FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example:If typing, type over the lines

American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)

ADDRESS (number and street) 655 Beach Street

Check if different than previously reported. (ACC)

San Francisco | CA | 94109

2. **FEC IDENTIFICATION NUMBER** C00196246

CITY | STATE | ZIPCODE

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

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- [ ] April 15 Quarterly Report(Q1)
- [ ] July 15 Quarterly Report(Q2)
- [ ] October 15 Quarterly Report(Q3)
- [ ] January 31 Quarterly Report(YE)
- [ ] July 31 Mid-Year Report(Non-election Year Only) (MY)
- [ ] Termination Report (TER)

(b) Monthly Report Due On:

- [ ] Feb 20 (M2)
- [X] 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 (12G)

Election on ____ in the State of ____

(d) 30-Day **Post** -Election Report for the:

- [ ] General (30G)
- [ ] Runoff (30R)
- [ ] Special (30S)

Election on ____ in the State of ____

5. Covering Period 04 01 2007 through 04 30 2007

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 Benjamin Bank

Signature of Treasurer Electronically Filed by Benjamin Bank Date 06 05 2007

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

Office Use Only							

FEC FORM 3X
(Rev. 02/2003)

Image# 27990130709

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: 04 01 2007 To: 04 30 2007

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a)	Cash on Hand January 1 2007		683911.43
(b)	Cash on Hand at Begining of Reporting Period	676204.62	
(c)	Total Receipts (from Line 19)	65883.84	146655.52
(d)	Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	742088.46	830566.95
7.	Total Disbursements (from Line 31)	44666.89	133145.38
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	697421.57	697421.57
9.	Debts and Obligations owed **TO** the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations owed **BY** the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
OF RECEIPTS

Write or Type Committee Name

American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)

Report Covering the Period: From: 04 01 2007 To: 04 30 2007

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)	59893.75	129867.50
(ii) Unitemized	4497.75	15127.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))	64391.50	144994.50
(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)	64391.50	144994.50
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	1492.34	1661.02
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	65883.84	146655.52
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	65883.84	146655.52

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS

	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures: (a) Shared Federal/Non-Federal Activity (from Schedule H4) (i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	666.89	2185.38
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)) ▶	666.89	2185.38
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	43000.00	127500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26. Loan Repayments Made	0.00	0.00
27. Loans Made	0.00	0.00
28. Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	1000.00	3460.00
(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)) ▶	1000.00	3460.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity (from Schedule H6) (i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	44666.89	133145.38
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)	44666.89	133145.38

DETAILED SUMMARY PAGE

of Disbursements

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)	64391.50	144994.50
34. Total Contribution Refunds (from Line 28(d))	1000.00	3460.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	63391.50	141534.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	666.89	2185.38
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	666.89	2185.38

Image# 27990130713

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 55
(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)
Thomas Aaberg
Mailing Address 2081 Hunters Run Northeast
City: Ada | State: MI | Zip Code: 49301-9559
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: 04 / 23 / 2007
Transaction ID: 8NWVHF942781
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Richard Abbott
Mailing Address Ucsf Beckman Vision Center
10 Koret Way K-301
City: San Francisco | State: CA | Zip Code: 94143-0001
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: 500.00

Date of Receipt: 04 / 06 / 2007
Transaction ID: 7MBDU5D96BKB
Amount of Each Receipt this Period: 500.00
PACWEB GENERATED CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
David R Adam
Mailing Address 11357 Avant Lane
City: Cincinnati | State: OH | Zip Code: 45249-2373
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: 04 / 23 / 2007
Transaction ID: 8NWVHF863475
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

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

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

Image# 27990130714

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 55
(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)
John Adams
Mailing Address Suite O
3400 W 16th Street
City: Greeley State: CO Zip Code: 80634-6871
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: 04 / 02 / 2007
Transaction ID: 9FL9DW
Amount of Each Receipt this Period: 500.00
PACWEB GENERATED CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
Natalie Afshari
Mailing Address Duke Univ Eye Center
Duke Univ Med Center Box 3802 Erwi
City: Durham State: NC Zip Code: 27705
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: 04 / 23 / 2007
Transaction ID: 8NWVHF418707
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Charley Andrews
Mailing Address Suite C
556 W Bedford Euless Road
City: Hurst State: TX Zip Code: 76053-3924
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: 04 / 23 / 2007
Transaction ID: 8NWVLK446063
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1365.00**

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

Image# 27990130715

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 55
(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)
Emilio Arce-Lopez
Mailing Address 150 De Diego Avenue Suite 502
City: San Juan | State: PR | Zip Code: 00907-2318
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: 04 / 23 / 2007
Transaction ID: 1110510704233734044
Amount of Each Receipt this Period: 1000.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Everton Arrindell
Mailing Address 9107 Brentmeade Boulevard
City: Brentwood | State: TN | Zip Code: 37027-8525
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: 04 / 23 / 2007
Transaction ID: 8NWVHF678348
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Katherine Baltz
Mailing Address Suite 101
5 Saint Vincent Circle
City: Little Rock | State: AR | Zip Code: 72205-5415
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: 04 / 23 / 2007
Transaction ID: 8NWVHF652764
Amount of Each Receipt this Period: 1000.00
Batch Tool - PAC

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

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

Image# 27990130716

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 55
(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)
Janet Betchkal

Mailing Address 1820 Barrs Street
Dillon Building Suite 134

City: Jacksonville | State: FL | Zip Code: 32204

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: 04 / 23 / 2007
Transaction ID: 8NWVHF874698
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Steven Bodine

Mailing Address Retina Consultations
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: 250.00

Date of Receipt: 04 / 13 / 2007
Transaction ID: 6TCALF33T6JB7
Amount of Each Receipt this Period: 250.00
PAC 1st of 4

C. Full Name (Last, First, Middle Initial)
Daniel James Briceland

Mailing Address 7101 E Carefree Drive

City: Carefree | State: AZ | Zip Code: 85377

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: 04 / 23 / 2007
Transaction ID: 8NWVHF661443
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

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

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

Image# 27990130717

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 55
(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)
Carlos Buznego

Mailing Address Suite 400E
8940 N Kendall Drive

City: Miami | State: FL | Zip Code: 33176-2175

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: 04 / 23 / 2007
Transaction ID: 8NWVHF441342
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Keith Carter

