FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)

ADDRESS (number and street) ▼ 655 Beach Street

☐ Check if different than previously reported. (ACC)

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

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

3. IS THIS REPORT ☒ NEW (N) **OR** ☐ AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

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

(b) Monthly Report Due On:

- ☐ Feb 20 (M2)
- ☐ Mar 20 (M3)
- ☐ Apr 20 (M4)
- ☐ May 20 (M5)
- ☐ Jun 20 (M6)
- ☐ Jul 20 (M7)
- ☐ Aug 20 (M8)
- ☐ Sep 20 (M9)
- ☐ Oct 20 (M10)
- ☐ Nov 20 (M11) (Non-Election Year Only)
- ☐ Dec 20 (M12) (Non-Election Year Only)
- ☒ Jan 31 (YE)

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

Election on MM / DD / YYYY in the State of

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

Election on MM / DD / YYYY in the State of

5. Covering Period 12 / 01 / 2011 through 12 / 31 / 2011

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 Steven Rausch

Signature of Treasurer *Steven Rausch* ***[Electronically Filed]*** Date 01 / 25 / 2012

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

Office Use Only							

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC **Form 3X** (Rev. 02/2003)

Write or Type Committee Name

American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)

Report Covering the Period: From: MM 12 / DD 01 / YYYY 2011 To: MM 12 / DD 31 / YYYY 2011

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, YYYY 2011		353076.28
(b) Cash on Hand at Beginning of Reporting Period.....	486668.30	
(c) Total Receipts (from Line 19).....	26063.72	594123.41
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	512732.02	947199.69
7. Total Disbursements (from Line 31).....	56821.66	491289.33
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	455910.36	455910.36
9. Debts and Obligations Owed **TO** the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed **BY** the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC **Form 3X** (Rev. 06/2004)

Write or Type Committee Name

American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)

Report Covering the Period: From: M M 12 / D D 01 / Y Y Y Y 2011 To: M M 12 / D D 31 / Y Y Y Y 2011

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)	21749.97	480426.42
(ii) Unitemized	4114.75	112912.99
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	25864.72	593339.41
(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) ▶	25864.72	593339.41
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.)	199.00	784.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) ▶	26063.72	594123.41
20. Total Federal Receipts (subtract Line 18(c) from Line 19) ▶	26063.72	594123.41

DETAILED SUMMARY PAGE
of Disbursements

FEC **Form 3X** (Rev. 02/2003)

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	979.99	23488.32
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶	979.99	23488.32
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	55500.00	457200.00
24. Independent Expenditures (use Schedule E)	0.00	3900.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
26. Loan Repayments Made	0.00	0.00
27. Loans Made	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	341.67	6701.01
(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)) ▶	341.67	6701.01
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) ▶	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	56821.66	491289.33
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) ▶	56821.66	491289.33

DETAILED SUMMARY PAGE
of Disbursements

FEC **Form 3X** (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	25864.72	593339.41
34. Total Contribution Refunds (from Line 28(d))	341.67	6701.01
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	25523.05	586638.40
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	979.99	23488.32
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ▶	979.99	23488.32

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. Full Name (Last, First, Middle Initial): Patrick Aiello
Mailing Address: 275 W 28th St, Attn: Marlene
City: Yuma State: AZ Zip Code: 85364-7308
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1016.74
Date of Receipt: 12 / 14 / 2011
Transaction ID : 74C67E9A8D3F863235E
Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial): Patrick Aiello
Mailing Address: 275 W 28th St, Attn: Marlene
City: Yuma State: AZ Zip Code: 85364-7308
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1016.74
Date of Receipt: 12 / 28 / 2011
Transaction ID : 41F498937B2F0165A708
Amount of Each Receipt this Period: 83.34

C. Full Name (Last, First, Middle Initial): Peter Amaral
Mailing Address: 635 Medical Pkwy
City: Brenham State: TX Zip Code: 77833-5412
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 / 24 / 2011
Transaction ID : 4B3E80E6D32005833E97
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ▶ 208.34

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial): Warren Appleman
Mailing Address: 66 E 79th St
City: New York | State: NY | Zip Code: 10075-0244
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 ▼: 250.02
Date of Receipt: 12 / 26 / 2011
Transaction ID : 41E799D8AD49DEBC30AC
Amount of Each Receipt this Period: 41.67

B. Full Name (Last, First, Middle Initial): Paul Arnold
Mailing Address: 777 Tanglefoot Ln
City: Bettendorf | State: IA | Zip Code: 52722-1650
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 ▼: 450.00
Date of Receipt: 12 / 13 / 2011
Transaction ID : 13D4FD39-3CDF-49F3-
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial): David Blandford
Mailing Address: 1937 Old Main St Ste 2
City: Maysville | State: KY | Zip Code: 41056-8956
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 ▼: 833.40
Date of Receipt: 12 / 31 / 2011
Transaction ID : 4F79B6A4577BAA2BAAE0
Amount of Each Receipt this Period: 83.34

SUBTOTAL of Receipts This Page (optional) ▶ 375.01

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial): Steven Bodine
Mailing Address: 915 Palmer Rd, Retina Consultations
City: Bronxville State: NY Zip Code: 10708-3304
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: 458.37
Date of Receipt: 12/28/2011
Transaction ID : 4590B73D7D600CBF3E44
Amount of Each Receipt this Period: 41.67

B. Full Name (Last, First, Middle Initial): Peter Branden
Mailing Address: 1201 W Main St, Ste 100
City: Waterbury State: CT Zip Code: 06708-3105
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: 12/07/2011
Transaction ID : 49013E38671AD1A7550
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial): Chadwick Brasington
Mailing Address: 1016 Kirkpatrick Rd
City: Burlington State: NC Zip Code: 27215-9714
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: 364.92
Date of Receipt: 12/07/2011
Transaction ID : 4EFB89D1AEFB7DBC3D0B
Amount of Each Receipt this Period: 30.41

SUBTOTAL of Receipts This Page (optional) ▶ 572.08

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

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ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial): William Bridges Jr.
Mailing Address: 21 Medical Park Dr
City: Asheville State: NC Zip Code: 28803-2493
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: 583.38
Date of Receipt: 12 / 22 / 2011
Transaction ID : 4D49A2FDF45BBA0B9529
Amount of Each Receipt this Period: 83.34

