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)

CITY ▲: San Francisco — STATE ▲: CA — ZIPCODE ▲: 94109 –

2. **FEC IDENTIFICATION NUMBER** ▼: 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)
- X 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)
Apr 20 (M4)	Jul 20 (M7)	Oct 20 (M10)	Jan 31 (M13)

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

Election on ____ in the State of ____

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

Election on ____ in the State of ____

5. Covering Period 12 01 2001 through 12 31 2001

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer: Carol Beatty

Signature of Treasurer: Electronically Filed by Carol Beatty — Date: 04 29 2002

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

Office Use Only			

FEC FORM 3X
(Revised 1/2001)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

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

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

Report Covering the Period: From: 12 01 2001 To: 12 31 2001

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1 2001		294648.65
	(b) Cash on Hand at Begining of Reporting Period	148910.81	
	(c) Total Receipts (from Line 19)	80426.98	326993.92
	(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	229337.79	621642.57
7.	Total Disbursements (from Line 30)	3777.47	396082.25
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	225560.32	225560.32
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, N0/
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: 12 01 2001 To: 12 31 2001

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	66047.20	
(ii) Unitemized	14300.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	80347.20	326274.28
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 32, page 4) ▶	80347.20	326274.28
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 36, page 4)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts Dividends, Interest, etc.)	79.78	719.64
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18) ▶	80426.98	326993.92
20. Total Federal Receipts (subtract Line 18 from Line 19) ▶	80426.98	326993.92

DETAILED SUMMARY PAGE
of Disbursements

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

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	1777.47	73984.35
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)) ▶	1777.47	73984.35
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	2000.00	321822.90
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	275.00
(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	275.00
29. Other Disbursements	0.00	0.00
30. Total Disbursements (add Lines 21(c), 22, 23,24,25,26,27,28(d),and 29) ▶	3777.47	396082.25
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30) ▶	3777.47	396082.25
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) from Line 11(d), page 3)	80347.20	326274.28
33. Total Contribution Refunds (from Line 28(d))	0.00	275.00
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)	80347.20	325999.28
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	1777.47	73984.35
36. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
37. Net Operating Expenditures (subtract Line 36 from Line 35) ▶	1777.47	73984.35

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 / 78
(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)
John Aljian
Mailing Address
25 Johnson Ave
City | State | Zip Code
Englewood Cliffs | NJ | 07632-2127
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C387512

B.
Full Name (Last, First, Middle Initial)
Beki Allam
Mailing Address
17202 Red Oak Dr Ste 312
City | State | Zip Code
Houston | TX | 77090-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C387693

C.
Full Name (Last, First, Middle Initial)
Steven Bagan
Mailing Address
4344 20th Ave S
City | State | Zip Code
Fargo | ND | 58103-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 04 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C385437

SUBTOTAL of Receipts This Page (optional) ▶ **900.00**

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)
Robert Baker
Mailing Address
3206 Churchland Blvd
City | State | Zip Code
Chesapeake | VA | 23321-5206

FEC ID number of contributing federal political committee.

Name of Employer: self
Occupation: Ophthalmologist

Receipt For: Primary General / Other (specify)

Aggregate Year-to-Date: 300.00

Date of Receipt: 12 20 2001

Amount of Each Receipt this Period: 300.00

Receipt

Transaction ID: 0110200228C388429

B. Full Name (Last, First, Middle Initial)
Ray Balyeat
Mailing Address
1717 South Utica Avenue Ste 202
City | State | Zip Code
Tulsa | OK | 74104-

FEC ID number of contributing federal political committee.

Name of Employer: self
Occupation: Ophthalmologist

Receipt For: Primary General / Other (specify)

Aggregate Year-to-Date: 600.00

Date of Receipt: 12 05 2001

Amount of Each Receipt this Period: 300.00

Receipt

Transaction ID: 122020017C3874110

C. Full Name (Last, First, Middle Initial)
John Barnes
Mailing Address
PO Box 5620
City | State | Zip Code
San Angelo | TX | 76902-

FEC ID number of contributing federal political committee.

Name of Employer: self
Occupation: Ophthalmologist

Receipt For: Primary General / Other (specify)

Aggregate Year-to-Date: 300.00

Date of Receipt: 12 04 2001

Amount of Each Receipt this Period: 300.00

Receipt

Transaction ID: 122020017C3855511

SUBTOTAL of Receipts This Page (optional) ▶ **900.00**

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)
Steven Roy Bennett

Mailing Address
VitreoRetinal Surgery, PA-Minn Cen 7760 France Ave S Ste 310

City: Minneapolis | State: MN | Zip Code: 55435-

FEC ID number of contributing federal political committee.

