01/14/2004 12 : 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)
Mar 20 (M3)	Jun 20 (M6)	Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
X Apr 20 (M4)	Jul 20 (M7)	Oct 20 (M10)	Jan 31 (YE)

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

Election on — in the State of

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

Election on — in the State of

5. Covering Period 03 01 2003 through 03 31 2003

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, Treasurer

Signature of Treasurer: Electronically Filed by Carol Beatty, Treasurer — Date 01 06 2004

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

Office Use Only							

FEC FORM 3X
(Rev. 02/2003)

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: 03 01 2003 To: 03 31 2003

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2003		315692.39
(b) Cash on Hand at Begining of Reporting Period	313209.62	
(c) Total Receipts (from Line 19)	10274.43	53571.46
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	323484.05	369463.85
7. Total Disbursements (from Line 31)	26830.44	72810.24
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	296653.61	296653.61
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

Write or Type Committee Name

American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

Report Covering the Period: From: 03 01 2003 To: 03 31 2003

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)	9285.00	
(ii) Unitemized	907.50	
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	10192.50	53324.75
(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) ▶	10192.50	53324.75
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.)	61.93	246.71
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	10274.43	53571.46
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	10274.43	53571.46

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) 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	830.44	2110.24
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)) ▶	830.44	2110.24
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	26000.00	69000.00
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	1700.00
(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	1700.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	26830.44	72810.24
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)	26830.44	72810.24

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)	10192.50	53324.75
34. Total Contribution Refunds (from Line 28(d))	0.00	1700.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10192.50	51624.75
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	830.44	2110.24
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	830.44	2110.24

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 21
(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): Deloris Bell
Mailing Address: 7000 W 121st Street Suite 100
City: Overland Park | State: KS | Zip Code: 66209-2010
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 03 11 2003
Transaction ID: 0317200312C42366
Amount of Each Receipt this Period: 500.00
Receipt

B.
Full Name (Last, First, Middle Initial): Even Black
Mailing Address: Kresge Eye Institute, 4717 St Antoine
City: Detroit | State: MI | Zip Code: 48201-
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 03 03 2003
Transaction ID: 0317200312C42357
Amount of Each Receipt this Period: 250.00
Receipt

C.
Full Name (Last, First, Middle Initial): Michael Bloome
Mailing Address: Houston Eye Associates, 2855 Gramercy St
City: Houston | State: TX | Zip Code: 77025-
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 03 03 2003
Transaction ID: 0317200312C42346
Amount of Each Receipt this Period: 125.00
Receipt

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

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): Tom Campbell
Mailing Address: Haas School of Business/Univ CA Be, 545 Student Services Bldg #1900
City: Berkeley State: CA Zip Code: 94720-1900
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 03 18 2003
Transaction ID: 0331200358C42378
Amount of Each Receipt this Period: 500.00
Receipt

B.
Full Name (Last, First, Middle Initial): Michael Drinnan
Mailing Address: 101 S San Mateo Dr Ste 310
City: San Mateo State: CA Zip Code: 94401-3844
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 03 03 2003
Transaction ID: 0317200312C42356
Amount of Each Receipt this Period: 125.00
Receipt

C.
Full Name (Last, First, Middle Initial): Albert Edwards
Mailing Address: 3215 Princess Lane
City: Dallas State: TX Zip Code: 75229-5021
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 03 10 2003
Transaction ID: 0317200312C42363
Amount of Each Receipt this Period: 500.00
Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1125.00**

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): Francis Estelle
Mailing Address: Harbor Ophthalmology, 1720 Sumner Ave
City: Aberdeen State: WA Zip Code: 98520-
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 03 03 2003
Transaction ID: 0317200312C42348
Amount of Each Receipt this Period: 250.00
Receipt

B.
Full Name (Last, First, Middle Initial): Robert Graham
Mailing Address: 1021 West Armitage
City: Chicago State: IL Zip Code: 60614-
FEC 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: 03 03 2003
Transaction ID: 0317200312C42354
Amount of Each Receipt this Period: 125.00
Receipt