B. Full Name (Last, First, Middle Initial): Donald Budenz
Mailing Address: 5151 Bioinformatics Campus Box 7040
City: Chapel Hill State: NC Zip Code: 27599-0001
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: 12 / 22 / 2011
Transaction ID : 8374433B-2212-4404-
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial): John Burchfield
Mailing Address: 2865 N Reynolds Rd Ste 170
City: Toledo State: OH Zip Code: 43615-2076
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 / 18 / 2011
Transaction ID : 48C0814FF407EA23FDCC
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ▶ 608.34

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial): Frank Burns
Mailing Address: 13324 Shelbyville Rd
City: Louisville State: KY Zip Code: 40223-3936
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: 833.40
Date of Receipt: 12 / 06 / 2011
Transaction ID : 4C73A7D70612E3117145
Amount of Each Receipt this Period: 83.34

B. Full Name (Last, First, Middle Initial): David Chang
Mailing Address: 762 Altos Oaks Dr Ste 1
City: Los Altos State: CA Zip Code: 94024-5435
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: 12 / 16 / 2011
Transaction ID : 51271FF65EE50655239
Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial): Robert Chestler
Mailing Address: 10502 NE Wasco St
City: Portland State: OR Zip Code: 97220-3948
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: 225.00
Date of Receipt: 12 / 29 / 2011
Transaction ID : 477DB4DF761A467FC098
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ▶ 1108.34

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial): Andrew Choy
Mailing Address: 4100 Long Beach Blvd, Ste 108
City: Long Beach | State: CA | Zip Code: 90807-2696
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: 12/06/2011
Transaction ID : 038FC2EF0027BE749E4
Amount of Each Receipt this Period: 365.00

B. Full Name (Last, First, Middle Initial): Hak Chung
Mailing Address: 3520 Moye Trl
City: Duluth | State: GA | Zip Code: 30097-6216
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: 750.02
Date of Receipt: 12/09/2011
Transaction ID : 41AAB128C7A5155E715E
Amount of Each Receipt this Period: 41.67

C. Full Name (Last, First, Middle Initial): Mark Cichowski
Mailing Address: PO Box 1227
City: Coupeville | State: WA | Zip Code: 98239-1227
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: 12/20/2011
Transaction ID : 13C54AC35754B9086D5
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 656.67

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial): Donald Cinotti
Mailing Address: 600 Pavonia Ave, Ste 6
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: 1200.00
Date of Receipt: 12/18/2011
Transaction ID : 44B69EE24853F416F337
Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial): S. William William Clark
Mailing Address: 502 Isabella St
City: Waycross | State: GA | Zip Code: 31501-3638
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: 4999.92
Date of Receipt: 12/24/2011
Transaction ID : 4FD887CA6CDB4B9F67C2
Amount of Each Receipt this Period: 416.66

C. Full Name (Last, First, Middle Initial): Christopher Coad
Mailing Address: 157 W 19th St
City: New York | State: NY | Zip Code: 10011-4102
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: 12/14/2011
Transaction ID : 4CD5A142708535C2C4DA
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ▶ 541.66

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial): Atys Cope
Mailing Address: PO Box 239
City: Statesboro State: GA Zip Code: 30459-0239
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: 250.02
Date of Receipt: 12/27/2011
Transaction ID : 44328D14734774464BAB
Amount of Each Receipt this Period: 83.34

B. Full Name (Last, First, Middle Initial): Nazareth Darakjian
Mailing Address: 2595 E Washington Blvd Ste 102
City: Pasadena State: CA Zip Code: 91107-1409
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: 12/19/2011
Transaction ID : 9FCBCBA3-2429-473D-
Amount of Each Receipt this Period: 365.00

C. Full Name (Last, First, Middle Initial): Anna Luisa Luisa Di Lorenzo
Mailing Address: 2877 Crooks Rd Ste B
City: Troy State: MI Zip Code: 48084-4717
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: 4041.70
Date of Receipt: 12/16/2011
Transaction ID : 43658693A10C07076DEA
Amount of Each Receipt this Period: 208.34

SUBTOTAL of Receipts This Page (optional) ▶ 656.68

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial): Andrew Doan
Mailing Address: 31515 Rancho Pueblo Rd, Ste 103
City: Temecula State: CA Zip Code: 92592-4837
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: 375.03
Date of Receipt: 12 / 07 / 2011
Transaction ID : 44BCBADA774272D81B11
Amount of Each Receipt this Period: 41.67

B. Full Name (Last, First, Middle Initial): Joseph Doe
Mailing Address: 1052 Gull Rd
City: Kalamazoo State: MI Zip Code: 49048-1734
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: 365.04
Date of Receipt: 12 / 18 / 2011
Transaction ID : 4EC09357F3D8511102FB
Amount of Each Receipt this Period: 30.42

C. Full Name (Last, First, Middle Initial): William Ehlers
Mailing Address: 125 Secret Lake Rd
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: 375.03
Date of Receipt: 12 / 12 / 2011
Transaction ID : 40469DF78F05875D64CC
Amount of Each Receipt this Period: 41.67

SUBTOTAL of Receipts This Page (optional) ▶ 113.76

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial): Natalka Fedoriw
Mailing Address: 3301 Lake Ave
City: Fort Wayne | State: IN | Zip Code: 46805-5529
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: 12 / 15 / 2011
Transaction ID : 1E55E0AE39FA353F51F
Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial): James Finegan
Mailing Address: 236 Roseberry St
City: Phillipsburg | State: NJ | Zip Code: 08865-1632
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 ▼: 750.06
Date of Receipt: 12 / 07 / 2011
Transaction ID : 4E198534283B7FC60E69
Amount of Each Receipt this Period: 83.34

C. Full Name (Last, First, Middle Initial): Terry Forrest
Mailing Address: 103 Cox Blvd
City: Goldsboro | State: NC | Zip Code: 27534-9478
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: 12 / 14 / 2011
Transaction ID : 422172DB5AB2927A3CD
Amount of Each Receipt this Period: 365.00

SUBTOTAL of Receipts This Page (optional) ▶ 1448.34

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial): David Forster
Mailing Address: 6231 Leesburg Pike
City: Falls Church State: VA Zip Code: 22044-2102
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: 12/22/2011
Transaction ID : 19EF4B70-45CC-4214-
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial): Sunir Garg
Mailing Address: 840 Walnut St Ste 1020
City: Philadelphia State: PA Zip Code: 19107-5109
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: 334.62
Date of Receipt: 12/27/2011
Transaction ID : 487D8F27562023FF4017
Amount of Each Receipt this Period: 30.42