Name of Employer: self
Occupation: Ophthalmologist

Receipt For: Primary / General / Other (specify)

Aggregate Year-to-Date: 300.00

Date of Receipt: 12 04 2001

Amount of Each Receipt this Period: 300.00

Receipt

Transaction ID: 12202001 7C3856914

B. Full Name (Last, First, Middle Initial)
Todd Berger

Mailing Address
5800 49th St N Ste S109

City: St Petersburg | State: FL | Zip Code: 33709-

FEC ID number of contributing federal political committee.

Name of Employer: self
Occupation: Ophthalmologist

Receipt For: Primary / General / Other (specify)

Aggregate Year-to-Date: 500.00

Date of Receipt: 12 05 2001

Amount of Each Receipt this Period: 500.00

Receipt

Transaction ID: 12202001 7C3874815

C. Full Name (Last, First, Middle Initial)
Amita Bhatt

Mailing Address
2000 Washington Street Suite 462

City: Newton | State: MA | Zip Code: 02462-

FEC ID number of contributing federal political committee.

Name of Employer: self
Occupation: Ophthalmologist

Receipt For: Primary / General / Other (specify)

Aggregate Year-to-Date: 400.00

Date of Receipt: 12 18 2001

Amount of Each Receipt this Period: 400.00

Receipt

Transaction ID: 12202001 7C3880916

SUBTOTAL of Receipts This Page (optional) ▶ **1200.00**

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)
John Bishop
Mailing Address
4707 Everhart #108
City | State | Zip Code
Corpus Christi | TX | 78411-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 600.00
Date of Receipt: 12 18 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C3881218

B. Full Name (Last, First, Middle Initial)
L Lothaire Bluth
Mailing Address
1818 East Southern Ave Ste 18
City | State | Zip Code
Mesa | AZ | 85204-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 04 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C3858420

C. Full Name (Last, First, Middle Initial)
John G Boatwright
Mailing Address
Roper Med Office Bldg 125 Doughty Street/Suite 120
City | State | Zip Code
Charleston | SC | 29403-5736
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 12 04 2001
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 122020017C3853821

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

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)
Steven Bodine

Mailing Address
Retina Consultations | 915 Palmer Road

City | State | Zip Code
Bronxville | NY | 10708-

FEC ID number of contributing federal political committee.

Name of Employer
self

Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
1700.00

Date of Receipt
12 05 2001

Amount of Each Receipt this Period
1000.00

Receipt

Transaction ID: 122020017C3868522

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

Mailing Address
801 N Tustin Ave Ste 303

City | State | Zip Code
Santa Ana | CA | 92705-

FEC ID number of contributing federal political committee.

Name of Employer
self

Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
12 05 2001

Amount of Each Receipt this Period
500.00

Receipt

Transaction ID: 122020017C3877123

C. Full Name (Last, First, Middle Initial)
George Buerger

Mailing Address
3471 Fifth Ave Ste 1115

City | State | Zip Code
Pittsburgh | PA | 15213-3221

FEC ID number of contributing federal political committee.

Name of Employer
self

Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
12 18 2001

Amount of Each Receipt this Period
300.00

Receipt

Transaction ID: 122020017C3881129

SUBTOTAL of Receipts This Page (optional) ▶ **1800.00**

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)
Charlotte Burns
Mailing Address
1850 Summit Ave
City | State | Zip Code
Madison | WI | 53705-4075
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 04 2001
Amount of Each Receipt this Period: 100.00
Receipt
Transaction ID: 122020017C3857030

B. Full Name (Last, First, Middle Initial)
Steven Byars
Mailing Address
1004 Carondelet Ste 405
City | State | Zip Code
Kansas City | MO | 64114-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 04 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C3853432

C. Full Name (Last, First, Middle Initial)
Thomas Byrd
Mailing Address
3677 Fort Street
City | State | Zip Code
Lincoln Park | MI | 48146-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C3871833

SUBTOTAL of Receipts This Page (optional) ▶ **700.00**

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 Cain

Mailing Address
PO Box 1754 1920 Pickens St

City | State | Zip Code
Columbia | SC | 29202-1754

FEC ID number of contributing federal political committee.

Name of Employer: self
Occupation: Ophthalmologist

Receipt For: Primary General
Other (specify)

Aggregate Year-to-Date: 300.00

Date of Receipt: 12 05 2001

Amount of Each Receipt this Period: 300.00

Receipt

Transaction ID: 122020017C3826935

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

Mailing Address
1001 N Waldrop Dr Ste 512

City | State | Zip Code
Arlington | TX | 76012-

FEC ID number of contributing federal political committee.