C.
Full Name (Last, First, Middle Initial): Robert Hardy
Mailing Address: Diablo Valley Eye Center, 112 La Casa Via Ste 260
City: Walnut Creek State: CA Zip Code: 94598-3068
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 03 21 2003
Transaction ID: D3312D0358C423B0
Amount of Each Receipt this Period: 500.00
Receipt

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

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 / 21

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

A.
Full Name (Last, First, Middle Initial): Bonnie An Henderson
Mailing Address: 10 Crest Dr W
City: Dover | State: MA | Zip Code: 02030-1837
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 03 11 2003
Transaction ID: 0317200312C42367
Amount of Each Receipt this Period: 500.00
Receipt

B.
Full Name (Last, First, Middle Initial): John Hines
Mailing Address: P.O. Box 1789
City: Roanoke | State: VA | Zip Code: 24009-
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 365.00
Date of Receipt: 03 25 2003
Transaction ID: 0331200358C42385
Amount of Each Receipt this Period: 365.00
Receipt

C.
Full Name (Last, First, Middle Initial): Allan Jensen
Mailing Address: Ste 426, 200 E 33rd St
City: Baltimore | State: MD | Zip Code: 21218-
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 03 03 2003
Transaction ID: 0317200312C42358
Amount of Each Receipt this Period: 500.00
Receipt

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

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 21
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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A.
Full Name (Last, First, Middle Initial): H Michael Lambert
Mailing Address: 8500 Fannin Ste 1100
City: Houston State: TX Zip Code: 77030-
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 03 03 2003
Transaction ID: 0317200312C42350
Amount of Each Receipt this Period: 250.00
Receipt

B.
Full Name (Last, First, Middle Initial): Jeffrey Todd Liegner
Mailing Address: Eye Care Northwest 350 Sparta Ave Bldg A
City: Sparta State: NJ Zip Code: 07871-
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 03 10 2003
Transaction ID: 0317200312C42364
Amount of Each Receipt this Period: 1000.00
Receipt

C.
Full Name (Last, First, Middle Initial): Malcolm Mezow
Mailing Address: 2855 Gramercy
City: Houston State: TX Zip Code: 77025-
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 625.00
Date of Receipt: 03 11 2003
Transaction ID: 0317200312C42365
Amount of Each Receipt this Period: 500.00
Receipt

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

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): Connie McCee
Mailing Address: Univ MS Med Ctr/McBryde Bldg, 2500 North State St/3rd Floor
City: Jackson State: MS Zip Code: 39216-
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 375.00
Date of Receipt: 03 03 2003
Transaction ID: 0317200312C42349
Amount of Each Receipt this Period: 125.00
Receipt

B.
Full Name (Last, First, Middle Initial): Paul Orloff
Mailing Address: 178 E 71st St
City: New York State: NY Zip Code: 10021-
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 03 14 2003
Transaction ID: 0317200312C42373
Amount of Each Receipt this Period: 500.00
Receipt

C.
Full Name (Last, First, Middle Initial): David Parke
Mailing Address: Dean A McGee Eye Inst, 608 Stanton L Young Blvd
City: Oklahoma City State: OK Zip Code: 73104-5014
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 03 17 2003
Transaction ID: D3312D0358C42376
Amount of Each Receipt this Period: 250.00
Receipt

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

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: PAGE 12 / 21
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[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A.
Full Name (Last, First, Middle Initial): Christianne Schoedel
Mailing Address: 360 Saint Charles Way
City: York State: PA Zip Code: 17402-
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 03 03 2003
Transaction ID: 0317200312C42352
Amount of Each Receipt this Period: 250.00
Receipt

B.
Full Name (Last, First, Middle Initial): Robert Shields
Mailing Address: Ste 115, 850 E Harvard Ave
City: Denver State: CO Zip Code: 80210-5074
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 365.00
Date of Receipt: 03 25 2003
Transaction ID: 0331200358C42383
Amount of Each Receipt this Period: 365.00
Receipt

C.
Full Name (Last, First, Middle Initial): John Stachechulis
Mailing Address: 303 East Town Street
City: Columbus State: OH Zip Code: 43215-
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 365.00
Date of Receipt: 03 14 2003
Transaction ID: 03172D0312C42374
Amount of Each Receipt this Period: 365.00
Receipt