Mailing Address Univ Ia Hosp Ophth
200 Hawkins Drive

City: Iowa City | State: IA | Zip Code: 52242

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: 04 / 24 / 2007
Transaction ID: 70HBQGIUBT7C4
Amount of Each Receipt this Period: 1000.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Kristin Carter

Mailing Address Suite 104
5240 E Knight Drive

City: Tucson | State: AZ | Zip Code: 85712-2122

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: 400.00

Date of Receipt: 04 / 23 / 2007
Transaction ID: 8NWVFX102228
Amount of Each Receipt this Period: 400.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1900.00**

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

Image# 27990130718

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 11 / 55

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)
Percival H Chee

Mailing Address Kukui Plaza Mall Suite C116
50 S Beretania Street

City: Honolulu | State: HI | Zip Code: 96813

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: 04 / 17 / 2007

Transaction ID: 8P3IW3784886

Amount of Each Receipt this Period: 250.00

Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Mark Chiu

Mailing Address 806 Dr. Martin Luther King Jr Aven

City: Albuquerque | State: NM | Zip Code: 87102-3657

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: 04 / 23 / 2007

Transaction ID: 8NWVHF779400

Amount of Each Receipt this Period: 500.00

Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Donald Cinotti

Mailing Address 600 Pavonia Avenue
6th Floor

City: Jersey City | State: NJ | Zip Code: 07306-2932

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: 04 / 24 / 2007

Transaction ID: 70HBNQBUBT7C2

Amount of Each Receipt this Period: 500.00

Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ 1250.00

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

Image# 27990130719

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 55
(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)
David Coats
Mailing Address 6621 Fannin Street
Mc-Ccc640.00
City: Houston State: TX Zip Code: 77030-2303
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: 04 / 23 / 2007
Transaction ID: 8NWVHF742151
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Anne Louise Coleman
Mailing Address # 2118
100 Stein Plaza
City: Los Angeles State: CA Zip Code: 90095-0001
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: 365.00

Date of Receipt: 04 / 23 / 2007
Transaction ID: 8NWVHF435427
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Andrew Collins
Mailing Address 105 Bennington Road
City: Charlottesville State: VA Zip Code: 22901-2617
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: 04 / 23 / 2007
Transaction ID: 8NWVHF268978
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1365.00**

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

Image# 27990130720

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 55
(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)
Mary Louise Collins

Mailing Address Gter Balt Mc Pavillion W
6569 N Charles Street Suite 505

City: Baltimore | State: MD | Zip Code: 21204-5809

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: 04 / 20 / 2007

Transaction ID: 3BHXBK4MVPRF

Amount of Each Receipt this Period: 500.00

PACWEB GENERATED CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
Charles Colombo

Mailing Address Suite 180
1701 South Boulevard E

City: Rochester Hills | State: MI | Zip Code: 48307-6115

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: 04 / 04 / 2007

Transaction ID: 80SLL2539671

Amount of Each Receipt this Period: 250.00

Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Robert Copeland

Mailing Address Howard University Hospital
2041 Georgia Avenue Northwest Towe

City: Washington | State: DC | Zip Code: 20060-0001

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: 500.00

Date of Receipt: 04 / 27 / 2007

Transaction ID: 0728245

Amount of Each Receipt this Period: 500.00

Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1250.00**

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

Image# 27990130721

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 14 / 55

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)
Gary Cowan

Mailing Address Suite 3200
1350 S Main Street

City: Fort Worth | State: TX | Zip Code: 76104-7669

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: 04 / 24 / 2007

Transaction ID: 92725-79998415708542

Amount of Each Receipt this Period: 250.00

PAC 4th of 4

B. Full Name (Last, First, Middle Initial)
James Croley

Mailing Address 613 Del Prado Boulevard

City: Cape Coral | State: FL | Zip Code: 33990-2611

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: 04 / 23 / 2007

Transaction ID: 8NWVLK618754

Amount of Each Receipt this Period: 500.00

Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Charles Barry Dabbs

Mailing Address 311 Lakepoint Drive

City: Gadsden | State: AL | Zip Code: 35901-5385

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: 04 / 23 / 2007

Transaction ID: 8NWVHF326531

Amount of Each Receipt this Period: 1000.00

Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ 1750.00

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

Image# 27990130722

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 55
(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)
Susan Day
Mailing Address Suite 100
2340 Clay Street
City: San Francisco State: CA Zip Code: 94115-1932
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: 04 / 23 / 2007
Transaction ID: 1114550704233785566
Amount of Each Receipt this Period: 1000.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
William Deegan
Mailing Address Retina Group of Washington
6355 Walker Lane Suite 502
City: Alexandria State: VA Zip Code: 22310
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: 04 / 05 / 2007
Transaction ID: 60218-55134218931198
Amount of Each Receipt this Period: 125.00
PAC 4th of 4

C. Full Name (Last, First, Middle Initial)
Mark Doubrava
Mailing Address Suite 101
9011 W Sahara Avenue
City: Las Vegas State: NV Zip Code: 89117-4801
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: 04 / 23 / 2007
Transaction ID: 8NWVFX713723
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1490.00**

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

Image# 27990130723

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 55
(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)
Patrick Droste
Mailing Address 5050 Cascade Road Southeast
City: Grand Rapids State: MI Zip Code: 49546-3725
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: 04 / 23 / 2007
Transaction ID: 8NWVHF461150
Amount of Each Receipt this Period: 1000.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Thomas Duncan
Mailing Address E Texas Eye Assoc
1306 Frank Avenue
City: Lufkin State: TX Zip Code: 75904
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: 04 / 24 / 2007
Transaction ID: 70HC68YUBT7C8
Amount of Each Receipt this Period: 1000.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Jeffrey Edelstein
Mailing Address Suite 20
2905 W Warner Road
City: Chandler State: AZ Zip Code: 85224-1674
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: 04 / 23 / 2007
Transaction ID: 8NWVHF746275
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