C. Full Name (Last, First, Middle Initial): Geoffrey Garrett
Mailing Address: 1455 E Bert Kouns Loop
City: Shreveport State: LA Zip Code: 71105-5634
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: 730.00
Date of Receipt: 12/02/2011
Transaction ID : 92C72317F044391C913
Amount of Each Receipt this Period: 365.00

SUBTOTAL of Receipts This Page (optional) ▶ 895.42

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

A. Full Name (Last, First, Middle Initial): Gregory Gibb
Mailing Address: 2840 Oneil Ln
City: Eureka State: CA Zip Code: 95503-4870
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: 12 / 15 / 2011
Transaction ID : 0FA922D8D1D26D62494
Amount of Each Receipt this Period: 365.00

B. Full Name (Last, First, Middle Initial): Michael Gilbert
Mailing Address: 12301 NE 10th Pl Ste 200
City: Bellevue State: WA Zip Code: 98005-2487
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 750.06

Date of Receipt: 12 / 03 / 2011
Transaction ID : 47A29B4CC5ED1AC9219D
Amount of Each Receipt this Period: 83.34

C. Full Name (Last, First, Middle Initial): John Douglas Goosey
Mailing Address: 6545 Rutgers Ave
City: Houston State: TX Zip Code: 77005-3850
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: 1200.00

Date of Receipt: 12 / 28 / 2011
Transaction ID : 49AD92557F3201E3E36A
Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 548.34

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial): Erich Groos
Mailing Address: 2400 Patterson St, Ste 201
City: Nashville State: TN Zip Code: 37203-1587
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: 750.06
Date of Receipt: 12 / 16 / 2011
Transaction ID : 47BD97883A1877229F06
Amount of Each Receipt this Period: 83.34

B. Full Name (Last, First, Middle Initial): Cynthia Hampton
Mailing Address: 238 Saddletree Rd
City: Oxford State: NC Zip Code: 27565-3466
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: 2000.00
Date of Receipt: 12 / 31 / 2011
Transaction ID : 648082F7-1544-461A-
Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial): Richard Hawkins
Mailing Address: 1729 New Hanover Medical Park Dr
City: Wilmington State: NC Zip Code: 28403-5345
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: 600.00
Date of Receipt: 12 / 11 / 2011
Transaction ID : 4352989D236A54E21079
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ▶ 1133.34

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial): Grant William Heinz
Mailing Address: 4824 E Baseline Rd, Ste 113
City: Mesa State: AZ Zip Code: 85206-4678
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: 12 / 21 / 2011
Transaction ID : BB488D2F-8106-4FD1-
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial): G. Baker Hubbard
Mailing Address: 1365B Clifton Rd NE, Ste B3409
City: Atlanta State: GA Zip Code: 30322-1013
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: 12 / 08 / 2011
Transaction ID : 4E68B005BB93E6DE8457
Amount of Each Receipt this Period: 25.00

C. Full Name (Last, First, Middle Initial): W. Jackson Iliff
Mailing Address: 8109 Ritchie Hwy
City: Pasadena State: MD Zip Code: 21122-6917
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: 600.00
Date of Receipt: 12 / 30 / 2011
Transaction ID : 4FC88414AC6725D6E17B
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ▶ 575.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial): Carol Johnston
Mailing Address: 6 Office Park Dr
City: Jacksonville State: NC Zip Code: 28546-7325
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: 730.00
Date of Receipt: 12 / 15 / 2011
Transaction ID : 04430938AD3F0711B88
Amount of Each Receipt this Period: 365.00

B. Full Name (Last, First, Middle Initial): Randolph Johnston
Mailing Address: 1300 E 20th St
City: Cheyenne State: WY Zip Code: 82001-4021
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: 1200.00
Date of Receipt: 12 / 31 / 2011
Transaction ID : 4DCF91CAC45B173C340F
Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial): Leslie Jones
Mailing Address: 2041 Georgia Ave NW Ste 2100
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: 375.03
Date of Receipt: 12 / 08 / 2011
Transaction ID : 4EC68D25CE4531D6F0A9
Amount of Each Receipt this Period: 41.67

SUBTOTAL of Receipts This Page (optional) ▶ 506.67

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial): Jerome Jordan
Mailing Address: 200 Mifflin Ave
City: Scranton State: PA Zip Code: 18503-1982
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: 375.03
Date of Receipt: 12/02/2011
Transaction ID : 4DB5B2F33DC3FF2B1824
Amount of Each Receipt this Period: 41.67

B. Full Name (Last, First, Middle Initial): Kenneth Kato
Mailing Address: 2020 Fleischmann Rd
City: Tallahassee State: FL Zip Code: 32308-4599
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: 1199.00
Date of Receipt: 12/06/2011
Transaction ID : EC4D8C81DFD6A5A835F
Amount of Each Receipt this Period: 1199.00

C. Full Name (Last, First, Middle Initial): James Klein
Mailing Address: 21711 Greater Mack Ave
City: Saint Clair Shores State: MI Zip Code: 48080-2418
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: 1200.00
Date of Receipt: 12/05/2011
Transaction ID : 4062A7CA76A3BD54EF7E
Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 1340.67

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial): Craig Kliger
Mailing Address: 100 Galewood Cir
City: San Francisco State: CA Zip Code: 94131-1132
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 365.04
Date of Receipt: 12 / 24 / 2011
Transaction ID : 425FA191EC4C2CA7835E
Amount of Each Receipt this Period: 30.42

B. Full Name (Last, First, Middle Initial): Douglas Kopp
Mailing Address: 2222 W 24th St Unit 10
City: Plainview State: TX Zip Code: 79072-1802
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 ▼: 600.00
Date of Receipt: 12 / 08 / 2011
Transaction ID : 4F0087D349BE8069ECE5
Amount of Each Receipt this Period: 50.00

C. Full Name (Last, First, Middle Initial): Adrian Lavina
Mailing Address: 3399 Pga Blvd Ste 350
City: Palm Beach Gardens State: FL Zip Code: 33410-2831
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 750.02
Date of Receipt: 12 / 08 / 2011
Transaction ID : 4356A97CD9F8C5A1F583
Amount of Each Receipt this Period: 83.34

SUBTOTAL of Receipts This Page (optional) ▶ 163.76

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial): Janice Law
Mailing Address: 2311 Pierce Ave
City: Nashville State: TN Zip Code: 37232-0025
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: 12 / 04 / 2011
Transaction ID : 4F2E9FFEC97D44D4E05C
Amount of Each Receipt this Period: 25.00

