02/04/2002 18 : 42

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** ▼ — CITY ▲ — STATE ▲ — ZIPCODE ▲

C00196246

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

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report(Q1)

July 15 Quarterly Report(Q2)

October 15 Quarterly Report(Q3)

January 31 Quarterly Report(YE)

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

Termination Report (TER)

(b) Monthly Report Due On:

	Feb 20 (M2)	May 20 (M5)	Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
X	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 (M13)

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

Election on in the State of

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

Election on in the State of

5. Covering Period 02 01 2001 through 02 28 2001

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 Carol Beatty

Signature of Treasurer Electronically Filed by Carol Beatty Date 02 04 2002

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** (Revised 1/2001)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC **Form 3X** (Revised 1/2001)

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

Report Covering the Period: From: 02 01 2001 To: 02 28 2001

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2001		304048.64
(b) Cash on Hand at Begining of Reporting Period	328217.63	
(c) Total Receipts (from Line 19)	9243.79	64430.86
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	337461.42	368479.50
7. Total Disbursements (from Line 30)	29255.39	60273.47
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	308206.03	308206.03
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	

CA

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: 02 01 2001 To: 02 28 2001

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)	7505.00	
(ii) Unitemized	1720.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ▶	9225.00	64412.07
(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 32, page 4) ..... ▶	9225.00	64412.07
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 36, page 4)	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.)	18.79	18.79
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18) ..... ▶	9243.79	64430.86
20. Total Federal Receipts (subtract Line 18 from Line 19) ..... ▶	9243.79	64430.86

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Revised 1/2001)

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	16255.39	27123.47
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)) ▶	16255.39	27123.47
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	13000.00	33000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26. Loan Repayments Made	0.00	0.00
27. Loans Made	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	150.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) ▶	0.00	150.00
29. Other Disbursements	0.00	0.00
30. Total Disbursements (add Lines 21(c), 22, 23,24,25,26,27,28(d),and 29) ▶	29255.39	60273.47
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30) ▶	29255.39	60273.47
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) from Line 11(d), page 3)	9225.00	64412.07
33. Total Contribution Refunds (from Line 28(d))	0.00	150.00
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)	9225.00	64262.07
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	16255.39	27123.47
36. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
37. Net Operating Expenditures (subtract Line 36 from Line 35) ▶	16255.39	27123.47

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 5 / 15

[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): Michelle Berger
Mailing Address: Suite 210 11149 Research Boulevard
City: Austin State: TX Zip Code: 78759-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt: 02 28 2001
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 0406200126C375462

B. Full Name (Last, First, Middle Initial): Peter Broberg
Mailing Address: 4207 James Casey Ste 306
City: Austin State: TX Zip Code: 78745-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt: 02 09 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 0406200126C375406

C. Full Name (Last, First, Middle Initial): James Brennen Byrne
Mailing Address: 401 Meridian St Suite 400
City: Huntsville State: AL Zip Code: 35801-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 365.00
Date of Receipt: 02 09 2001
Amount of Each Receipt this Period: 365.00
Receipt
Transaction ID: 0406200126C375259

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1165.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 6 / 15

[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): James Brennen Byrne
Mailing Address: 401 Meridian St, Suite 400
City: Huntsville State: AL Zip Code: 35801-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 730.00
Date of Receipt: 02 28 2001
Amount of Each Receipt this Period: 365.00
Receipt
Transaction ID: 0406200126C3756010

B. Full Name (Last, First, Middle Initial): James Doomer
Mailing Address: Austin Retina Assoc, 801 W 38th St
City: Austin State: TX Zip Code: 78705-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 365.00
Date of Receipt: 02 28 2001
Amount of Each Receipt this Period: 365.00
Receipt
Transaction ID: 0406200126C3755011

C. Full Name (Last, First, Middle Initial): Robert Gillam
Mailing Address: 107 James Coleman Dr
City: Victoria State: TX Zip Code: 77904-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 365.00
Date of Receipt: 02 28 2001
Amount of Each Receipt this Period: 365.00
Receipt
Transaction ID: 0417200111C3770013

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1095.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

A.
Full Name (Last, First, Middle Initial): James Gills
Mailing Address: PO Box 5000 43309 US Highway 19 North
City: Tarpon Springs State: FL Zip Code: 34688-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt: 02 28 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 0406200126C3754514