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

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

Image# 27990130724

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 55
(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)
William Ehlers
Mailing Address 125 Secret Lake Road
City: Avon | State: CT | Zip Code: 06001-3465
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: 04 / 23 / 2007
Transaction ID: 8NWVHF332567
Amount of Each Receipt this Period: 250.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
K David Epley
Mailing Address Eye Associates Northwest
1101 Madison Suite 600
City: Seattle | State: WA | Zip Code: 98104
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: 04 / 23 / 2007
Transaction ID: 8NWVHF154522
Amount of Each Receipt this Period: 1000.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Paul Fecko
Mailing Address 195 W Brown Street
City: Birmingham | State: MI | Zip Code: 48009-6018
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: 04 / 23 / 2007
Transaction ID: 2243730704233753966
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1750.00**

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

Image# 27990130725

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 18 / 55

[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)
Tamara Fountain
Mailing Address 1445 Coral Parkway
City: Northbrook State: IL Zip Code: 60062-5192
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: 360.00

Date of Receipt: 04 / 23 / 2007
Transaction ID: 8NWVFX231188
Amount of Each Receipt this Period: 210.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Laura Fox
Mailing Address 416 North Bedford #300
City: Beverly Hills State: CA Zip Code: 90210-4309
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: 04 / 23 / 2007
Transaction ID: 8NWVHF575441
Amount of Each Receipt this Period: 1000.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Michael Gilbert
Mailing Address Suite 200
12301 Northeast 10th Place
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: 250.00

Date of Receipt: 04 / 23 / 2007
Transaction ID: 8NWVHF957742
Amount of Each Receipt this Period: 250.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ 1460.00

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

Image# 27990130726

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 55
(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)
Kris Gillian

Mailing Address Suite 100
575 Professional Drive

City: Lawrenceville | State: GA | Zip Code: 30045-3300

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: 04 / 23 / 2007
Transaction ID: 8NWVFX638264
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Ravi Goel

Mailing Address Regional Eye Associates
741 Route 70 W

City: Cherry Hill | State: NJ | Zip Code: 08002-3527

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: 04 / 27 / 2007
Transaction ID: 0421686
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Michael Green

Mailing Address 854 Lone Oak Drive

City: Gallatin | State: TN | Zip Code: 37066-3694

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: 04 / 23 / 2007
Transaction ID: 8NWVHF698603
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1365.00**

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

Image# 27990130727

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 55
(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)
Linda Gunshefski
Mailing Address 625 Catherine Street
City: Walla Walla State: WA Zip Code: 99362-3131
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: 04 / 23 / 2007
Transaction ID: 8NWVHF523028
Amount of Each Receipt this Period: 250.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Lealis Hale
Mailing Address White Wilson Medical Center
1005 Mar Walt Drive
City: Fort Walton Beach State: FL Zip Code: 32547-6796
FEC ID number of contributing federal political committee. C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 375.00

Date of Receipt: 04 / 22 / 2007
Transaction ID: 60218-05523318052291
Amount of Each Receipt this Period: 125.00
PAC 3rd of 4

C. Full Name (Last, First, Middle Initial)
Irvin Handelman
Mailing Address Suite 300
2525 Northwest Lovejoy Street
City: Portland State: OR Zip Code: 97210-2864
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: 04 / 23 / 2007
Transaction ID: 8NWVLK411867
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ..... ▶ **875.00**

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

Image# 27990130728

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 55
(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)
Jeffrey Heier
Mailing Address Ophthalmic Consultants of Boston
50 Staniford Street Suite 600
City: Boston State: MA Zip Code: 02114
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: 04 / 25 / 2007
Transaction ID: 712XH1FTU9RF2
Amount of Each Receipt this Period: 1000.00
PACWEB GENERATED CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
Nancy Holekamp
Mailing Address Suite 800
1600 S Brentwood Boulevard
City: Saint Louis State: MO Zip Code: 63144-1317
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: 04 / 27 / 2007
Transaction ID: 0835355
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Edward Holland
Mailing Address Suite 200
580 S Loop Road
City: Edgewood State: KY Zip Code: 41017-3415
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: 04 / 23 / 2007
Transaction ID: 8NWVFX167085
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1865.00**

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

Image# 27990130729

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 22 / 55

[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)
H Dunbar Hoskins

Mailing Address 655 Beach Street

City: San Francisco | State: CA | Zip Code: 94109-1342

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: 04 / 23 / 2007

Transaction ID: 8NWVHF462234

Amount of Each Receipt this Period: 1000.00

Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Mark Hughes

Mailing Address Suite 600
50 Staniford Street

City: Boston | State: MA | Zip Code: 02114-2539

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: 3593.75

Date of Receipt: 04 / 02 / 2007

Transaction ID: 09077-20010012388229

Amount of Each Receipt this Period: 1093.75

PAC 3rd of 4

C. Full Name (Last, First, Middle Initial)
Roger Husted

Mailing Address Eye Associates Pc
500 Aaron Court

City: Kingston | State: NY | Zip Code: 12401

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: 427.50

Date of Receipt: 04 / 23 / 2007

Transaction ID: 8NWVHF080293

Amount of Each Receipt this Period: 365.00

Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) 2458.75

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

Image# 27990130730

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 55
(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)
B Thomas Hutchinson

Mailing Address Opthalmic Consultants Boston
50 Staniford Street #600

City: Boston | State: MA | Zip Code: 02114

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: 04 / 04 / 2007
Transaction ID: 80SLL2807163
Amount of Each Receipt this Period: 1000.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Andrew George Iwach

Mailing Address Glaucoma Center of San Francisco
55 Stevenson Street

City: San Francisco | State: CA | Zip Code: 94105-2936

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: 04 / 24 / 2007
Transaction ID: 70HBMC2UBT7C1
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Peter Jensen

Mailing Address Suite A
1615 12th Avenue Road

City: Nampa | State: ID | Zip Code: 83686-6184

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: 04 / 23 / 2007
Transaction ID: 8NWVHF453907
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1730.00**

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

Image# 27990130731

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 55
(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)
David Johnson
Mailing Address Suite 210
8101 E Lowry Boulevard
City: Denver State: CO Zip Code: 80230-7195
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: 04 / 11 / 2007
Transaction ID: 6S5CO377LOZ70
Amount of Each Receipt this Period: 250.00
PACWEB GENERATED CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
Randolph Johnston
Mailing Address Cheyenne Eye Clinic
1300 E 20th Street
City: Cheyenne State: WY Zip Code: 82001
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: 04 / 30 / 2007
Transaction ID: 92725-69330996274948
Amount of Each Receipt this Period: 250.00
PAC 4th of 4