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

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 21
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

A.
Full Name (Last, First, Middle Initial): Theodore Stransky
Mailing Address: 350 W Columbia St, Ste 250
City: Evansville | State: IN | Zip Code: 47710-
FEC 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: 03 03 2003
Transaction ID: 0317200312C42355
Amount of Each Receipt this Period: 75.00
Receipt

B.
Full Name (Last, First, Middle Initial): Stephen Sullivan
Mailing Address: 51 State Rd
City: North Dartmouth | State: MA | Zip Code: 02747-3319
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 365.00
Date of Receipt: 03 14 2003
Transaction ID: 0317200312C42371
Amount of Each Receipt this Period: 365.00
Receipt

C.
Full Name (Last, First, Middle Initial): Ruth Williams
Mailing Address: Wheaton Eye Clinic, 2D15 North Main Street
City: Wheaton | State: IL | Zip Code: 60187-
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 03 21 2003
Transaction ID: D3312D0358C423B1
Amount of Each Receipt this Period: 1000.00
Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1440.00**

TOTAL This Period (last page this line number only) ..... ▶ **9285.00**

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 21
(check only one)
☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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

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

Mailing Address PO Box 24512

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

FEC ID number of contributing federal political committee: C

Name of Employer

Occupation

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
246.71

Date of Receipt
03 31 2003

Transaction ID: 04142003S3C42525

Amount of Each Receipt this Period
81.93

Other Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶	81.93
TOTAL This Period (last page this line number only) ..... ▶	81.93

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): Union Bank
Mailing Address: 50 California St
City: San Francisco State: CA Zip Code: 94111-4801
Purpose of Disbursement: 2002 TAX DEPOSIT
Candidate Name
Category/Type
Office Sought: House / Senate / President / State: District
Disbursement For: Primary / General / Other (specify)
Transaction ID: D3172D0313E3390
Date of Disbursement: 03 / 14 / 2003
Amount of Each Disbursement this Period: 275.00
2002 TAX DEPOSIT

B.
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 3/03
Candidate Name
Category/Type
Office Sought: House / Senate / President / State: District
Disbursement For: Primary / General / Other (specify)
Transaction ID: D4142D0355E3416
Date of Disbursement: 03 / 31 / 2003
Amount of Each Disbursement this Period: 485.44
UB CKING ACCT EXP 3/03

SUBTOTAL of Disbursements This Page (optional) ▶	760.44
TOTAL This Period (last page this line number only) ▶	760.44

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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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 Breaux Committee
Mailing Address: PO Box 4042
City: Baton Rouge | State: LA | Zip Code: 70821-
Purpose of Disbursement: SENATE-LA
Candidate Name:
Category/Type:
Office Sought: House / Senate / President / State: District
Disbursement For: 2004 X Primary General / Other (specify)
Transaction ID: D3312D030E3392
Date of Disbursement: 03 / 24 / 2003
Amount of Each Disbursement this Period: 2000.00
SENATE-LA

B.
Full Name (Last, First, Middle Initial): Michael Burgess For Congress
Mailing Address: PO Box 2334
City: Denton | State: TX | Zip Code: 76202-
Purpose of Disbursement: HOUSE TX-26 PRIMARY
Candidate Name:
Category/Type:
Office Sought: House / Senate / President / State: District
Disbursement For: 2004 X Primary General / Other (specify)
Transaction ID: D3312D030E3393
Date of Disbursement: 03 / 24 / 2003
Amount of Each Disbursement this Period: 1500.00
HOUSE TX-26 PRIMARY

C.
Full Name (Last, First, Middle Initial): Congressional Majority Committee
Mailing Address: PO Box 746
City: Bakersfield | State: CA | Zip Code: 93302-
Purpose of Disbursement: LEADERSHIP PAC (BILL THOMAS)
Candidate Name:
Category/Type:
Office Sought: House / Senate / President / State: District
Disbursement For: 2004 X Primary General / Other (specify)
Transaction ID: D3312D030E3406
Date of Disbursement: 03 / 24 / 2003
Amount of Each Disbursement this Period: 5000.00
LEADERSHIP PAC (BILL THOMAS)