Name of Employer: self
Occupation: Ophthalmologist

Receipt For: Primary General
Other (specify)

Aggregate Year-to-Date: 500.00

Date of Receipt: 12 18 2001

Amount of Each Receipt this Period: 500.00

Receipt

Transaction ID: 122020017C3881836

C. Full Name (Last, First, Middle Initial)
Louis Cantor

Mailing Address
702 Rotary Circle

City | State | Zip Code
Indianapolis | IN | 46202-5175

FEC ID number of contributing federal political committee.

Name of Employer: self
Occupation: Ophthalmologist

Receipt For: Primary General
Other (specify)

Aggregate Year-to-Date: 300.00

Date of Receipt: 12 04 2001

Amount of Each Receipt this Period: 300.00

Receipt

Transaction ID: 122020017C3852737

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

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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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)
Douglas Carlson
Mailing Address
1719 Tower Dr W #100
City: Stillwater | State: MN | Zip Code: 55082-7512

FEC ID number of contributing federal political committee.

Name of Employer: self
Occupation: Ophthalmologist

Receipt For: Primary / General / Other (specify)

Aggregate Year-to-Date: 300.00

Date of Receipt: 12 04 2001

Amount of Each Receipt this Period: 300.00

Receipt

Transaction ID: 122020017C3866938

B. Full Name (Last, First, Middle Initial)
Stephen Cassis
Mailing Address
301 49th St SE
City: Charleston | State: WV | Zip Code: 25304-

FEC ID number of contributing federal political committee.

Name of Employer: self
Occupation: Ophthalmologist

Receipt For: Primary / General / Other (specify)

Aggregate Year-to-Date: 300.00

Date of Receipt: 12 05 2001

Amount of Each Receipt this Period: 300.00

Receipt

Transaction ID: 122020017C3828840

C. Full Name (Last, First, Middle Initial)
Peter Cetta
Mailing Address
10 W Hanover Ave
City: Randolph | State: NJ | Zip Code: 07869-

FEC ID number of contributing federal political committee.

Name of Employer: self
Occupation: Ophthalmologist

Receipt For: Primary / General / Other (specify)

Aggregate Year-to-Date: 300.00

Date of Receipt: 12 05 2001

Amount of Each Receipt this Period: 300.00

Receipt

Transaction ID: 122020017C3877441

SUBTOTAL of Receipts This Page (optional) ▶ **900.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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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)
Devron Char
Mailing Address
CPMC-Davies Campus | 45 Castro St Ste 309
City | State | Zip Code
San Francisco | CA | 94114-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 350.00
Date of Receipt: 12 04 2001
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 122020017C3855042

B. Full Name (Last, First, Middle Initial)
Percival H Chee
Mailing Address
KuKui Plaza Mall Ste C116 | 50 S Beretania St
City | State | Zip Code
Honolulu | HI | 96813-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C3870643

C. Full Name (Last, First, Middle Initial)
Gary Chubak
Mailing Address
214-18 24th Avenue
City | State | Zip Code
Bayside | NY | 11360-2219
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C3869444

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

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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[ ] 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)
Scott Claycomb
Mailing Address
408 S Main St
City | State | Zip Code
Warren | AR | 71671-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 122020017C3868345

B. Full Name (Last, First, Middle Initial)
John Cobb
Mailing Address
Suite 400 5871 Peachtree Dunwoody Road
City | State | Zip Code
Atlanta | GA | 30342-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 400.00
Receipt
Transaction ID: 02012000237C3903948

C. Full Name (Last, First, Middle Initial)
Richard Conroy
Mailing Address
1299 Jacaranda Blvd
City | State | Zip Code
Venice | FL | 34292-4516
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 450.00
Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 122020017C3831453

SUBTOTAL of Receipts This Page (optional) ▶ **1150.00**

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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[ ] 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)
Stephan Cooper
Mailing Address
1455 E Bert Kouns Indus Loop
City: Shreveport | State: LA | Zip Code: 71105-6000
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 12 04 2001
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 122020017C3856554

B.
Full Name (Last, First, Middle Initial)
Judy Craythorn
Mailing Address
4324 S Eastern Ave Ste A
City: Las Vegas | State: NV | Zip Code: 89119-6016
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 122020017C3828359

C.
Full Name (Last, First, Middle Initial)
James Croley
Mailing Address
613 Del Prado Blvd
City: Cape Coral | State: FL | Zip Code: 33990-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 365.00