C. Full Name (Last, First, Middle Initial)
Diane Jean Kraus
Mailing Address PO Box 4142
City: Kingston State: NY Zip Code: 12402-4142
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: 04 / 23 / 2007
Transaction ID: 8NWVFX735948
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

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

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

Image# 27990130732

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 55
(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)
Ralph Lanciano

Mailing Address Lanciano Professional Center
7703 Maple Avenue

City: Pennsauken | State: NJ | Zip Code: 08109

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: 04 / 24 / 2007
Transaction ID: 19C7TBRJ8EBH07
Amount of Each Receipt this Period: 365.00
PACWEB GENERATED CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
Paul Lee

Mailing Address Box 3802
2351 Erwin Road

City: Durham | State: NC | Zip Code: 27702-3802

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: 1250.00

Date of Receipt: 04 / 24 / 2007
Transaction ID: 70HBP0EUBT7C8
Amount of Each Receipt this Period: 1000.00
PACWEB GENERATED CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
Paul Lee

Mailing Address Box 3802
2351 Erwin Road

City: Durham | State: NC | Zip Code: 27702-3802

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: 1250.00

Date of Receipt: 04 / 27 / 2007
Transaction ID: 0565344
Amount of Each Receipt this Period: 250.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ 1615.00

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

Image# 27990130733

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 55
(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)
Hobart Lerner
Mailing Address 720 East Avenue
City: Rochester | State: NY | Zip Code: 14607-2192
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: 04 / 23 / 2007
Transaction ID: 8NWVHF583155
Amount of Each Receipt this Period: 250.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Joseph Locascio
Mailing Address Himg Regional Medical Park
5170 US Route 60 East
City: Huntington | State: WV | Zip Code: 25705
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: 04 / 23 / 2007
Transaction ID: 8NWVHF750814
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Daniel Long
Mailing Address Suite 330
120 Meadowcrest Street
City: Gretna | State: LA | Zip Code: 70056-5249
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: 04 / 23 / 2007
Transaction ID: 8NWVHF253243
Amount of Each Receipt this Period: 250.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ..... ▶ **865.00**

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

Image# 27990130734

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 55
(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 Malouf
Mailing Address Suite 108
6000 Laurel Bowie Road
City: Bowie State: MD Zip Code: 20715-4000
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: 04 / 23 / 2007
Transaction ID: 8NWVLK533662
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Jeff Maltzman
Mailing Address 5599 N Oracle Road
City: Tucson State: AZ Zip Code: 85704-3821
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: 04 / 23 / 2007
Transaction ID: 8NWVHF630543
Amount of Each Receipt this Period: 1500.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Sid Mandelbaum
Mailing Address 178 East 71st Street
City: New York State: NY Zip Code: 10021-5119
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: 04 / 23 / 2007
Transaction ID: 8NWVLK722248
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ..... ▶ **2365.00**

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

Image# 27990130735

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 55
(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)
Mark Christophe Maria
Mailing Address 150 Quail Lane
City: Lebanon | State: PA | Zip Code: 17042-9403
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: 04 / 23 / 2007
Transaction ID: 8NWVHF198633
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Stephanie Jones Marioneaux
Mailing Address Suite 108
300 Med Parkway
City: Chesapeake | State: VA | Zip Code: 23320
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: 04 / 23 / 2007
Transaction ID: 8NWVHF786665
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
G Philip Matthews
Mailing Address 5421 La Sierra Drive
City: Dallas | State: TX | Zip Code: 75231-4107
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: 04 / 23 / 2007
Transaction ID: 8NWVFX426694
Amount of Each Receipt this Period: 1000.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ..... ▶ **2000.00**

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

Image# 27990130736

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 29 / 55

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)
Malcolm Mazow

Mailing Address 2855 Gramercy

City: Houston | State: TX | Zip Code: 77025-1635

FEC ID number of contributing federal political committee. C

Name of Employer: self

Occupation: Ophthalmologist

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date: 365.00

Date of Receipt: 04 / 11 / 2007

Transaction ID: 60218-43870180845261

Amount of Each Receipt this Period: 91.25

PAC 4th of 4

B. Full Name (Last, First, Middle Initial)
Connie McCaa

Mailing Address Unv MS Med Center/McBryde Building
2500 North State Street/3rd Floor

City: Jackson | State: MS | Zip Code: 39216

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: 04 / 23 / 2007

Transaction ID: 3800730704233800562

Amount of Each Receipt this Period: 1000.00

Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Tyrone McCall

Mailing Address Suite 600
7150 Greenville Avenue

City: Dallas | State: TX | Zip Code: 75231-5187

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: 04 / 23 / 2007

Transaction ID: 8NWVHF782793

Amount of Each Receipt this Period: 250.00

Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1341.25**

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

Image# 27990130737

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 55
(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)
William Mieler

Mailing Address Department of Ophth
5841 S Maryland Avenue Mc 2114

City: Chicago | State: IL | Zip Code: 60637-1447

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: 04 / 23 / 2007
Transaction ID: 8NWVHF781491
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Amalia Miranda

Mailing Address 3435 Northwest 56th Street
Building A # 1010

City: Oklahoma City | State: OK | Zip Code: 73112-4448

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: 04 / 24 / 2007
Transaction ID: 92725-07958620786666
Amount of Each Receipt this Period: 250.00
PAC 4th of 4

C. Full Name (Last, First, Middle Initial)
Basil Morgan

Mailing Address Suite 100
4324 York Road

City: Baltimore | State: MD | Zip Code: 21212-4800

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: 04 / 23 / 2007
Transaction ID: 8NWVHF085862
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1250.00**

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

Image# 27990130738

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 55
(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)
Christie Morse
Mailing Address Suite 1600
248 Pleasant Street
City: Concord State: NH Zip Code: 03301-2588
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: 04 / 23 / 2007
Transaction ID: 8NWVLK087945
Amount of Each Receipt this Period: 1000.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Peter Nussbaum
Mailing Address 22 Old Short Hills Road Suite 104
City: Livingston State: NJ Zip Code: 07039-5605
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: 04 / 23 / 2007
Transaction ID: 8NWVHF672864
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Mildred M G Olivier
Mailing Address Suite 110
1555 Barrington Road
City: Hoffman Estates State: IL Zip Code: 60169-1062
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: 04 / 23 / 2007
Transaction ID: 8NWVHF378738
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ 2000.00