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

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

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ITEMIZED DISBURSEMENTS

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

A.
Full Name (Last, First, Middle Initial): Cooper For Congress Committee
Mailing Address: c/o Davidson & Golden, PO Box 927
City: Brentwood State: TN Zip Code: 37024-
Purpose of Disbursement: HOUSE TN-5 PRIMARY
Candidate Name:
Category/Type:
Office Sought: House / Senate / President / State: District
Disbursement For: 2004 X Primary General Other (specify)
Transaction ID: D3312D030E3394
Date of Disbursement: 03 / 24 / 2003
Amount of Each Disbursement this Period: 1000.00
HOUSE TN-5 PRIMARY

B.
Full Name (Last, First, Middle Initial): Earl Pomeroy For Congress
Mailing Address: PO Box 746
City: Bismarck State: ND Zip Code: 58502-0746
Purpose of Disbursement: HOUSE ND PRIMARY
Candidate Name:
Category/Type:
Office Sought: House / Senate / President / State: District
Disbursement For: 2004 X Primary General Other (specify)
Transaction ID: D3312D030E3402
Date of Disbursement: 03 / 24 / 2003
Amount of Each Disbursement this Period: 1000.00
HOUSE ND PRIMARY

C.
Full Name (Last, First, Middle Initial): Friends of Mike Ferguson
Mailing Address: 16 Mount Bethel Rd, Suite 353
City: Warren State: NJ Zip Code: 07059-
Purpose of Disbursement: HOUSE NJ-7 PRIMARY
Candidate Name:
Category/Type:
Office Sought: House / Senate / President / State: District
Disbursement For: 2004 X Primary General Other (specify)
Transaction ID: D3312D030E3397
Date of Disbursement: 03 / 24 / 2003
Amount of Each Disbursement this Period: 1000.00
HOUSE NJ-7 PRIMARY

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **3000.00**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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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 Weldon
Mailing Address: PO Box 968
City: Melbourne State: FL Zip Code: 32902-0968
Purpose of Disbursement: HOUSE FL-15 PRIMARY
Candidate Name:
Category/Type:
Office Sought: House / Senate / President / State: District
Disbursement For: 2004 X Primary General Other (specify)
Transaction ID: D3312D030E3407
Date of Disbursement: 03 / 24 / 2003
Amount of Each Disbursement this Period: 1000.00
HOUSE FL-15 PRIMARY

B.
Full Name (Last, First, Middle Initial): Friends of Houghton
Mailing Address: PO Box 1107
City: Corning State: NY Zip Code: 14830-0007
Purpose of Disbursement: HOUSE NY-29 PRIMARY
Candidate Name:
Category/Type:
Office Sought: House / Senate / President / State: District
Disbursement For: 2004 X Primary General Other (specify)
Transaction ID: D3312D030E3399
Date of Disbursement: 03 / 24 / 2003
Amount of Each Disbursement this Period: 1000.00
HOUSE NY-29 PRIMARY

C.
Full Name (Last, First, Middle Initial): Friends of Jennifer B Dunn
Mailing Address: PO Box 40110
City: Bellevue State: WA Zip Code: 98015-4110
Purpose of Disbursement: HOUSE WA-8 PRIMARY
Candidate Name:
Category/Type:
Office Sought: House / Senate / President / State: District
Disbursement For: 2004 X Primary General Other (specify)
Transaction ID: D3312D030E3395
Date of Disbursement: 03 / 24 / 2003
Amount of Each Disbursement this Period: 1000.00
HOUSE WA-8 PRIMARY

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **3000.00**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

A.
Full Name (Last, First, Middle Initial): Wally Herger For Congress Committee
Mailing Address: PO Box 1500
City: Chico | State: CA | Zip Code: 95927-
Purpose of Disbursement: HOUSE CA-2 PRIMARY
Candidate Name:
Category/Type: HOUSE CA-2 PRIMARY
Office Sought: House / Senate / President / State: District
Disbursement For: 2004 X Primary General Other (specify)
Transaction ID: D3312D030E339B
Date of Disbursement: 03 / 24 / 2003
Amount of Each Disbursement this Period: 1000.00

