley St Ste 301
City: Providence State: RI Zip Code: 02905-2429
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 / 2016
Transaction ID : 68C68D60-5423-423C-B
Amount of Each Receipt this Period: 500.00
[ ] Memo Item

B. Full Name (Last, First, Middle Initial): John Denis Roarty
Mailing Address: 84 Clairview
City: Grosse Pointe Shor State: MI Zip Code: 48236
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 / 20 / 2016
Transaction ID : B57C81E6-B4D0-40C2-B
Amount of Each Receipt this Period: 500.00
[ ] Memo Item

C. Full Name (Last, First, Middle Initial): Rene Rodriguez-Sains
Mailing Address: 430 Silver Maple Ridge Unit # 11
City: Charleston State: WV Zip Code: 25306
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 / 28 / 2016
Transaction ID : 9709E71D-41D5-46D2-B
Amount of Each Receipt this Period: 365.00
[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1365.00

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)
[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): Lawrence Ronning
Mailing Address: 1605 Portage Ave.
City: North Canton State: OH Zip Code: 44720
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 / 01 / 2016
Transaction ID : 42E94F87-8D76-4AE5-9
Amount of Each Receipt this Period: 250.00
[ ] Memo Item

B. Full Name (Last, First, Middle Initial): David Rothberg
Mailing Address: 3820 TAMPA RD SUITE 101
City: PALM HARBOR State: FL Zip Code: 34684
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 / 21 / 2016
Transaction ID : D11EE174-C9EF-42EE-8
Amount of Each Receipt this Period: 365.00
[ ] Memo Item

C. Full Name (Last, First, Middle Initial): Edward Rubinchik
Mailing Address: 23 pierrepont st
City: Brooklyn State: NY Zip Code: 11201
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 / 25 / 2016
Transaction ID : 36D67F9B-5A30-4CAE-8
Amount of Each Receipt this Period: 500.00
[ ] Memo Item

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) for each category of the Detailed Summary Page

FOR LINE NUMBER: (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): Nelson Sabates
Mailing Address: 11261 Nall Ave
City: Leawood State: KS Zip Code: 66211-1669
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 / 24 / 2016
Transaction ID : AD154B24-4592-447B-B
Amount of Each Receipt this Period: 1000.00
[ ] Memo Item

B. Full Name (Last, First, Middle Initial): Jeffrey Sandler
Mailing Address: 4699 Main St Ste 106
City: Bridgeport State: CT Zip Code: 06606-1830
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 / 29 / 2016
Transaction ID : BED266BA-B7CF-4590-9
Amount of Each Receipt this Period: 500.00
[ ] Memo Item

C. Full Name (Last, First, Middle Initial): Daniel Shapiro
Mailing Address: 9 Dickson Lane
City: Mount Kisco State: NY Zip Code: 10549
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 / 25 / 2016
Transaction ID : C91D8E37-5969-4D67-A
Amount of Each Receipt this Period: 500.00
[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 2000.00

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)
[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): Debra Shetlar
Mailing Address: 2002 Holcombe Blvd Ste 112C
City: Houston State: TX Zip Code: 77030-4211
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 / 21 / 2016
Transaction ID : FE73021C-DCCD-49BA-A
Amount of Each Receipt this Period: 365.00
[ ] Memo Item

B. Full Name (Last, First, Middle Initial): R. Michael Siatkowski
Mailing Address: 608 Stanton L Young Blvd
City: Oklahoma City State: OK Zip Code: 73104-5065
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 / 24 / 2016
Transaction ID : 19D8B8F8-3C6E-4462-A
Amount of Each Receipt this Period: 365.00
[ ] Memo Item

C. Full Name (Last, First, Middle Initial): David Silbert
Mailing Address: 2104 Spring Valley Rd
City: Lancaster State: PA Zip Code: 17601-2427
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: 249.99
Date of Receipt: 03 / 15 / 2016
Transaction ID : 289FD8E2-35D3-4B49-A
Amount of Each Receipt this Period: 83.33
[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 813.33

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)
[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): Judson Smith
Mailing Address: 417 W Magnolia Ave
City: Fort Worth | State: TX | Zip Code: 76104-7618
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 / 28 / 2016
Transaction ID : 83F10288-C2B0-4A8A-B
Amount of Each Receipt this Period: 1000.00
[ ] Memo Item

B. Full Name (Last, First, Middle Initial): Alan Solinsky
Mailing Address: 1013 Farmington Ave
City: West Hartford | State: CT | Zip Code: 06107-2106
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 / 25 / 2016
Transaction ID : 8D6F45A2-3C1A-4580-9
Amount of Each Receipt this Period: 365.00
[ ] Memo Item