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

Image# 27990130739

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 32 / 55

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)
John O'Neill

Mailing Address Suite 200
2 Wisconsin Circle

City: Chevy Chase | State: MD | Zip Code: 20815-7018

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: 04 / 23 / 2007

Transaction ID: 8NWVFX371166

Amount of Each Receipt this Period: 365.00

Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
David Pao

Mailing Address Suite 201
1018 Street Road

City: Southampton | State: PA | Zip Code: 18966-4221

FEC ID number of contributing federal political committee. C

Name of Employer: self

Occupation: Ophthalmologist

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date: 1000.00

Date of Receipt: 04 / 23 / 2007

Transaction ID: 8NWVHF983123

Amount of Each Receipt this Period: 1000.00

Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
David Parke

Mailing Address Dean A McGee Eye Inst
608 Stanton L Young Boulevard

City: Oklahoma City | State: OK | Zip Code: 73104-5014

FEC ID number of contributing federal political committee. C

Name of Employer: self

Occupation: Ophthalmologist

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date: 250.00

Date of Receipt: 04 / 02 / 2007

Transaction ID: 4022890705095636439

Amount of Each Receipt this Period: 250.00

PAC 1st of 4

SUBTOTAL of Receipts This Page (optional) ▶ 1615.00

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

Image# 27990130740

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 55
(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)
Richard Parrish
Mailing Address 1638 Northwest 10th Avenue
City: Miami | State: FL | Zip Code: 33136-1015
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: 04 / 23 / 2007
Transaction ID: 8NWVFX521527
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Jean Ramsey
Mailing Address Boston Medical Center; Acc
850 Harrison Avenue; 2nd Floor
City: Boston | State: MA | Zip Code: 02118-4001
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: 04 / 23 / 2007
Transaction ID: 5213890704233793541
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Ashok Reddy
Mailing Address Apt. 3925
6100 Cortaderia Street Northeast
City: Albuquerque | State: NM | Zip Code: 87111-8012
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: 04 / 23 / 2007
Transaction ID: 1483920704233759066
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

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

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

Image# 27990130741

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 55
(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)
William Reinhart
Mailing Address 32590 Burlwood Drive
City: Solon | State: OH | Zip Code: 44139-1316
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: 04 / 27 / 2007
Transaction ID: 0470427
Amount of Each Receipt this Period: 250.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Joy Dixon Robinson
Mailing Address 23 Castle Haven Road
City: Hampton | State: VA | Zip Code: 23666-6032
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: 04 / 23 / 2007
Transaction ID: 8NWVHF138658
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Gail Millette Royal
Mailing Address 401 79th Avenue N
City: Myrtle Beach | State: SC | Zip Code: 29572-4310
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: 04 / 23 / 2007
Transaction ID: 8NWVFX854215
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **980.00**

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

Image# 27990130742

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 55
(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)
Michael Ruddat

Mailing Address Suite 822
85 Seymour Street

City: Hartford | State: CT | Zip Code: 06106-5527

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: 04 / 12 / 2007
Transaction ID: BJ6TFQ800456
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Delia Sang

Mailing Address 73 Chatham Street

City: Brookline | State: MA | Zip Code: 02446-5451

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: 3593.75

Date of Receipt: 04 / 02 / 2007
Transaction ID: 09077-17385500669479
Amount of Each Receipt this Period: 1093.75
PAC 3rd of 4

C. Full Name (Last, First, Middle Initial)
Scott Schaefer

Mailing Address 3971 Princeton Avenue

City: St. Louis Park | State: MN | Zip Code: 55416-3018

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: 04 / 23 / 2007
Transaction ID: 8NWVLK583577
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1958.75**

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

Image# 27990130743

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 55
(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)
Susan Senft
Mailing Address Crossroads Medical Centre
75-1028 Henry Street; Suite 200
City: Kailua Kona State: HI Zip Code: 96740-1679
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: 04 / 23 / 2007
Transaction ID: 8NWVHF330095
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
David Shulman
Mailing Address Suite 127
999 E Basse Road
City: San Antonio State: TX Zip Code: 78209-1802
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: 04 / 23 / 2007
Transaction ID: 8NWVHF592869
Amount of Each Receipt this Period: 1000.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Brian Sippy
Mailing Address 700 W Kent Avenue
City: Missoula State: MT Zip Code: 59801-6772
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: 04 / 23 / 2007
Transaction ID: 8NWVLK554823
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ..... ▶ 1865.00

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

Image# 27990130744

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 37 / 55
(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)
Brian Smith
Mailing Address 8 Medical Park Drive
City: Asheville | State: NC | Zip Code: 28803
FEC ID number of contributing federal political committee: C
Name of Employer: Asheville Eye Associates
Occupation: Ophthalmologist
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 400.00

Date of Receipt: 04 / 15 / 2007
Transaction ID: 6V4HEAUMF8F43
Amount of Each Receipt this Period: 400.00
PACWEB GENERATED CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
Jennifer Smith
Mailing Address 2032 Valor Court
City: Glenview | State: IL | Zip Code: 60026-8052
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: 04 / 23 / 2007
Transaction ID: 8NWVLK557558
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Catherine Smoot-Haselnus
Mailing Address 105 Pine Bluff Road
City: Salisbury | State: MD | Zip Code: 21801-7160
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: 04 / 24 / 2007
Transaction ID: 70HC4NRUBT7C8
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1400.00**

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

Image# 27990130745

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 38 / 55

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)
Samuel Solish
Mailing Address 53 Sewall Street
City: Portland State: ME Zip Code: 04102-2625
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: 04 / 23 / 2007
Transaction ID: 8NWVHF367115
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Robert Spurny
Mailing Address Suite 24
1440 S Country Club Drive
City: Mesa State: AZ Zip Code: 85210-9704
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: 04 / 23 / 2007
Transaction ID: 8NWVHF682623
Amount of Each Receipt this Period: 1000.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
John Stechschulte
Mailing Address Suite 320
262 Neil Avenue
City: Columbus State: OH Zip Code: 43215-7311
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: 04 / 23 / 2007
Transaction ID: 8NWVHF515895
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) 1730.00