B. Full Name (Last, First, Middle Initial): William Layden
Mailing Address: 4444 E Fletcher Ave Ste D
City: Tampa State: FL Zip Code: 33613-4905
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: 12 / 22 / 2011
Transaction ID : 76BE26D1-B079-42AD-
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial): Robert Lehner
Mailing Address: 3805A Spring St PO Box 1677
City: Mount Pleasant State: WI Zip Code: 53405-1600
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: 12 / 07 / 2011
Transaction ID : DF2692EBE59419DA342
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ▶ 1525.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial): Sue Lim
Mailing Address: 263 Harrington Dr
City: Troy State: MI Zip Code: 48098-3027
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 / 08 / 2011
Transaction ID : 4772AF764B2B21B09639
Amount of Each Receipt this Period: 25.00

B. Full Name (Last, First, Middle Initial): David Loewy
Mailing Address: 407 Avenue K SE
City: Winter Haven State: FL Zip Code: 33880-4126
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: 12 / 08 / 2011
Transaction ID : C784B375-3C79-4E1E-
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial): Peter Lowe
Mailing Address: 4175 S Congress Ave Ste V
City: Lake Worth State: FL Zip Code: 33461-4725
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: 500.04
Date of Receipt: 12 / 16 / 2011
Transaction ID : 4EFBA649A9C06A4B7912
Amount of Each Receipt this Period: 83.34

SUBTOTAL of Receipts This Page (optional) ▶ 358.34

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial): Scott MacRae
Mailing Address: 100 Meridian Ctr
Univ of Rochester - Strong Vision,
City: Rochester State: NY Zip Code: 14618-3926
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: 12/06/2011
Transaction ID : 4B0B677844B483FD7F5
Amount of Each Receipt this Period: 374.99

B. Full Name (Last, First, Middle Initial): Masud Malik
Mailing Address: 3865 N Mulford Rd
City: Rockford State: IL Zip Code: 61114-5603
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 916.74
Date of Receipt: 12/16/2011
Transaction ID : 46049D5CD47F7F98378B
Amount of Each Receipt this Period: 83.34

C. Full Name (Last, First, Middle Initial): Majid Mani
Mailing Address: 8736 Glenwick Ln
City: La Jolla State: CA Zip Code: 92037-2039
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: 800.00
Date of Receipt: 12/22/2011
Transaction ID : 32F49314-69F7-49A5-
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 958.33

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial): Sheron Marshall
Mailing Address: 7075 Campus Dr, Ste 100
City: Colorado Springs State: CO Zip Code: 80920-6524
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: 375.03
Date of Receipt: 12 / 08 / 2011
Transaction ID : 4A9EB151D6C302A89296
Amount of Each Receipt this Period: 41.67

B. Full Name (Last, First, Middle Initial): Benjamin Mason
Mailing Address: 1110 Eagle Ridge Rd
City: Cedar Falls State: IA Zip Code: 50613-1514
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: 591.69
Date of Receipt: 12 / 29 / 2011
Transaction ID : 48EA825201A1D3961BE2
Amount of Each Receipt this Period: 41.67

C. Full Name (Last, First, Middle Initial): J. Patrick McGraw
Mailing Address: 703 Rutter Ave
City: Kingston State: PA Zip Code: 18704-4801
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: 500.00
Date of Receipt: 12 / 31 / 2011
Transaction ID : DF40E3C1-0434-4040-
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 583.34

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial): Timothy McInnis
Mailing Address: 300 N Willson Ave, Ste 1003
City: Bozeman State: MT Zip Code: 59715-3551
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 / 14 / 2011
Transaction ID : 488A9C96386990B3418B
Amount of Each Receipt this Period: 25.00

B. Full Name (Last, First, Middle Initial): Aaron Miller
Mailing Address: 13414 Medical Complex Dr, Ste 4
City: Tomball State: TX Zip Code: 77375-3333
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: 600.00
Date of Receipt: 12 / 24 / 2011
Transaction ID : 4217B8E26F13ED86E036
Amount of Each Receipt this Period: 50.00

C. Full Name (Last, First, Middle Initial): Amalia Miranda
Mailing Address: 3435 NW 56th St, Building A # 700
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: 1200.00
Date of Receipt: 12 / 14 / 2011
Transaction ID : 49B1B1D20603A704F85B
Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 175.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

A. Full Name (Last, First, Middle Initial): Sok Nam
Mailing Address: 4278 W 3rd St
City: Los Angeles | State: CA | Zip Code: 90020-3449
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 ▼: 250.02
Date of Receipt: 12 / 08 / 2011
Transaction ID : 43C6957E0AFD3B86CE57
Amount of Each Receipt this Period: 83.34

B. Full Name (Last, First, Middle Initial): Kelly Patrick O'Neill
Mailing Address: 563 Wessel Dr
City: Fairfield | State: OH | Zip Code: 45014-3668
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 ▼: 1000.08
Date of Receipt: 12 / 09 / 2011
Transaction ID : 476FAD21DD81BDCD0403
Amount of Each Receipt this Period: 83.34

C. Full Name (Last, First, Middle Initial): Paul Orloff
Mailing Address: 178 E 71st St
City: New York | State: NY | Zip Code: 10021-5131
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: 12 / 15 / 2011
Transaction ID : 4DF0BE1666A4880B697F
Amount of Each Receipt this Period: 125.00

SUBTOTAL of Receipts This Page (optional) ▶ 291.68

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

A. Full Name (Last, First, Middle Initial): Millicent Palmer
Mailing Address: 4101 Woolworth Ave, Ste 112
City: Omaha State: NE Zip Code: 68105-1850
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: 500.01
Date of Receipt: 12 / 20 / 2011
Transaction ID : 474FB6F8F7DABA355B66
Amount of Each Receipt this Period: 41.67

B. Full Name (Last, First, Middle Initial): Joseph Parelman
Mailing Address: 3830 W 75th St
City: Prairie Village State: KS Zip Code: 66208-4128
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: 12 / 20 / 2011
Transaction ID : 062A0CF56A5825AB1EC
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial): James Pickrell
Mailing Address: 422 Poplar St
City: Terre Haute State: IN Zip Code: 47807-4209
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: 398.00
Date of Receipt: 12 / 02 / 2011
Transaction ID : C2D1F3F77BB451F1FB3
Amount of Each Receipt this Period: 199.00