B.
Full Name (Last, First, Middle Initial): Jay Gooze
Mailing Address: 21 Gonic Road
City: Rochester State: NH Zip Code: 03867-3900
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt: 02 28 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 0406200126C3754915

C.
Full Name (Last, First, Middle Initial): M Adams Hall
Mailing Address: 20755 Greenfield
City: Southfield State: MI Zip Code: 48025-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 365.00
Date of Receipt: 02 09 2001
Amount of Each Receipt this Period: 365.00
Receipt
Transaction ID: 0406200126C3752616

SUBTOTAL of Receipts This Page (optional) ..... ▶ **965.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 8 / 15

[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 Patrick Hanlon

Mailing Address
Mary Potter Pavillion Ste 401 2850 W 95th St

City: Evergreen Park State: IL Zip Code: 60805-2735

FEC ID number of contributing federal political committee.

Name of Employer: self
Occupation: Ophthalmologist

Receipt For: Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼ 365.00

Date of Receipt: 02 09 2001

Amount of Each Receipt this Period: 365.00

Receipt

Transaction ID: 0406200126C3753717

B. Full Name (Last, First, Middle Initial)
John Patrick Hanlon

Mailing Address
Mary Potter Pavillion Ste 401 2850 W 95th St

City: Evergreen Park State: IL Zip Code: 60805-2735

FEC ID number of contributing federal political committee.

Name of Employer: self
Occupation: Ophthalmologist

Receipt For: Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼ 865.00

Date of Receipt: 02 09 2001

Amount of Each Receipt this Period: 300.00

Receipt

Transaction ID: 0406200126C3754218

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

Mailing Address
112 La Casa Via Ste 260

City: Walnut Creek State: CA Zip Code: 94596-

FEC ID number of contributing federal political committee.

Name of Employer: self
Occupation: Ophthalmologist

Receipt For: Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 02 28 2001

Amount of Each Receipt this Period: 500.00

Receipt

Transaction ID: 0919200115C3800519

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1165.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 9 / 15

[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 Hefner
Mailing Address: 2210 Dean St Ste L
City: Saint Charles State: IL Zip Code: 60175-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt: 02 28 2001
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 0406200126C3755221

B.
Full Name (Last, First, Middle Initial): Elizabeth Hodapp
Mailing Address: 245 E Rivo Alto Dr
City: Miami Beach State: FL Zip Code: 33139-1267
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: physician
Receipt For: Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt: 02 08 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 0406200126C3753823

C.
Full Name (Last, First, Middle Initial): Paul Kremer
Mailing Address: 2601 Cherry Ave Ste 215
City: Bremerton State: WA Zip Code: 98310-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt: 02 28 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 0406200126C3754826

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1100.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 10 / 15

[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 Lee
Mailing Address: 491 30th St Ste 201
City: Oakland State: CA Zip Code: 94609-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 02 28 2001
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 0406200126C3754727

B.
Full Name (Last, First, Middle Initial): Lambert Macias
Mailing Address: 57 West 57th Street #709
City: New York State: NY Zip Code: 10019-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: oph
Receipt For: Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 365.00

Date of Receipt: 02 28 2001
Amount of Each Receipt this Period: 365.00
Receipt
Transaction ID: 0406200126C3756330

C.
Full Name (Last, First, Middle Initial): Gary Pearce
Mailing Address: 1010 N Mills Ave
City: Arcadia State: FL Zip Code: 34266-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 02 09 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 0406200126C3752333

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1165.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 11 / 15

[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): Theodore Renne
Mailing Address: 454 Old St Rd Ste 204
City: Peterborough State: NH Zip Code: 03458-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt: 02 09 2001
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 0406200126C3753538

B. Full Name (Last, First, Middle Initial): Nelson Sabates
Mailing Address: 8550 Holmes St Ste 120
City: Kansas City State: MO Zip Code: 64131-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt: 02 28 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 0406200126C3755339

C. Full Name (Last, First, Middle Initial): Kevin Tracey
Mailing Address: 645 Ridgewood Road
City: Duluth State: MN Zip Code: 55804-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt: 02 28 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 0406200126C3755742

SUBTOTAL of Receipts This Page (optional) ..... ▶ **850.00**

TOTAL This Period (last page this line number only) ..... ▶ **7505.00**

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 12 / 15

☐ 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
Po Box 24512

City: San Francisco
State: CA
Zip Code: 94124-0512

FEC ID number of contributing federal political committee.