Date of Receipt: 12 07 2001
Amount of Each Receipt this Period: 365.00
Receipt
Transaction ID: 122020017C3861560

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

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 16 / 78
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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)
Martha Dameske Sneary
Mailing Address
8055 Twin Oaks Drive
City | State | Zip Code
Broadview Heights | OH | 44147-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 12 04 2001
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 122020017C3860363

B. Full Name (Last, First, Middle Initial)
Harriet Dann
Mailing Address
Guild Med Ctr Ste 230 825 Washington St
City | State | Zip Code
Norwood | MA | 02062-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C3868884

C. Full Name (Last, First, Middle Initial)
Nazareth Derakjian
Mailing Address
2595 E Washington Blvd Ste 102
City | State | Zip Code
Pasadena | CA | 91107-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 12 18 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C3881765

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

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 17 / 78
(check only one)
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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)
Elliot Davidoff
Mailing Address
Center For Sight 1371 W Main St
City State Zip Code
Newark OH 43055-3676
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 600.00
Date of Receipt: 12 18 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C3881966

B. Full Name (Last, First, Middle Initial)
Andrew Davidson
Mailing Address
Village Sq 3515 Trent Rd
City State Zip Code
New Bern NC 28562-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C3831587

C. Full Name (Last, First, Middle Initial)
Glenn Kenneth Davis
Mailing Address
1510 Bob White Boulevard
City State Zip Code
Pulaski VA 24301-4406
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C3830269

SUBTOTAL of Receipts This Page (optional) ▶ **900.00**

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 18 / 78
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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)
Woody Davis
Mailing Address
Meridian Medical Plaza 5002 Hwy 39 N Bldg B
City State Zip Code
Meridian MS 39301-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C3871470

B. Full Name (Last, First, Middle Initial)
William Deutsch
Mailing Address
Suite 918 1725 West Harrison Street
City State Zip Code
Chicago IL 60612-3864
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 12 13 2001
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 122020017C3878771

C. Full Name (Last, First, Middle Initial)
Jeffrey Diskin
Mailing Address
4499 Town Ctr Pkwy
City State Zip Code
Flint MI 48532-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 410.25
Date of Receipt: 12 18 2001
Amount of Each Receipt this Period: 91.10
Receipt
Transaction ID: 122020017C3882972

SUBTOTAL of Receipts This Page (optional) ▶ **891.10**

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 19 / 78
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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial)
Gary Dolin
Mailing Address
6080-26th St W
City | State | Zip Code
Bradenton | FL | 34207-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 12 20 2001
Amount of Each Receipt this Period: 1000.00
Receipt
Transaction ID: 01102002280C3883973

B. Full Name (Last, First, Middle Initial)
John Dryfuss
Mailing Address
7109 Northwest 11th Place
City | State | Zip Code
Gainesville | FL | 32605-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C3828674

C. Full Name (Last, First, Middle Initial)
Daniel Drysdale
Mailing Address
Suite 1 9845 South Main Street
City | State | Zip Code
Blacksburg | VA | 24060-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 450.00
Date of Receipt: 12 04 2001
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 122020017C3857875

SUBTOTAL of Receipts This Page (optional) ▶ **1550.00**

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)
Omer Duker
Mailing Address
1020 West Buena Vista Road
City | State | Zip Code
Evansville | IN | 47710-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 04 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C3857376

B.
Full Name (Last, First, Middle Initial)
William Eads
Mailing Address
1230 Cumberland Falls Highway
City | State | Zip Code
Corbin | KY | 40701-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 12 04 2001
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 122020017C3866177

C.
Full Name (Last, First, Middle Initial)
Alexander Eaton
Mailing Address
Eye Centers of Florida 4101 Evans Avenue
City | State | Zip Code
Fort Myers | FL | 33901-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 12 18 2001
Amount of Each Receipt this Period: 1000.00
Receipt
Transaction ID: 122020017C3881478

SUBTOTAL of Receipts This Page (optional) ▶ **1800.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 21 / 78
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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial)
Jeffrey Edelstein
Mailing Address
1450 S Dobson Rd | Ste A-104
City | State | Zip Code
Mesa | AZ | 85202-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 365.00

Date of Receipt: 12 07 2001
Amount of Each Receipt this Period: 365.00
Receipt
Transaction ID: 122020017C3860880

B. Full Name (Last, First, Middle Initial)
Andrew Farber
Mailing Address
5015 South US Highway 41
City | State | Zip Code
Terre Haute | IN | 47802-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 12 07 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C3869183