SUBTOTAL of Receipts This Page (optional) ▶ 740.67

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

A. Full Name (Last, First, Middle Initial): Vadrevu Raju
Mailing Address: 3140 Collins Ferry Rd
City: Morgantown State: WV Zip Code: 26505-3352
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 / 11 / 2011
Transaction ID : 4CF9A3B71728B847CA31
Amount of Each Receipt this Period: 25.00

B. Full Name (Last, First, Middle Initial): David Richardson
Mailing Address: 207 S Santa Anita Ave Ste P25
City: San Gabriel State: CA Zip Code: 91776-1145
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: 3804.00
Date of Receipt: 12 / 26 / 2011
Transaction ID : 4D9DAC51801D85489525
Amount of Each Receipt this Period: 317.00

C. Full Name (Last, First, Middle Initial): H. Miller Richert
Mailing Address: 1750 Pine St
City: Abilene State: TX Zip Code: 79601-3044
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: 12 / 02 / 2011
Transaction ID : E6991B1B523582BC717
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 842.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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[ ] 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): Teresa Rosales
Mailing Address: 4100 Long Beach Blvd, Ste 108
City: Long Beach State: CA Zip Code: 90807-2696
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 / 09 / 2011
Transaction ID : 40309BB142E8B85077D1
Amount of Each Receipt this Period: 25.00

B. Full Name (Last, First, Middle Initial): David Rothberg
Mailing Address: 3820 Tampa Rd, Ste 101
City: Palm Harbor State: FL Zip Code: 34684-3609
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: 12 / 28 / 2011
Transaction ID : 3CE6D9A1-CD0A-480A-
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial): Gary Rubin
Mailing Address: 7001 W Archer Ave
City: Chicago State: IL Zip Code: 60638-2201
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: 274.00
Date of Receipt: 12 / 13 / 2011
Transaction ID : 665E4EE3ED602AA3605
Amount of Each Receipt this Period: 199.00

SUBTOTAL of Receipts This Page (optional) ▶ 724.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial): Mark Ruchman
Mailing Address: 1 Reservoir Office Park, Ste 203
City: Southbury State: CT Zip Code: 06488-3926
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: 486.68
Date of Receipt: 12 / 28 / 2011
Transaction ID : 45289073EB30C5523344
Amount of Each Receipt this Period: 30.42

B. Full Name (Last, First, Middle Initial): Steven Samuelson
Mailing Address: 2827 N Clarkson St
City: Fremont State: NE Zip Code: 68025-7714
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 / 22 / 2011
Transaction ID : 4CB19B6608731E47748F
Amount of Each Receipt this Period: 25.00

C. Full Name (Last, First, Middle Initial): Linda Schumacher-Feero
Mailing Address: 8 Thomas Dr
City: Waterville State: ME Zip Code: 04901-4406
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: 290.23
Date of Receipt: 12 / 08 / 2011
Transaction ID : 48FFA8C0AF50C38F72EA
Amount of Each Receipt this Period: 30.41

SUBTOTAL of Receipts This Page (optional) ▶ 85.83

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial): Joel Schuman
Mailing Address: 203 Lothrop St, Eye and Ear Inst, Suite 816
City: Pittsburgh State: PA Zip Code: 15213-2548
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: 12 / 21 / 2011
Transaction ID : 6882FDC9-B9A1-41FE-
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial): Thomas Lee Schwartz
Mailing Address: 1219 S East Ave, Ste 105
City: Sarasota State: FL Zip Code: 34239-2351
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: 12 / 21 / 2011
Transaction ID : 360FAD24-23AD-4755-
Amount of Each Receipt this Period: 365.00

C. Full Name (Last, First, Middle Initial): Mark Sczepanski
Mailing Address: 611 Vineyard Dr
City: Grand Forks State: ND Zip Code: 58201-2904
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: 12 / 15 / 2011
Transaction ID : 73470B8967F8CED4377
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 1365.00

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

SCHEDULE A (FEC Form 3X)
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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 Shulman
Mailing Address: 999 E Basse Rd, Ste 127
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: 1000.08
Date of Receipt: 12/22/2011
Transaction ID : 47C298BADEC092E0E126
Amount of Each Receipt this Period: 83.34

B. Full Name (Last, First, Middle Initial): Scott So
Mailing Address: 2100 Webster St, Ste 214
City: San Francisco State: CA Zip Code: 94115-2375
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: 1200.00
Date of Receipt: 12/19/2011
Transaction ID : 4C9799F0D64E72EAC854
Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial): Gerald Spindel
Mailing Address: 6 Tsienneto Rd, Ste 101
City: Derry State: NH Zip Code: 03038-1584
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: 333.36
Date of Receipt: 12/16/2011
Transaction ID : 479E905382F76F8E8764
Amount of Each Receipt this Period: 41.67

SUBTOTAL of Receipts This Page (optional) ▶ 225.01

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

SCHEDULE A (FEC Form 3X)
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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 Ave
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: 650.00
Date of Receipt: 12 / 10 / 2011
Transaction ID : E5F1DADA-51AB-44E7-
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial): Regina Sun
Mailing Address: 1919 Vassar St Apt B
City: Houston State: TX Zip Code: 77098-5454
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: 916.74
Date of Receipt: 12 / 24 / 2011
Transaction ID : 44DD961FB7FA2E2A1B5F
Amount of Each Receipt this Period: 83.34

C. Full Name (Last, First, Middle Initial): Gary Tanner
Mailing Address: 10 Jacobs Ln
City: Newport News State: VA Zip Code: 23606-2815
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Ophthalmologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 600.00
Date of Receipt: 12 / 29 / 2011
Transaction ID : 468C8752F72D68364BDC
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ▶ 633.34

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial): Andrew Tharp
Mailing Address: 4233 Gateway Blvd
City: Newburgh State: IN Zip Code: 47630-8900
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 ▼: 730.00
Date of Receipt: 12 / 14 / 2011
Transaction ID : B3F9634217C88FC4341
Amount of Each Receipt this Period: 365.00

B. Full Name (Last, First, Middle Initial): Anthony Villanueva
Mailing Address: 901 Campus Dr Ste 203
City: Daly City State: CA Zip Code: 94015-4930
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: 12 / 21 / 2011
Transaction ID : DDDD562C-DA4D-4491-
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial): Anthony Villanueva
Mailing Address: 901 Campus Dr Ste 203
City: Daly City State: CA Zip Code: 94015-4930
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: 12 / 21 / 2011
Transaction ID : 6D9FFFA8-7CC6-49B6-
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 1365.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial)
William Thomas Walton