C. Full Name (Last, First, Middle Initial): Robert Stamper
Mailing Address: 10 Koret Way Rm K-301
City: San Francisco | State: CA | Zip Code: 94143-0730
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 / 30 / 2016
Transaction ID : 828E90A0-73B7-4E0E-B
Amount of Each Receipt this Period: 365.00
[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1730.00

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)
[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): Brad Stuckenschneider
Mailing Address: 1315 Broadridge Dr
City: Jackson State: MO Zip Code: 63755-9466
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: 03/25/2016
Transaction ID : 66C6A37A-0668-46F9-9
Amount of Each Receipt this Period: 1000.00
[ ] Memo Item

B. Full Name (Last, First, Middle Initial): Mark Szal
Mailing Address: 248 Pleasant St Ste 1600
City: Concord State: NH Zip Code: 03301-7513
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: 03/26/2016
Transaction ID : F70C0CEB-FB4F-4D76-9
Amount of Each Receipt this Period: 365.00
[ ] Memo Item

C. Full Name (Last, First, Middle Initial): Sharon Taylor
Mailing Address: 306 Rustin Way
City: Wexford State: PA Zip Code: 15090
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: 03/24/2016
Transaction ID : B9A849F1-C830-4D80-9
Amount of Each Receipt this Period: 250.00
[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1615.00

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)
[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): Eric Thomas
Mailing Address: 6601 S. Minnesota Avenue Suite: 20
City: Sioux Falls | State: SD | Zip Code: 57108-2564
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: 03/03/2016
Transaction ID : DDB3CC59-D11D-4AF8-B
Amount of Each Receipt this Period: 500.00
[ ] Memo Item

B. Full Name (Last, First, Middle Initial): Kevin Treacy
Mailing Address: 645 Ridgewood Rd
City: Duluth | State: MN | Zip Code: 55804-1856
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: 03/24/2016
Transaction ID : 55D1A16B-1553-4650-9
Amount of Each Receipt this Period: 365.00
[ ] Memo Item

C. Full Name (Last, First, Middle Initial): Stephanie Turner
Mailing Address: 107 Parkwood Rd
City: Greenwood | State: SC | Zip Code: 29646-8534
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: 03/22/2016
Transaction ID : 4F209A92-9299-449B-8
Amount of Each Receipt this Period: 365.00
[ ] Memo Item

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) for each category of the Detailed Summary Page

FOR LINE NUMBER: (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): Alan Wagner
Mailing Address: 5520 Greenwich Rd Ste 204
City: Virginia Beach State: VA Zip Code: 23462-6541
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: 250.03
Date of Receipt: 03 / 15 / 2016
Transaction ID : 30BB8270-7F06-48D7-B
Amount of Each Receipt this Period: 83.37
[ ] Memo Item

B. Full Name (Last, First, Middle Initial): Barry Welch
Mailing Address: 424 Yellowstone Ave Ste 110
City: Cody State: WY Zip Code: 82414-9309
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: 250.03
Date of Receipt: 03 / 31 / 2016
Transaction ID : FF47AAA3-4300-40C0-9
Amount of Each Receipt this Period: 83.37
[ ] Memo Item

C. Full Name (Last, First, Middle Initial): Alyson Yashar
Mailing Address: 21 Arrowhead Ln
City: Saddle River State: NJ Zip Code: 07458-2503
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 / 24 / 2016
Transaction ID : 780FAEBE-947A-4D9A-8
Amount of Each Receipt this Period: 365.00
[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 531.74

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)
[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): Charles Zacks
Mailing Address: 68 Mill Rd
City: Cumberland State: ME Zip Code: 04021
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: M M 03 / D D 21 / Y Y Y Y 2016
Transaction ID : 4B8A88B7-E872-4532-9
Amount of Each Receipt this Period: 500.00
[ ] Memo Item

B.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼
Date of Receipt: M M / D D / Y Y Y Y
Amount of Each Receipt this Period:
[ ] Memo Item

C.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼
Date of Receipt: M M / D D / Y Y Y Y
Amount of Each Receipt this Period:
[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 500.00

TOTAL This Period (last page this line number only) ▶ 38832.21

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)

A.
Full Name (Last, First, Middle Initial): Wells Fargo Bank N.A.
Mailing Address: PO Box 63020
City: San Francisco State: CA Zip Code: 94163
Purpose of Disbursement: Bank charges - Mar 2016
Category/Type: 001
Candidate Name:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 03 / 31 / 2016
Transaction ID : 7E693000C97CC5602F0
Amount of Each Disbursement this Period: 101.87
[ ] Memo Item