C. Full Name (Last, First, Middle Initial)
Doreen Fazio
Mailing Address
Valley Eye Ctr | 14914 Sherman Way
City | State | Zip Code
Van Nuys | CA | 91405-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 12 07 2001
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 122020017C3861284

SUBTOTAL of Receipts This Page (optional) ▶ **915.00**

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)
Robert Fechtner
Mailing Address
UMDNJ Dept of Ophth 90 Bergen St 6th Fl
City State Zip Code
Newark NJ 07103-2499
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C3830685

B. Full Name (Last, First, Middle Initial)
Eliot Finkelstein
Mailing Address
1371 Beacon St #100
City State Zip Code
Brookline MA 02446-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 12 07 2001
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 122020017C3861486

C. Full Name (Last, First, Middle Initial)
John Fish
Mailing Address
207 East Seventh Street
City State Zip Code
Big Spring TX 79720-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 365.00
Date of Receipt: 12 07 2001
Amount of Each Receipt this Period: 365.00
Receipt
Transaction ID: 122020017C3861687

SUBTOTAL of Receipts This Page (optional) ▶ **915.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 23 / 78
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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial)
Allen Fishman
Mailing Address
92-29 Queens Blvd Ste 21
City | State | Zip Code
Rego Park | NY | 11374-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 12 18 2001
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 122020017C3881088

B. Full Name (Last, First, Middle Initial)
Brian Flowers
Mailing Address
1201 Summit Ave
City | State | Zip Code
Fort Worth | TX | 76102-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 865.00
Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 122020017C3877590

C. Full Name (Last, First, Middle Initial)
William Forrest
Mailing Address
Eye Clinic of Yakima | 311 S Tenth Ave
City | State | Zip Code
Yakima | WA | 98902-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 04 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C3867491

SUBTOTAL of Receipts This Page (optional) ▶ **1050.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 24 / 78
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[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)
Brett Taylor Foxman
Mailing Address
1500 Tilton Rd
City | State | Zip Code
Northfield | NJ | 08225-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General; Other (specify) ▼
Aggregate Year-to-Date ▼: 250.00
Date of Receipt: 12 04 2001
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 122020017C3866793

B. Full Name (Last, First, Middle Initial)
John Frangia
Mailing Address
Pioneer Valley Ophth Consult 22 University Dr
City | State | Zip Code
Amherst | MA | 01002-2243
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General; Other (specify) ▼
Aggregate Year-to-Date ▼: 500.00
Date of Receipt: 12 20 2001
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 011020022BC3883795

C. Full Name (Last, First, Middle Initial)
Jacqueline Gaboy
Mailing Address
1755 York Ave Apt 33J
City | State | Zip Code
New York | NY | 10128-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General; Other (specify) ▼
Aggregate Year-to-Date ▼: 400.00
Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 400.00
Receipt
Transaction ID: 122020017C3831098

SUBTOTAL of Receipts This Page (optional) ▶ **1150.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 25 / 78
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[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)
Rafael Gallardo
Mailing Address
PO Box 362158
City: San Juan | State: PR | Zip Code: 00936-2158

FEC ID number of contributing federal political committee.

Name of Employer: self
Occupation: Ophthalmologist

Receipt For: Primary / General / Other (specify)

Aggregate Year-to-Date: 375.00

Date of Receipt: 12 18 2001

Amount of Each Receipt this Period: 125.00

Receipt

Transaction ID: 122020017C3882399

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.

Name of Employer: self
Occupation: Ophthalmologist

Receipt For: Primary / General / Other (specify)

Aggregate Year-to-Date: 1000.00

Date of Receipt: 12 05 2001

Amount of Each Receipt this Period: 500.00

Receipt

Transaction ID: 122020017C38778103

C. Full Name (Last, First, Middle Initial)
Joseph Greco
Mailing Address
74 Alderbrook Dr
City: Topsfield | State: MA | Zip Code: 01983-2314

FEC ID number of contributing federal political committee.

Name of Employer: self
Occupation: Ophthalmologist

Receipt For: Primary / General / Other (specify)

Aggregate Year-to-Date: 600.00

Date of Receipt: 12 05 2001

Amount of Each Receipt this Period: 300.00

Receipt

Transaction ID: 122020017C383D8105

SUBTOTAL of Receipts This Page (optional) ▶ **925.00**

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 26 / 78
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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)
Paul Greenfield
Mailing Address
503 Broadway
City | State | Zip Code
Everett | MA | 02149-

FEC ID number of contributing federal political committee.

Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 12 04 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C38545106

B. Full Name (Last, First, Middle Initial)
Frank Griffith
Mailing Address
1410 E. Iron Ave Ste #2
City | State | Zip Code
Salina | KS | 67401-

FEC ID number of contributing federal political committee.

Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 12 04 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C38567109

C. Full Name (Last, First, Middle Initial)
Michael Gulkey
Mailing Address
Ste 100 3209 N Fourth St
City | State | Zip Code
Longview | TX | 75601-

FEC ID number of contributing federal political committee.

Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C38716111

SUBTOTAL of Receipts This Page (optional) ▶ **900.00**

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)
Peter Heffner

Mailing Address
295 Washington Ave

City | State | Zip Code
Hamden | CT | 06518-

FEC ID number of contributing federal political committee.

Name of Employer: self
Occupation: Ophthalmologist

Receipt For: Primary / General / Other (specify)

Aggregate Year-to-Date: 300.00

Date of Receipt: 12 05 2001

Amount of Each Receipt this Period: 300.00

Receipt

Transaction ID: 122020017C38681113

B. Full Name (Last, First, Middle Initial)
Varant Hagopian

Mailing Address
Ste 414 300 Mount Auburn St

City | State | Zip Code
Cambridge | MA | 02238-

FEC ID number of contributing federal political committee.

Name of Employer: self
Occupation: Ophthalmologist

Receipt For: Primary / General / Other (specify)

Aggregate Year-to-Date: 1000.00

Date of Receipt: 12 20 2001

Amount of Each Receipt this Period: 500.00

Receipt

Transaction ID: 01102002BC38B44114

C. Full Name (Last, First, Middle Initial)
Carol Haines

Mailing Address
Suite A 515 Thompson St

City | State | Zip Code
Eden | NC | 27288-

FEC ID number of contributing federal political committee.

Name of Employer: self
Occupation: Ophthalmologist

Receipt For: Primary / General / Other (specify)

Aggregate Year-to-Date: 765.00

Date of Receipt: 12 18 2001

Amount of Each Receipt this Period: 100.00

Receipt

Transaction ID: 122020017C388D8116

SUBTOTAL of Receipts This Page (optional) ▶ **900.00**

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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[ ] 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)
Donald Hall
Mailing Address
3303 Indiana Ave
City: Vicksburg | State: MS | Zip Code: 39180-4540

FEC ID number of contributing federal political committee.

Name of Employer: self
Occupation: Ophthalmologist

Receipt For: Primary / General / Other (specify)

Aggregate Year-to-Date: 300.00

Date of Receipt: 12 04 2001

Amount of Each Receipt this Period: 300.00

Receipt

Transaction ID: 122020017C38557117

B. Full Name (Last, First, Middle Initial)
Lawrence Helperin
Mailing Address
5801 N Dixie Hwy Ste 307
City: Fort Lauderdale | State: FL | Zip Code: 33334-

FEC ID number of contributing federal political committee.

Name of Employer: self
Occupation: Ophthalmologist

Receipt For: Primary / General / Other (specify)

Aggregate Year-to-Date: 365.00

Date of Receipt: 12 05 2001

Amount of Each Receipt this Period: 365.00

Receipt

Transaction ID: 122020017C38746118

C. Full Name (Last, First, Middle Initial)
John Patrick Hanlon
Mailing Address
Mary Potter Pavillion Ste 401 2850 W 95th St
City: Evergreen Park | State: IL | Zip Code: 60805-2735

FEC ID number of contributing federal political committee.

Name of Employer: self
Occupation: Ophthalmologist

Receipt For: Primary / General / Other (specify)

Aggregate Year-to-Date: 965.00

Date of Receipt: 12 05 2001

Amount of Each Receipt this Period: 300.00

Receipt

Transaction ID: 122020017C38739119

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

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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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)
Robert Harbin

Mailing Address
Harbin Clinic Eye Ctr | 1825 Martha Berry Blvd

City | State | Zip Code
Rome | GA | 30165-1698

FEC ID number of contributing federal political committee.

Name of Employer
self

Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
12 05 2001

Amount of Each Receipt this Period
300.00

Receipt

Transaction ID: 122020017C38313120

B. Full Name (Last, First, Middle Initial)
Jeffrey Herrington

Mailing Address
1508 Brook Avenue

City | State | Zip Code
Wichita Falls | TX | 76301-

FEC ID number of contributing federal political committee.

Name of Employer
self

Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
12 20 2001

Amount of Each Receipt this Period
300.00

Receipt

Transaction ID: 011020022BC38840123

C. Full Name (Last, First, Middle Initial)
Ghaleb Hatem

Mailing Address
4655 Telegraph Road

City | State | Zip Code
Dearborn Heights | MI | 48125-

FEC ID number of contributing federal political committee.