Mailing Address 13919 Bluff Wind

City: San Antonio
State: TX
Zip Code: 78216-7923

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 ▼ 500.04

Date of Receipt: 12 / 20 / 2011

Transaction ID : AD73240DBE904C635D4

Amount of Each Receipt this Period: 41.67

B. Full Name (Last, First, Middle Initial)
Thomas Peter Ward

Mailing Address 18 Old Stone Xing

City: West Hartford
State: CT
Zip Code: 06117-1859

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 ▼ 600.00

Date of Receipt: 12 / 14 / 2011

Transaction ID : 4719982F23BA07B1BD24

Amount of Each Receipt this Period: 50.00

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

Mailing Address 3600 N Interstate Ave

City: Portland
State: OR
Zip Code: 97227-1106

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 ▼ 333.36

Date of Receipt: 12 / 12 / 2011

Transaction ID : 48D6974B0C8A7C8F020B

Amount of Each Receipt this Period: 41.67

SUBTOTAL of Receipts This Page (optional) ▶ 133.34

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

A. Full Name (Last, First, Middle Initial): Juliann Williams
Mailing Address: 12100 SE Stevens Ct, Ste 106
City: Clackamas State: OR Zip Code: 97086-4707
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: 12 / 29 / 2011
Transaction ID : 68F0FFE4-49B4-4B4C-
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial): Carol Ziel
Mailing Address: 2025 Frontis Plaza Blvd, Ste 100
City: Winston Salem State: NC Zip Code: 27103-5663
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: 666.72
Date of Receipt: 12 / 10 / 2011
Transaction ID : 4A858466D2F61F56D468
Amount of Each Receipt this Period: 41.67

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

SUBTOTAL of Receipts This Page (optional) ▶ 291.67

TOTAL This Period (last page this line number only) ▶ 21749.97

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

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

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

A.
Full Name (Last, First, Middle Initial): Wells Fargo Bank N.A.
Mailing Address: PO Box 63020
City: San Francisco State: CA Zip Code: 94163
Purpose of Disbursement: Bank charges - Dec 2011
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 12 / 31 / 2011
Transaction ID : 41A225EEEEDA4545909
Amount of Each Disbursement this Period: 790.94

B.
Full Name (Last, First, Middle Initial): Wells Fargo Bank N.A.
Mailing Address: PO Box 63020
City: San Francisco State: CA Zip Code: 94163
Purpose of Disbursement: AMEX discount - Dec 2011
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 12 / 31 / 2011
Transaction ID : A37EC07B8BC821A313D
Amount of Each Disbursement this Period: 189.05

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

SUBTOTAL of Disbursements This Page (optional) ▶ 979.99

TOTAL This Period (last page this line number only) ▶ 979.99

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

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

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

A. Full Name (Last, First, Middle Initial): Ameripac: the Fund for a Greater America
Mailing Address: 700 13th Street, NW, Suite 600
City: Washington State: DC Zip Code: 20005
Purpose of Disbursement: 2012 Primary Contribution
Category/Type: 011
Candidate Name: Ameripac: the Fund for a Greater America
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2011 ☐ Primary ☐ General ☒ Other (specify) ▼ Contribution
Date of Disbursement: 12 / 07 / 2011
Transaction ID : 95359-8905298113823
Amount of Each Disbursement this Period: 2500.00

B. Full Name (Last, First, Middle Initial): Bill Flores for Congress
Mailing Address: PO Box 6207
City: Bryan State: TX Zip Code: 77805
Purpose of Disbursement: 2012 Primary Contribution
Category/Type: 011
Candidate Name: William H. Flores
Office Sought: ☒ House ☐ Senate ☐ President
State: TX District: 17
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify) ▼
Date of Disbursement: 12 / 07 / 2011
Transaction ID : 95359-9064599871635
Amount of Each Disbursement this Period: 2500.00

C. Full Name (Last, First, Middle Initial): Bill Johnson for Congress Committee
Mailing Address: PO Box 14496
City: Poland State: OH Zip Code: 44514
Purpose of Disbursement: 2012 Primary Contribution
Category/Type: 011
Candidate Name: Bill Johnson
Office Sought: ☒ House ☐ Senate ☐ President
State: OH District: 06
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify) ▼
Date of Disbursement: 12 / 07 / 2011
Transaction ID : 95359-3446313738822
Amount of Each Disbursement this Period: 1500.00

SUBTOTAL of Disbursements This Page (optional) ▶ 6500.00

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 [X] 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): Blaine for Congress 2012
Mailing Address: PO Box 125
City: Holts Summit State: MO Zip Code: 65043
Purpose of Disbursement: 2012 Primary Contribution
Category/Type: 011
Candidate Name: W. Blaine Luetkemeyer
Office Sought: [X] House [ ] Senate [ ] President
State: MO District: 03
Disbursement For: 2012 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 12 / 14 / 2011
Transaction ID : 31027-2573968768119
Amount of Each Disbursement this Period: 1500.00

B. Full Name (Last, First, Middle Initial): Bucshon for Congress
Mailing Address: PO Box 250
City: Newburgh State: IN Zip Code: 47629
Purpose of Disbursement: 2012 Primary Contribution
Category/Type: 011
Candidate Name: Larry D. Bucshon
Office Sought: [X] House [ ] Senate [ ] President
State: IN District: 08
Disbursement For: 2012 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 12 / 07 / 2011
Transaction ID : 95359-5547601580619
Amount of Each Disbursement this Period: 1500.00

C. Full Name (Last, First, Middle Initial): Butterfield for Congress
Mailing Address: PO Box 2571
City: Wilson State: NC Zip Code: 27894
Purpose of Disbursement: 2012 Primary Contribution
Category/Type: 011
Candidate Name: G. K. Butterfield
Office Sought: [X] House [ ] Senate [ ] President
State: NC District: 01
Disbursement For: 2012 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 12 / 14 / 2011
Transaction ID : 31027-1270105242729
Amount of Each Disbursement this Period: 2500.00

SUBTOTAL of Disbursements This Page (optional) ▶ 5500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