Name of Employer

Occupation

Date of Receipt
02 28 2001

Amount of Each Receipt this Period
18.79

Other Receipt

Receipt For:
X Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
18.79

Transaction ID: 0417200111C37710

B.

C.

SUBTOTAL of Receipts This Page (optional) ▶	**18.79**
TOTAL This Period (last page this line number only) ▶	**18.79**

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

A.
Full Name (Last, First, Middle Initial)
Membership Marketing Srvcs Inc

Mailing Address
1280 Perimeter Parkway
City: Virginia Beach
State: VA
Zip Code: 23454-

Purpose of Disbursement
Marketing Exp

Candidate Name

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

Disbursement For: Primary / General / Other (specify)

Category/Type: Marketing Exp

Date of Disbursement: 02 / 02 / 2001

Amount of Each Disbursement this Period: 282.40

Transaction ID: 0406200126E2738

B.
Full Name (Last, First, Middle Initial)
Membership Marketing Srvcs Inc

Mailing Address
1280 Perimeter Parkway
City: Virginia Beach
State: VA
Zip Code: 23454-

Purpose of Disbursement
Marketing Exp

Candidate Name

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

Disbursement For: Primary / General / Other (specify)

Category/Type: Marketing Exp

Date of Disbursement: 02 / 15 / 2001

Amount of Each Disbursement this Period: 15533.60

Transaction ID: 0406200126E2734

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

Mailing Address
Po Box 24512
City: San Francisco
State: CA
Zip Code: 94124-0512

Purpose of Disbursement
UB cking acct exp Feb 01

Candidate Name

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

Disbursement For: Primary / General / Other (specify)

Category/Type: UB cking acct exp Feb 01

Date of Disbursement: 02 / 28 / 2001

Amount of Each Disbursement this Period: 459.39

Transaction ID: 0417200111E2755

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **16255.39**

TOTAL This Period (last page this line number only) ..... ▶ **16255.39**

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

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

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

A.
Full Name (Last, First, Middle Initial)
Billy Tauzin Congressional Campaign

Mailing Address
Po Box 1407
City: Thibodaux State: LA Zip Code: 70302-1407

Purpose of Disbursement
House LA-3

Candidate Name

Category/Type

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

Disbursement For: X Primary General / Other (specify)

Date of Disbursement: 02 / 15 / 2001

Amount of Each Disbursement this Period: 5000.00

House LA-3

Transaction ID: 0406200126E2737

B.
Full Name (Last, First, Middle Initial)
Committee To Re-elect Ed Towns

Mailing Address
438 Lewis Ave
City: Brooklyn State: NY Zip Code: 11233-1726

Purpose of Disbursement
House NY 10

Candidate Name

Category/Type

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

Disbursement For: X Primary General / Other (specify)

Date of Disbursement: 02 / 09 / 2001

Amount of Each Disbursement this Period: 1000.00

House NY 10

Transaction ID: 0417200111E2753

C.
Full Name (Last, First, Middle Initial)
Friends Of Max Baucus

Mailing Address
Po Box 586
City: Helena State: MT Zip Code: 59624-0586

Purpose of Disbursement
Senate MT

Candidate Name

Category/Type

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

Disbursement For: X Primary General / Other (specify)

Date of Disbursement: 02 / 09 / 2001

Amount of Each Disbursement this Period: 2500.00

Senate MT

Transaction ID: 0417200111E2754

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **8500.00**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

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

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

A.
Full Name (Last, First, Middle Initial)
Kennedy For Congress

Mailing Address
11426 County Rd 13 SE
City: Watertown
State: MN
Zip Code: 55388-

Purpose of Disbursement
House MN-2

Candidate Name

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

Disbursement For: X Primary / General / Other (specify)

Category/Type: House MN-2

Date of Disbursement: 02 02 2001

Amount of Each Disbursement this Period: 2000.00

Transaction ID: 0406200126E2735

B.
Full Name (Last, First, Middle Initial)
Sen. Bill Nelson

Mailing Address
U.S. Courthouse Annex 111 North Adams Street
City: Tallahassee
State: FL
Zip Code: 32301-

Purpose of Disbursement
Senate FL

Candidate Name

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

Disbursement For: X Primary / General / Other (specify)

Category/Type: Senate FL

Date of Disbursement: 02 02 2001

Amount of Each Disbursement this Period: 2500.00

Transaction ID: 0406200126E2732

C.

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

TOTAL This Period (last page this line number only) ..... ▶ **13000.00**