Name of Employer
self

Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
12 05 2001

Amount of Each Receipt this Period
300.00

Receipt

Transaction ID: 122020017C38311125

SUBTOTAL of Receipts This Page (optional) ▶ **900.00**

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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)
S Hutson Hay
Mailing Address
310 Clinton Avenue West
City | State | Zip Code
Huntsville | AL | 35801-

FEC ID number of contributing federal political committee.

Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 12 04 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C38572126

B. Full Name (Last, First, Middle Initial)
Sarah Jablecki Hays
Mailing Address
250 State Farm Pkwy
City | State | Zip Code
Birmingham | AL | 35209-

FEC ID number of contributing federal political committee.

Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 12 04 2001
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 122020017C38602128

C. Full Name (Last, First, Middle Initial)
Ronald Glenn Herrington
Mailing Address
#403 1190 N State St
City | State | Zip Code
Jackson | MS | 39202-

FEC ID number of contributing federal political committee.

Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 12 04 2001
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 122020017C38556130

SUBTOTAL of Receipts This Page (optional) ▶ **1300.00**

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

A. Full Name (Last, First, Middle Initial)
Gary Hirshfield
Mailing Address
42-31 Colden St Ste 102
City | State | Zip Code
Flushing | NY | 11355-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 800.00
Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 122020017C38733131

B. Full Name (Last, First, Middle Initial)
Jack Holladay
Mailing Address
5108 Braeburn
City | State | Zip Code
Bellaire | TX | 77401-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 04 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C38579133

C. Full Name (Last, First, Middle Initial)
Cleve Howard
Mailing Address
3200 SW 60th Court Ste 103
City | State | Zip Code
Miami | FL | 33155-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 600.00
Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C38723135

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

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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)
Jerry Hunsaker
Mailing Address
4707 Everhart Ste 106
City State Zip Code
Corpus Christi TX 78411-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 12 04 2001
Amount of Each Receipt this Period: 1000.00
Receipt
Transaction ID: 122020017C38676137

B.
Full Name (Last, First, Middle Initial)
Robert Hutchins
Mailing Address
3219 Clifton Ave #210
City State Zip Code
Cincinnati OH 45220-3029
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 12 04 2001
Amount of Each Receipt this Period: 200.00
Receipt
Transaction ID: 122020017C38688139

C.
Full Name (Last, First, Middle Initial)
Sunglun Hwang
Mailing Address
621 Yale Ct
City State Zip Code
Victor NY 14564-9593
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 12 07 2001
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 122020017C38693140

SUBTOTAL of Receipts This Page (optional) ▶ **1450.00**

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)
George Ingraham
Mailing Address
2434 Harrison Avenue
City | State | Zip Code
Eureka | CA | 95501-3219
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 12 04 2001
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 122020017C38651141

B. Full Name (Last, First, Middle Initial)
James Lawrence Jackson
Mailing Address
4011 Orchard Dr
City | State | Zip Code
Midland | MI | 48640-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 365.00

Date of Receipt: 12 07 2001
Amount of Each Receipt this Period: 365.00
Receipt
Transaction ID: 122020017C38618142

C. Full Name (Last, First, Middle Initial)
Jonathan Jewitt
Mailing Address
4733 Bethesda Ave Suite 720
City | State | Zip Code
Bethesda | MD | 20814-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 12 07 2001
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 122020017C38619143

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

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

A. Full Name (Last, First, Middle Initial)
John Jones

Mailing Address
1628 Medical Arts Blvd

City | State | Zip Code
Anderson | IN | 46011-

FEC ID number of contributing federal political committee.

Name of Employer
self

Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
12 13 2001

Amount of Each Receipt this Period
300.00

Receipt

Transaction ID: 122020017C38796144

B. Full Name (Last, First, Middle Initial)
Lawrence Kahn

Mailing Address
5851 E Sapphire Ln

City | State | Zip Code
Paradise Valley | AZ | 85253-

FEC ID number of contributing federal political committee.

Name of Employer
self

Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
12 05 2001

Amount of Each Receipt this Period
200.00

Receipt

Transaction ID: 122020017C38763146

C. Full Name (Last, First, Middle Initial)
Neil Katz

Mailing Address
984 N Broadway Ste L-02

City | State | Zip Code
Yonkers | NY | 10701-

FEC ID number of contributing federal political committee.