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

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

A. Full Name (Last, First, Middle Initial): Continuing a Majority Party Action Committee (CAMPAC)
Mailing Address: 5915 Eastman Avenue, Suite 100
City: Midland State: MI Zip Code: 48640
Purpose of Disbursement: 2012 Primary Contribution
Category/Type: 011
Candidate Name: Continuing a Majority Party Action Committee (CAMPAC)
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2011 ☐ Primary ☐ General ☒ Other (specify) ▼ Contribution
Date of Disbursement: 12 / 07 / 2011
Transaction ID : 95359-7088434100151
Amount of Each Disbursement this Period: 2500.00

B. Full Name (Last, First, Middle Initial): Courtney for Congress
Mailing Address: 38 Risley Road
City: Vernon State: CT Zip Code: 06066
Purpose of Disbursement: 2012 Primary Contribution
Category/Type: 011
Candidate Name: Joseph D. Courtney
Office Sought: ☒ House ☐ Senate ☐ President
State: CT District: 02
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify) ▼
Date of Disbursement: 12 / 07 / 2011
Transaction ID : 95359-5804712176322
Amount of Each Disbursement this Period: 1000.00

C. Full Name (Last, First, Middle Initial): Cummings for Congress Campaign Committee
Mailing Address: PO Box 1631
City: Baltimore State: MD Zip Code: 21203
Purpose of Disbursement: 2012 Primary Contribution
Category/Type: 011
Candidate Name: Elijah E. Cummings
Office Sought: ☒ House ☐ Senate ☐ President
State: MD District: 07
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify) ▼
Date of Disbursement: 12 / 20 / 2011
Transaction ID : 84809-4397851824760
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) ▶

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

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

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

A. Full Name (Last, First, Middle Initial): Friends of Dave Reichert
Mailing Address: PO Box 53322
City: Bellevue State: WA Zip Code: 98015
Purpose of Disbursement: 2012 Primary Contribution
Category/Type: 011
Candidate Name: David G. Reichert
Office Sought: ☒ House ☐ Senate ☐ President
State: WA District: 08
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 07 / 2011
Transaction ID : 95359-6768609881401
Amount of Each Disbursement this Period: 1000.00

B. Full Name (Last, First, Middle Initial): Friends of Nan Hayworth
Mailing Address: PO Box 188
City: Carmel State: NY Zip Code: 10512
Purpose of Disbursement: 2012 General Contribution
Category/Type: 011
Candidate Name: Nan Alison Sutter Hayworth
Office Sought: ☒ House ☐ Senate ☐ President
State: NY District: 19
Disbursement For: 2012 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 12 / 07 / 2011
Transaction ID : 95359-0448877215385
Amount of Each Disbursement this Period: 2000.00

C. Full Name (Last, First, Middle Initial): Friends of Rich Nugent
Mailing Address: PO Box 15668
City: Brooksville State: FL Zip Code: 34604
Purpose of Disbursement: 2012 Primary Contribution
Category/Type: 011
Candidate Name: Richard B Nugent
Office Sought: ☒ House ☐ Senate ☐ President
State: FL District: 05
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 07 / 2011
Transaction ID : 95359-0371972918510
Amount of Each Disbursement this Period: 1500.00

SUBTOTAL of Disbursements This Page (optional) ▶ 4500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

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

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

A. Full Name (Last, First, Middle Initial): Grassroots Organizing Acting & Leading Pac - Goalpac
Mailing Address: PO Box 30344
City: Bethesda State: MD Zip Code: 20824
Purpose of Disbursement: 2012 Primary Contribution
Category/Type: 011
Candidate Name: Grassroots Organizing Acting & Leading Pac - Goalpac
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2011 ☐ Primary ☐ General ☒ Other (specify) ▼ Contribution
Date of Disbursement: M M 12 / D D 07 / Y Y Y Y 2011
Transaction ID : 95359-9978906512260
Amount of Each Disbursement this Period: 2500.00

B. Full Name (Last, First, Middle Initial): Guthrie for Congress
Mailing Address: PO Box 9639
City: Bowling Green State: KY Zip Code: 42102
Purpose of Disbursement: 2012 Primary Contribution
Category/Type: 011
Candidate Name: S. Brett Guthrie
Office Sought: ☒ House ☐ Senate ☐ President
State: KY District: 02
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify) ▼
Date of Disbursement: M M 12 / D D 14 / Y Y Y Y 2011
Transaction ID : 31027-4463006854057
Amount of Each Disbursement this Period: 2500.00

C. Full Name (Last, First, Middle Initial): Hatch Election Committee Inc
Mailing Address: 175 South West Temple Suite 650
City: Salt Lake City State: UT Zip Code: 84101
Purpose of Disbursement: 2012 Primary Contribution
Category/Type: 011
Candidate Name: Orrin G. Hatch
Office Sought: ☐ House ☒ Senate ☐ President
State: UT District:
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify) ▼
Date of Disbursement: M M 12 / D D 07 / Y Y Y Y 2011
Transaction ID : 95359-6296808123588
Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 6000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

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

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

A. Full Name (Last, First, Middle Initial): John Lewis for Congress
Mailing Address: PO Box 2323 -
City: Atlanta State: GA Zip Code: 30301
Purpose of Disbursement: 2012 Primary Contribution
Category/Type: 011
Candidate Name: John R. Lewis
Office Sought: ☒ House ☐ Senate ☐ President
State: GA District: 05
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 07 / 2011
Transaction ID : 95359-2575952410697
Amount of Each Disbursement this Period: 4000.00

B. Full Name (Last, First, Middle Initial): Kansans for Huelskamp
Mailing Address: PO Box 410
City: Fowler State: KS Zip Code: 67844
Purpose of Disbursement: 2012 Primary Contribution
Category/Type: 011
Candidate Name: Tim A. Huelskamp
Office Sought: ☒ House ☐ Senate ☐ President
State: KS District: 01
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 14 / 2011
Transaction ID : 31452-7010156512260
Amount of Each Disbursement this Period: 1000.00

C. Full Name (Last, First, Middle Initial): McCaul for Congress, Inc
Mailing Address: 815-A Brazos Street Pmb 230
City: Austin State: TX Zip Code: 78701
Purpose of Disbursement: 2012 Primary Contribution
Category/Type: 011
Candidate Name: Michael Thomas McCaul Sr.
Office Sought: ☒ House ☐ Senate ☐ President
State: TX District: 10
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 20 / 2011
Transaction ID : 84809-0941430926322
Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 6000.00

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

A. Full Name (Last, First, Middle Initial): Paul Tonko for Congress
Mailing Address: 911 Central Avenue, PO Box 221
City: Albany State: NY Zip Code: 12206
Purpose of Disbursement: 2012 Primary Contribution
Category/Type: 011
Candidate Name: Paul D. Tonko
Office Sought: ☒ House ☐ Senate ☐ President
State: NY District: 21
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 14 / 2011
Transaction ID : 31027-3842889666557
Amount of Each Disbursement this Period: 1000.00