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

Image# 27990130746

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 39 / 55
(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)
Mitchell Brian Stein
Mailing Address 69 S Moger Avenue
City: Mount Kisco | State: NY | Zip Code: 10549-2217
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: 04 / 03 / 2007
Transaction ID: 60218-34223574399948
Amount of Each Receipt this Period: 125.00
PAC 4th of 4

B. Full Name (Last, First, Middle Initial)
Paul Sternberg
Mailing Address Vanderbilt Eye Institute
8000 Medical Center E North Tower
City: Nashville | State: TN | Zip Code: 37232-0001
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: 04 / 23 / 2007
Transaction ID: 8NWVLK244472
Amount of Each Receipt this Period: 1000.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Thomas Strinden
Mailing Address PO Box 9645
City: Fargo | State: ND | Zip Code: 58106-9645
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: 04 / 23 / 2007
Transaction ID: 8NWVHF205749
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ 1490.00

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

Image# 27990130747

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 40 / 55
(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)
Steven Swedberg
Mailing Address Suite 230
21600 Highway 99
City: Edmonds State: WA Zip Code: 98026-8048
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: 04 / 23 / 2007
Transaction ID: 8NWVLK542225
Amount of Each Receipt this Period: 115.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Steven Thom
Mailing Address 4640 Timberline Drive
City: Fargo State: ND Zip Code: 58104-6654
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: 04 / 23 / 2007
Transaction ID: 8NWVHF647628
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Lyle Thorstenson
Mailing Address PO Box 632020
City: Nacogdoches State: TX Zip Code: 75963-2020
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: 04 / 17 / 2007
Transaction ID: 60218-96506899595261
Amount of Each Receipt this Period: 250.00
PAC 4th of 4

SUBTOTAL of Receipts This Page (optional) ..... ▶ **865.00**

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

Image# 27990130748

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 41 / 55

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)
Robert Trent
Mailing Address 3190 Churn Creek Road
City: Redding State: CA Zip Code: 96002-2122
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: 04 / 05 / 2007
Transaction ID: BKB64H349486
Amount of Each Receipt this Period: 1000.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Ira Udell
Mailing Address 600 Northern Boulevard Suite 214
City: Great Neck State: NY Zip Code: 11021-5200
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: 04 / 23 / 2007
Transaction ID: 8NWVHF546017
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Scott Uttley
Mailing Address 2139 Lower Saint Dennis Road
City: Saint Paul State: MN Zip Code: 55116-2827
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: 04 / 23 / 2007
Transaction ID: 8NWVHF329418
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ **1865.00**

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

Image# 27990130749

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 55
(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)
Ann Warn

Mailing Address Suite 105
3201 W Gore Boulevard

City: Lawton | State: OK | Zip Code: 73505-6350

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: 04 / 23 / 2007
Transaction ID: 8NWVLK766356
Amount of Each Receipt this Period: 500.00
Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Aaron Weingeist

Mailing Address 3934 S Americus Street

City: Seattle | State: WA | Zip Code: 98118-1640

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: 04 / 17 / 2007
Transaction ID: 60218-76578921079636
Amount of Each Receipt this Period: 125.00
PAC 4th of 4

C. Full Name (Last, First, Middle Initial)
Maynard Wheeler

Mailing Address PO Box 538
10 Sandy Brae

City: Grantham | State: NH | Zip Code: 03753-0538

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: 04 / 23 / 2007
Transaction ID: 8NWVLK381145
Amount of Each Receipt this Period: 365.00
Batch Tool - PAC

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

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

Image# 27990130750

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 43 / 55

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)
Thomas Whitaker

Mailing Address 900 Med Circle

City: Myrtle Beach | State: SC | Zip Code: 29572-4114

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: 04 / 23 / 2007

Transaction ID: 8NWVHF788320

Amount of Each Receipt this Period: 250.00

Batch Tool - PAC

B. Full Name (Last, First, Middle Initial)
Ruth Williams

Mailing Address Wheaton Eye Clinic
2015 North Main Street

City: Wheaton | State: IL | Zip Code: 60187

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: 04 / 23 / 2007

Transaction ID: 9254780704233780344

Amount of Each Receipt this Period: 1000.00

Batch Tool - PAC

C. Full Name (Last, First, Middle Initial)
Roger Zelt

Mailing Address 200 Iroquois Road

City: Pittsburgh | State: PA | Zip Code: 15241-1122

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: 04 / 19 / 2007

Transaction ID: FSFADV504803

Amount of Each Receipt this Period: 500.00

Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional) ▶ 1750.00

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

Image# 27990130751

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 44 / 55
(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)
Harry Zink

Mailing Address 3519 Friendsville Road

City: Wooster | State: OH | Zip Code: 44691-1241

FEC ID number of contributing federal political committee. C

Name of Employer: self

Occupation: Ophthalmologist

Receipt For:
☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date: 500.00

Date of Receipt: 04 / 23 / 2007

Transaction ID: 1061940704233765564

Amount of Each Receipt this Period: 500.00

Batch Tool - PAC

SUBTOTAL of Receipts This Page (optional)	**500.00**
TOTAL This Period (last page this line number only)	**59893.75**

Image# 27990130752

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 45 / 55
(check only one)
☐ 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)
Union Bank

Mailing Address 400 California Street

City: San Francisco | State: CA | Zip Code: 94104

FEC ID number of contributing federal political committee. C

Name of Employer

Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
1661.02

Date of Receipt
M M / D D / Y Y Y Y
04 / 30 / 2007

Transaction ID: 9822460705104275696

Amount of Each Receipt this Period
1492.34

Bank interest 4/07

SUBTOTAL of Receipts This Page (optional) ▶	**1492.34**
TOTAL This Period (last page this line number only) ▶	**1492.34**

Image# 27990130753

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 46 / 55

[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)
Union Bank

Mailing Address 400 California Street

City: San Francisco
State: CA
Zip Code: 94104

Purpose of Disbursement
Bank charges 4/07

Candidate Name

Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Transaction ID: 5565690705104278352

Date of Disbursement: MM / DD / YYYY: 04 / 30 / 2007

Amount of Each Disbursement this Period: 666.89

SUBTOTAL of Disbursements This Page (optional) ▶	**666.89**
TOTAL This Period (last page this line number only) ▶	**666.89**