B.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
Purpose of Disbursement:
Category/Type:
Candidate Name:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M / D D / Y Y Y Y
Amount of Each Disbursement this Period:
[ ] Memo Item

C.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
Purpose of Disbursement:
Category/Type:
Candidate Name:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M / D D / Y Y Y Y
Amount of Each Disbursement this Period:
[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 101.87

TOTAL This Period (last page this line number only) ▶ 101.87

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): Comstock for Congress
Mailing Address: PO Box 831
City: Mc Lean State: VA Zip Code: 22101
Purpose of Disbursement: 2016 Primary
Candidate Name: Barbara Jean Comstock
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: VA District: 10
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 02 / 2016
Transaction ID : 07538A89C28CC348B06
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): DCCC
Mailing Address: 430 South Capitol Street, SE 2nd Floor
City: Washington State: DC Zip Code: 20003-4024
Purpose of Disbursement: 2016 Contribution
Candidate Name: DCCC
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2016 ☐ Primary ☐ General ☒ Other (specify) Contribution
Date of Disbursement: 03 / 02 / 2016
Transaction ID : AA688DB81AA8C339172
Amount of Each Disbursement this Period: 15000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Families for James Lankford
Mailing Address: PO Box 1639
City: Bethany State: OK Zip Code: 73008
Purpose of Disbursement: 2016 Primary
Candidate Name: James Paul Lankford
Category/Type: 011
Office Sought: ☐ House ☒ Senate ☐ President
State: OK District:
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 21 / 2016
Transaction ID : D447EFAE6D185246AB5
Amount of Each Disbursement this Period: 2000.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 18000.00

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): John Lewis for Congress
Mailing Address: PO Box 2323
City: Atlanta State: GA Zip Code: 30301
Purpose of Disbursement: 2016 Primary
Candidate Name: John Robert Lewis
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: GA District: 05
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 02 / 2016
Transaction ID : 9ADE51334A63CCA5DAA
Amount of Each Disbursement this Period: 2000.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Kind for Congress Committee
Mailing Address: 205 5th Avenue S Room 428
City: La Crosse State: WI Zip Code: 54601
Purpose of Disbursement: 2016 Primary
Candidate Name: Ronald James Kind
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: WI District: 03
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 02 / 2016
Transaction ID : B1E8678805CBC37BCE4
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Kirk for Senate
Mailing Address: PO Box 2594
City: Chicago State: IL Zip Code: 60690
Purpose of Disbursement: 2016 Primary
Candidate Name: Mark Steven Kirk
Category/Type: 011
Office Sought: ☐ House ☒ Senate ☐ President
State: IL District:
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 02 / 2016
Transaction ID : 04FB60CFD6B15111A70
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 4000.00

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): LEGPAC
Mailing Address: 38 Ivy St., SE
City: Washington State: DC Zip Code: 20003
Purpose of Disbursement: 2016 Contribution
Candidate Name: LEGPAC
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2016 ☐ Primary ☐ General ☒ Other (specify) ▼ Contribution
Date of Disbursement: M M 03 / D D 02 / Y Y Y Y 2016
Transaction ID : 982FA15EEF8FDC52FB0
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): McKinley for Congress
Mailing Address: PO Box 642
City: Morgantown State: WV Zip Code: 26507
Purpose of Disbursement: 2016 Primary
Candidate Name: David B. McKinley
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: WV District: 01
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify) ▼
Date of Disbursement: M M 03 / D D 02 / Y Y Y Y 2016
Transaction ID : F34BB29EACF2B191DF6
Amount of Each Disbursement this Period: 1500.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): NRCC
Mailing Address: 320 First Street SE
City: Washington State: DC Zip Code: 20003
Purpose of Disbursement: 2016 Contribution
Candidate Name: NRCC
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2016 ☐ Primary ☐ General ☒ Other (specify) ▼ Contribution
Date of Disbursement: M M 03 / D D 02 / Y Y Y Y 2016
Transaction ID : E2632F90AA19B726BFE
Amount of Each Disbursement this Period: 15000.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 17500.00