B. Full Name (Last, First, Middle Initial): Pete Sessions for Congress
Mailing Address: PO Box 823047
City: Dallas State: TX Zip Code: 75382
Purpose of Disbursement: 2012 Primary Contribution
Category/Type: 011
Candidate Name: Peter Anderson Sessions
Office Sought: ☒ House ☐ Senate ☐ President
State: TX District: 32
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 07 / 2011
Transaction ID : 95359-7195703387260
Amount of Each Disbursement this Period: 5000.00

C. Full Name (Last, First, Middle Initial): Renee Ellmers for Congress Committee
Mailing Address: PO Box 904
City: Dunn State: NC Zip Code: 28335
Purpose of Disbursement: 2012 Primary Contribution
Category/Type: 011
Candidate Name: Renee Jacisin Ellmers
Office Sought: ☒ House ☐ Senate ☐ President
State: NC District: 02
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 07 / 2011
Transaction ID : 95359-5691644549369
Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 7000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

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

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

A. Full Name (Last, First, Middle Initial): Rogers for Congress
Mailing Address: PO Box 581
City: Brighton State: MI Zip Code: 48116
Purpose of Disbursement: Void 5/16/11 contribution made.
Category/Type: 011
Candidate Name: Mike Rogers
Office Sought: ☒ House ☐ Senate ☐ President
State: MI District: 08
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 16 / 2011
Transaction ID : 52416-31660097837448
Amount of Each Disbursement this Period: -1000.00

B. Full Name (Last, First, Middle Initial): Shore Pac
Mailing Address: PO Box 3157
City: Long Branch State: NJ Zip Code: 07740
Purpose of Disbursement: 2012 Primary Contribution
Category/Type: 011
Candidate Name: Shore Pac
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2011 ☐ Primary ☐ General ☒ Other (specify) Contribution
Date of Disbursement: 12 / 07 / 2011
Transaction ID : 95359-1084710955619
Amount of Each Disbursement this Period: 2500.00

C. Full Name (Last, First, Middle Initial): Stivers for Congress
Mailing Address: 4679 Winterset Drive
City: Columbus State: OH Zip Code: 43220
Purpose of Disbursement: 2012 Primary Contribution
Category/Type: 011
Candidate Name: Steve Stivers
Office Sought: ☒ House ☐ Senate ☐ President
State: OH District: 15
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 07 / 2011
Transaction ID : 95359-5765039324760
Amount of Each Disbursement this Period: 5000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 6500.00

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

A. Full Name (Last, First, Middle Initial): Texans for Lamar Smith
Mailing Address: PO Box 6155
City: San Antonio State: TX Zip Code: 78209
Purpose of Disbursement: Void 3/1/11 contribution made.
Category/Type: 011
Candidate Name: Lamar Seeligson Smith
Office Sought: ☒ House ☐ Senate ☐ President
State: TX District: 21
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 16 / 2011
Transaction ID : 52416-11982363462448
Amount of Each Disbursement this Period: -2500.00

B. Full Name (Last, First, Middle Initial): Vern Buchanan for Congress
Mailing Address: PO Box 48928
City: Sarasota State: FL Zip Code: 34230
Purpose of Disbursement: 2012 Primary Contribution
Category/Type: 011
Candidate Name: Vernon Buchanan
Office Sought: ☒ House ☐ Senate ☐ President
State: FL District: 13
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 07 / 2011
Transaction ID : 95359-1366845965385
Amount of Each Disbursement this Period: 1500.00

C. Full Name (Last, First, Middle Initial): Vern Buchanan for Congress
Mailing Address: PO Box 48928
City: Sarasota State: FL Zip Code: 34230
Purpose of Disbursement: 2012 General Contribution
Category/Type: 011
Candidate Name: Vernon Buchanan
Office Sought: ☒ House ☐ Senate ☐ President
State: FL District: 13
Disbursement For: 2012 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 12 / 20 / 2011
Transaction ID : 84809-2068750262260
Amount of Each Disbursement this Period: 5000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 4000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

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

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

A. Full Name (Last, First, Middle Initial): Virginia Foxx for Congress
Mailing Address: PO Box 1100
City: Clemmons State: NC Zip Code: 27012
Purpose of Disbursement: 2012 Primary Contribution
Category/Type: 011
Candidate Name: Virginia Foxx
Office Sought: ☒ House ☐ Senate ☐ President
State: NC District: 05
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 07 / 2011
Transaction ID : 95359-4404413104057
Amount of Each Disbursement this Period: 1000.00

B. Full Name (Last, First, Middle Initial): Walden for Congress
Mailing Address: PO Box 1091
City: Hood River State: OR Zip Code: 97031
Purpose of Disbursement: 2012 Primary Contribution
Category/Type: 011
Candidate Name: Greg P. Walden
Office Sought: ☒ House ☐ Senate ☐ President
State: OR District: 02
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 07 / 2011
Transaction ID : 95359-8335229754448
Amount of Each Disbursement this Period: 1500.00

C. Full Name (Last, First, Middle Initial): Washington State Democratic Central Committee
Mailing Address: PO Box 4027
City: Seattle State: WA Zip Code: 98194
Purpose of Disbursement: 2012 Primary Contribution
Category/Type: 011
Candidate Name: Washington State Democratic Central Committee
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2011 ☐ Primary ☐ General ☒ Other (specify) Contribution
Date of Disbursement: 12 / 07 / 2011
Transaction ID : 95359-9177362322807
Amount of Each Disbursement this Period: 2500.00

SUBTOTAL of Disbursements This Page (optional) ▶ 5000.00

TOTAL This Period (last page this line number only) ▶ 55500.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

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

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

A.
Full Name (Last, First, Middle Initial): Thomas Millman
Mailing Address: 17900 23 Mile Rd, Ste 100
City: Macomb State: MI Zip Code: 48044-1161
Purpose of Disbursement: Refund of duplicate contribution received in Nov 2011
Category/Type: 010
Candidate Name:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 01 / 2011
Transaction ID : 3C046C6142DEB928205
Amount of Each Disbursement this Period: 300.00

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

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

SUBTOTAL of Disbursements This Page (optional) ▶ 300.00

TOTAL This Period (last page this line number only) ▶ 300.00