Image# 27990130754

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 X 23 24 25 26
27 28a 28b 28c 29 30b

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

A.
Full Name (Last, First, Middle Initial)
Becerra for Congress
Mailing Address PO Box 261060
City Los Angeles State CA Zip Code 90026
Purpose of Disbursement: 2008 Primary
Candidate Name: Becerra Xavier
Category/ Type:
Office Sought: X House / Senate / President — State: CA District: 31
Disbursement For: 2008 — X Primary / General / Other (specify)
Transaction ID: 1772680704255433370
Date of Disbursement: 04 / 26 / 2007
Amount of Each Disbursement this Period: 1000.00

B.
Full Name (Last, First, Middle Initial)
Boyd for Congress
Mailing Address PO Box 15703
City Tallahassee State FL Zip Code 32317
Purpose of Disbursement: 2008 Primary
Candidate Name: Boyd F.
Category/ Type:
Office Sought: X House / Senate / President — State: FL District: 02
Disbursement For: 2008 — X Primary / General / Other (specify)
Transaction ID: 6217020704255428780
Date of Disbursement: 04 / 26 / 2007
Amount of Each Disbursement this Period: 2500.00

C.
Full Name (Last, First, Middle Initial)
Congressman Joe Barton Committee, the
Mailing Address PO Box 1444
City Ennis State TX Zip Code 75120
Purpose of Disbursement: 2008 Primary
Candidate Name: Barton Joe
Category/ Type:
Office Sought: X House / Senate / President — State: TX District: 06
Disbursement For: 2008 — X Primary / General / Other (specify)
Transaction ID: 9969870704255396592
Date of Disbursement: 04 / 26 / 2007
Amount of Each Disbursement this Period: 2500.00

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

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

Image# 27990130755

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b | 22 | X 23 | 24 | 25 | 26
27 | 28a | 28b | 28c | 29 | 30b

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

A.
Full Name (Last, First, Middle Initial)
Dave Camp for Congress 2008
Mailing Address 5915 Eastman Avenue Suite 100
City: Midland | State: MI | Zip Code: 48640
Purpose of Disbursement: 2008 Primary
Candidate Name: Camp Dave
Category/ Type:
Office Sought: X House / Senate / President
State: MI District: 04
Disbursement For: 2008 — X Primary / General / Other (specify)
Transaction ID: 2037570704255404182
Date of Disbursement: 04 / 26 / 2007
Amount of Each Disbursement this Period: 1000.00

B.
Full Name (Last, First, Middle Initial)
Earl Pomeroy for Congress
Mailing Address PO Box 9336
City: Fargo | State: ND | Zip Code: 58106
Purpose of Disbursement: 2008 Primary
Candidate Name: Pomeroy Earl
Category/ Type:
Office Sought: X House / Senate / President
State: ND District: 01
Disbursement For: 2008 — X Primary / General / Other (specify)
Transaction ID: 3156550704255384059
Date of Disbursement: 04 / 26 / 2007
Amount of Each Disbursement this Period: 1000.00

C.
Full Name (Last, First, Middle Initial)
Friends of Blanche Lincoln
Mailing Address PO Box 3197
City: Little Rock | State: AR | Zip Code: 72203
Purpose of Disbursement: 2008 Primary
Candidate Name: Lincoln Blanche
Category/ Type:
Office Sought: House / X Senate / President
State: AR District: 00
Disbursement For: 2008 — X Primary / General / Other (specify)
Transaction ID: 2974700704255392857
Date of Disbursement: 04 / 26 / 2007
Amount of Each Disbursement this Period: 2500.00

SUBTOTAL of Disbursements This Page (optional) ▶ **4500.00**

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

Image# 27990130756

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use seperate 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

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

A.
Full Name (Last, First, Middle Initial)
Friends of Dave Weldon
Mailing Address 2525 Aurora Road
Suite 2
City: Melbourne State: FL Zip Code: 32935
Purpose of Disbursement: 2008 Primary
Candidate Name: Weldon Dave
Category/ Type:
Office Sought: ☒ House ☐ Senate ☐ President
State: FL District: 15
Disbursement For: 2008 ☒ Primary ☐ General ☐ Other (specify)

Transaction ID: 0233020704255421558
Date of Disbursement: 04 / 26 / 2007
Amount of Each Disbursement this Period: 1000.00

B.
Full Name (Last, First, Middle Initial)
Friends of Rahm Emanuel
Mailing Address PO Box 101124
City: Chicago State: IL Zip Code: 60610
Purpose of Disbursement: 2008 Primary
Candidate Name: Emanuel Rahm
Category/ Type:
Office Sought: ☒ House ☐ Senate ☐ President
State: IL District: 05
Disbursement For: 2008 ☒ Primary ☐ General ☐ Other (specify)

Transaction ID: 5966330704255415120
Date of Disbursement: 04 / 26 / 2007
Amount of Each Disbursement this Period: 2500.00

C.
Full Name (Last, First, Middle Initial)
Friends of Roy Blunt
Mailing Address PO Box 50100
City: Springfield State: MO Zip Code: 65805
Purpose of Disbursement: 2008 Primary
Candidate Name: Blunt Roy
Category/ Type:
Office Sought: ☒ House ☐ Senate ☐ President
State: MO District: 07
Disbursement For: 2008 ☒ Primary ☐ General ☐ Other (specify)

Transaction ID: 2511340704255402174
Date of Disbursement: 04 / 26 / 2007
Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶ **4500.00**

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

Image# 27990130757

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b | 22 | X 23 | 24 | 25 | 26
27 | 28a | 28b | 28c | 29 | 30b

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

A.
Full Name (Last, First, Middle Initial)
Grassley Committee Inc
Mailing Address PO Box 1000
City: Des Moines | State: IA | Zip Code: 50304
Purpose of Disbursement: 2010 Primary
Candidate Name: Grassley Charles
Category/ Type:
Office Sought: House / X Senate / President — State: IA District: 00
Disbursement For: 2010 — X Primary / General / Other (specify)
Transaction ID: 4672350704255369768
Date of Disbursement: 04 / 26 / 2007
Amount of Each Disbursement this Period: 2500.00