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): Pallone for Congress
Mailing Address: PO Box 3176
City: Long Branch State: NJ Zip Code: 07740
Purpose of Disbursement: 2016 General
Candidate Name: Frank Pallone Jr.
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: NJ District: 06
Disbursement For: 2016 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 03 / 02 / 2016
Transaction ID : 56CB389151E05EDCB4F
Amount of Each Disbursement this Period: 1500.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Paul Gosar for Congress
Mailing Address: PO Box 2967
City: Prescott State: AZ Zip Code: 86302
Purpose of Disbursement: 2016 Primary
Candidate Name: Paul Anthony Gosar
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: AZ District: 04
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 02 / 2016
Transaction ID : B70C75D46C327BD42F8
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Pittenger for Congress LLC
Mailing Address: PO Box 11207
City: Charlotte State: NC Zip Code: 28220-1207
Purpose of Disbursement: 2016 Primary
Candidate Name: Robert M. Pittenger
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: NC District: 09
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 21 / 2016
Transaction ID : 7C986EA2B6C0F19FF4D
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 3500.00

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: 2016 General
Category/Type: 011
Candidate Name: Thomas E. Price M.D.
Office Sought: ☒ House ☐ Senate ☐ President
State: GA District: 06
Disbursement For: 2016 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 03 / 02 / 2016
Transaction ID : 356D4D8C56ABA872153
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Stabenow for US Senate
Mailing Address: PO Box 4945
City: East Lansing State: MI Zip Code: 48826
Purpose of Disbursement: 2018 Primary
Category/Type: 011
Candidate Name: Deborah Stabenow
Office Sought: ☐ House ☒ Senate ☐ President
State: MI District:
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 21 / 2016
Transaction ID : E67C36CAFA259ECEC4A
Amount of Each Disbursement this Period: 1500.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Ted Deutch for Congress Committee
Mailing Address: 1050 17th St, NW, Ste 590
City: Washington State: DC Zip Code: 20036
Purpose of Disbursement: 2016 Primary
Category/Type: 011
Candidate Name: Theodore Eliot Deutch
Office Sought: ☒ House ☐ Senate ☐ President
State: FL District: 22
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 21 / 2016
Transaction ID : 7D1F38B501998C422B4
Amount of Each Disbursement this Period: 5000.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 9000.00

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)
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☐ 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): Ted Deutch for Congress Committee
Mailing Address: 1050 17th St, NW, Ste 590
City: Washington State: DC Zip Code: 20036
Purpose of Disbursement: Void P2016 ck originally reported on 2/17/16.
Category/Type: 011
Candidate Name: Theodore Eliot Deutch
Office Sought: ☒ House ☐ Senate ☐ President
State: FL District: 22
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 21 / 2016
Transaction ID : 2351B5E898BA4AF56CC
Amount of Each Disbursement this Period: -5000.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): The Richard Burr Committee
Mailing Address: Post Office Box 5928
City: Winston-Salem State: NC Zip Code: 27113
Purpose of Disbursement: 2016 General
Category/Type: 011
Candidate Name: Richard M. Burr
Office Sought: ☐ House ☒ Senate ☐ President
State: NC District:
Disbursement For: 2016 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 03 / 02 / 2016
Transaction ID : 67089DBF94AD97BA2A2
Amount of Each Disbursement this Period: 2000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Tiberi for Congress
Mailing Address: 2931 E Dublin Granville Road Suite 190
City: Columbus State: OH Zip Code: 43231-2098
Purpose of Disbursement: 2016 General
Category/Type: 011
Candidate Name: Patrick Joseph Tiberi
Office Sought: ☒ House ☐ Senate ☐ President
State: OH District: 12
Disbursement For: 2016 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 03 / 02 / 2016
Transaction ID : A0F46CF905388E510DA
Amount of Each Disbursement this Period: 5000.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 2000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)

A.
Full Name (Last, First, Middle Initial): Upton for All of Us
Mailing Address: PO Box 490
City: St. Joseph State: MI Zip Code: 49085
Purpose of Disbursement: 2016 Primary
Candidate Name: Fredrick Stephen Upton
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: MI District: 06
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 02 / 2016
Transaction ID : E55A223B90DB0623C52
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

B.
Full Name (Last, First, Middle Initial): Volunteers for Shimkus
Mailing Address: PO Box 661
City: Collinsville State: IL Zip Code: 62234-0661
Purpose of Disbursement: 2016 Primary
Candidate Name: John M. Shimkus
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: IL District: 15
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 02 / 2016
Transaction ID : D13151885E3FFE889AB
Amount of Each Disbursement this Period: 1500.00
☐ Memo Item

C.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: / /
Amount of Each Disbursement this Period:
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 4000.00

TOTAL This Period (last page this line number only) ▶ 58000.00