B.
Full Name (Last, First, Middle Initial): Pallone For Congress
Mailing Address: PO Box 3176
City: Long Branch | State: NJ | Zip Code: 07740-3176
Purpose of Disbursement: HOUSE NJ-6 PRIMARY
Candidate Name:
Category/Type: HOUSE NJ-6 PRIMARY
Office Sought: House / Senate / President / State: District
Disbursement For: 2004 X Primary General Other (specify)
Transaction ID: D3312D030E3401
Date of Disbursement: 03 / 24 / 2003
Amount of Each Disbursement this Period: 2000.00

C.
Full Name (Last, First, Middle Initial): People For English
Mailing Address: PO Box 1940
City: Erie | State: PA | Zip Code: 16507-0940
Purpose of Disbursement: HOUSE PA-3 PRIMARY
Candidate Name:
Category/Type: HOUSE PA-3 PRIMARY
Office Sought: House / Senate / President / State: District
Disbursement For: 2004 X Primary General Other (specify)
Transaction ID: D3312D030E3396
Date of Disbursement: 03 / 24 / 2003
Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **4000.00**

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

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ITEMIZED DISBURSEMENTS

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

A.
Full Name (Last, First, Middle Initial): Pete Stark Re-election Committee
Mailing Address: PO Box 8331
City: Fremont State: CA Zip Code: 94537-8331
Purpose of Disbursement: HOUSE CA-13 PRIMARY
Candidate Name:
Category/Type:
Office Sought: House / Senate / President / State: District
Disbursement For: 2004 X Primary General Other (specify)
Transaction ID: D3312D030E3404
Date of Disbursement: 03 / 24 / 2003
Amount of Each Disbursement this Period: 1000.00
HOUSE CA-13 PRIMARY

B.
Full Name (Last, First, Middle Initial): Johnson For Congress
Mailing Address: PO Box 1986
City: New Britain State: CT Zip Code: 06050-1986
Purpose of Disbursement: HOUSE CT-5 PRIMARY
Candidate Name:
Category/Type:
Office Sought: House / Senate / President / State: District
Disbursement For: 2004 X Primary General Other (specify)
Transaction ID: D3312D030E340D
Date of Disbursement: 03 / 24 / 2003
Amount of Each Disbursement this Period: 2000.00
HOUSE CT-5 PRIMARY

C.
Full Name (Last, First, Middle Initial): Ryan For Congress
Mailing Address: PO Box 1919
City: Janesville State: WI Zip Code: 53547-1919
Purpose of Disbursement: HOUSE WI-1 PRIMARY
Candidate Name:
Category/Type:
Office Sought: House / Senate / President / State: District
Disbursement For: 2004 X Primary General Other (specify)
Transaction ID: D3312D030E340S
Date of Disbursement: 03 / 24 / 2003
Amount of Each Disbursement this Period: 1000.00
HOUSE WI-1 PRIMARY

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **4000.00**

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

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

A.
Full Name (Last, First, Middle Initial): The Billy Tauzin Congressional Committ
Mailing Address: PO Box 2266
City: Houma State: LA Zip Code: 70361-
Purpose of Disbursement: LEADERSHIP PAC
Candidate Name:
Category/Type:
Office Sought: House / Senate / President / State: / District:
Disbursement For: 2004 X Primary / General / Other (specify)
Transaction ID: D3312D030E3405
Date of Disbursement: 03 / 24 / 2003
Amount of Each Disbursement this Period: 2500.00
LEADERSHIP PAC

B.
Full Name (Last, First, Middle Initial): Jerry Weller For Congress, Inc
Mailing Address: PO Box 15283
City: Washington State: DC Zip Code: 20003-0283
Purpose of Disbursement: HOUSE IL-17 PRIMARY
Candidate Name:
Category/Type:
Office Sought: House / Senate / President / State: / District:
Disbursement For: 2004 X Primary / General / Other (specify)
Transaction ID: D3312D030E340B
Date of Disbursement: 03 / 24 / 2003
Amount of Each Disbursement this Period: 1000.00
HOUSE IL-17 PRIMARY

SUBTOTAL of Disbursements This Page (optional) ..... ▶	3500.00
TOTAL This Period (last page this line number only) ..... ▶	26000.00