B.
Full Name (Last, First, Middle Initial)
Hoyer for Congress
Mailing Address 7905 Malcolm Road Suite 102
City: Clinton | State: MD | Zip Code: 20735
Purpose of Disbursement: 2008 Primary
Candidate Name: Hoyer Steny
Category/ Type:
Office Sought: X House / Senate / President — State: MD District: 05
Disbursement For: 2008 — X Primary / General / Other (specify)
Transaction ID: 6102830704255407623
Date of Disbursement: 04 / 26 / 2007
Amount of Each Disbursement this Period: 5000.00

C.
Full Name (Last, First, Middle Initial)
John Sullivan for Congress Inc
Mailing Address Post Office Box 470840
City: Tulsa | State: OK | Zip Code: 74147
Purpose of Disbursement: 2008 Primary
Candidate Name: Sullivan John
Category/ Type:
Office Sought: X House / Senate / President — State: OK District: 01
Disbursement For: 2008 — X Primary / General / Other (specify)
Transaction ID: 2982560704255398156
Date of Disbursement: 04 / 26 / 2007
Amount of Each Disbursement this Period: 5000.00

SUBTOTAL of Disbursements This Page (optional) ▶ **12500.00**

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

Image# 27990130758

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 X 23 24 25 26
27 28a 28b 28c 29 30b

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

A.
Full Name (Last, First, Middle Initial)
Michael Burgess for Congress
Mailing Address PO Box 2334
City Denton State TX Zip Code 76202
Purpose of Disbursement: 2008 Primary
Candidate Name: Burgess Michael
Category/ Type
Office Sought: X House / Senate / President — State: TX District: 26
Disbursement For: 2008 — X Primary / General / Other (specify)
Transaction ID: 2914940704255377685
Date of Disbursement: 04 / 26 / 2007
Amount of Each Disbursement this Period: 2500.00

B.
Full Name (Last, First, Middle Initial)
Mike Crapo for Us Senate
Mailing Address PO Box 1948
City Boise State ID Zip Code 83701
Purpose of Disbursement: 2010 Primary
Candidate Name: Crapo Michael
Category/ Type
Office Sought: House / X Senate / President — State: ID District: 00
Disbursement For: 2010 — X Primary / General / Other (specify)
Transaction ID: 4399610704133159632
Date of Disbursement: 04 / 13 / 2007
Amount of Each Disbursement this Period: 2000.00

C.
Full Name (Last, First, Middle Initial)
Pete Sessions for Congress 2008
Mailing Address Post Office Box 38585
City Dallas State TX Zip Code 75238
Purpose of Disbursement: 2008 Primary
Candidate Name: Sessions Pete
Category/ Type
Office Sought: X House / Senate / President — State: TX District: 32
Disbursement For: 2008 — X Primary / General / Other (specify)
Transaction ID: 3202950704255394764
Date of Disbursement: 04 / 26 / 2007
Amount of Each Disbursement this Period: 2500.00

SUBTOTAL of Disbursements This Page (optional) ▶ **7000.00**

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

Image# 27990130759

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b | 22 | X 23 | 24 | 25 | 26
27 | 28a | 28b | 28c | 29 | 30b

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

A.
Full Name (Last, First, Middle Initial)
Red Pac
Mailing Address Post Office Box 51
City Homeland | State FL | Zip Code 33847
Purpose of Disbursement: 2007 Contribution
Candidate Name
Category/ Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)

Transaction ID: 8193600704255425390
Date of Disbursement: 04 / 26 / 2007
Amount of Each Disbursement this Period: 1000.00

B.
Full Name (Last, First, Middle Initial)
Tim Johnson for South Dakota Inc
Mailing Address PO Box 1859
City Sioux Falls | State SD | Zip Code 57101
Purpose of Disbursement: 2008 Primary
Candidate Name: Johnson Tim
Category/ Type
Office Sought: House / X Senate / President
State: SD District: 00
Disbursement For: 2008 X Primary / General / Other (specify)

Transaction ID: 3608470704255388384
Date of Disbursement: 04 / 26 / 2007
Amount of Each Disbursement this Period: 2500.00

C.
Full Name (Last, First, Middle Initial)
Tom Allen for Congress Committee
Mailing Address PO Box 17766
City Portland | State ME | Zip Code 04112
Purpose of Disbursement: 2008 Primary
Candidate Name: Allen Thomas
Category/ Type
Office Sought: X House / Senate / President
State: ME District: 01
Disbursement For: 2008 X Primary / General / Other (specify)

Transaction ID: 9319660704255405926
Date of Disbursement: 04 / 26 / 2007
Amount of Each Disbursement this Period: 2500.00

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

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

Image# 27990130760

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Whitfield for Congress Committee

Mailing Address PO Box 391

City: Hopkinsville
State: KY
Zip Code: 42241

Purpose of Disbursement
2008 Primary

Candidate Name
Whitfield Edward

Category/ Type

Office Sought: ☒ House ☐ Senate ☐ President
State: KY District: 01

Disbursement For: 2008
☒ Primary ☐ General ☐ Other (specify)

Transaction ID: 1151520704255410576

Date of Disbursement: MM / DD / YYYY
04 / 26 / 2007

Amount of Each Disbursement this Period
2500.00

SUBTOTAL of Disbursements This Page (optional) ▶	**2500.00**
TOTAL This Period (last page this line number only) ▶	**43000.00**

Image# 27990130761

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use seperate 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	

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

A. Full Name (Last, First, Middle Initial)
Paul Lee

Mailing Address Box 3802
2351 Erwin Road

City: Durham
State: NC
Zip Code: 27702-3802

Purpose of Disbursement
refund of 4/24/07 contribution

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Transaction ID: 7673410705103093145

Date of Disbursement: MM / DD / YYYY
04 / 27 / 2007

Amount of Each Disbursement this Period
1000.00

SUBTOTAL of Disbursements This Page (optional) ▶	**1000.00**
TOTAL This Period (last page this line number only) ▶	**1000.00**

Image# 27990130762

Form/Schedule: **F3XA**

Transaction ID:

This amended May Monthly Report is being filed due to an error in reporting disbursements. Several checks were mistakenly dated 4/26/06 in the system, even though they were actually issued on 4/26/07. Because the beginning of the year balance in the Democracy Direct system is hard-coded, the beginning balance of the report did not change. Therefore, we were not aware that we were not reporting the disbursements.

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