Name of Employer
self

Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
12 05 2001

Amount of Each Receipt this Period
300.00

Receipt

Transaction ID: 122020017C38754148

SUBTOTAL of Receipts This Page (optional) ▶ **800.00**

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

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

A.
Full Name (Last, First, Middle Initial)
Steven Katz
Mailing Address
1931 Williamsbridge Rd
City | State | Zip Code
Bronx | NY | 10461-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C38720149

B.
Full Name (Last, First, Middle Initial)
Stephen Kelly
Mailing Address
PO Box 1727
City | State | Zip Code
Brownwood | TX | 76804-1727
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 12 04 2001
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 122020017C38659150

C.
Full Name (Last, First, Middle Initial)
John Kennedy
Mailing Address
1675 Providence Ave
City | State | Zip Code
Schenectady | NY | 12309-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 12 04 2001
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 122020017C38653151

SUBTOTAL of Receipts This Page (optional) ▶ **1300.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[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)
Dennis Khoury
Mailing Address
8118 Bustleton Ave
City | State | Zip Code
Philadelphia | PA | 19152-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 800.00
Date of Receipt: 12 04 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C38549152

B. Full Name (Last, First, Middle Initial)
Steven Kirkham
Mailing Address
1462 Marion-Waldo Rd
City | State | Zip Code
Marion | OH | 43302-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 12 18 2001
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 122020017C38821153

C. Full Name (Last, First, Middle Initial)
Kiranjit Kooner
Mailing Address
5323 Harry Hines Blvd
City | State | Zip Code
Dallas | TX | 75390-9057
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 600.00
Date of Receipt: 12 04 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C38559155

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

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[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)
Geoffrey Kwitko
Mailing Address
508 S Habana | Ste 315
City | State | Zip Code
Tampa | FL | 33609-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 12 04 2001
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 122020017C38663156

B. Full Name (Last, First, Middle Initial)
G William Lavery
Mailing Address
Eye Consultants of Huntington | 1811 13th Ave
City | State | Zip Code
Huntington | WV | 25701-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 12 04 2001
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 122020017C38662158

C. Full Name (Last, First, Middle Initial)
Russell Leavitt
Mailing Address
1226 NE Seventh Street
City | State | Zip Code
Grants Pass | OR | 97526-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 400.00

Date of Receipt: 12 18 2001
Amount of Each Receipt this Period: 200.00
Receipt
Transaction ID: 122020017C38620159

SUBTOTAL of Receipts This Page (optional) ▶ **1200.00**

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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[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)
Grace Lessing
Mailing Address
74 Boylan Lane
City | State | Zip Code
Blue Point | NY | 11715-2304
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 150.00
Receipt
Transaction ID: 122020017C38303161

B. Full Name (Last, First, Middle Initial)
David Levine
Mailing Address
Ste H2 | 19271 Montgomery Village Ave
City | State | Zip Code
Montgomery Village | MD | 20886-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C38697162

C. Full Name (Last, First, Middle Initial)
Eric Lindstrom
Mailing Address
PO Box 407 | 1020 Adams St
City | State | Zip Code
Laurel | MS | 39441-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 12 18 2001
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 122020017C38822165

SUBTOTAL of Receipts This Page (optional) ▶ **950.00**

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

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

A. Full Name (Last, First, Middle Initial)
Richard Lindstrom
Mailing Address
710 E 24th St Ste 1D6
City | State | Zip Code
Minneapolis | MN | 55404-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 04 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C38658166

B. Full Name (Last, First, Middle Initial)
Edward Lores
Mailing Address
Suite D 4950 SW Lejeune Road
City | State | Zip Code
Coral Gables | FL | 33146-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 122020017C38729168

C. Full Name (Last, First, Middle Initial)
Richard Low
Mailing Address
5A Fulling Mill Lane
City | State | Zip Code
Hingham | MA | 02043-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 12 04 2001
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 122020017C38597169

SUBTOTAL of Receipts This Page (optional) ▶ **1050.00**

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

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

A. Full Name (Last, First, Middle Initial)
Robert Lowery

Mailing Address
Lowery Eye Clinic | 105 Central Ave

City | State | Zip Code
Searcy | AR | 72143-

FEC ID number of contributing federal political committee.

Name of Employer
self

Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
12 13 2001

Amount of Each Receipt this Period
300.00

Receipt

Transaction ID: 122020017C38791170

B. Full Name (Last, First, Middle Initial)
Robert Lytle

Mailing Address
Ste 5 | 51 Main St

City | State | Zip Code
Hyannis | MA | 02601-

FEC ID number of contributing federal political committee.

Name of Employer
self

Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
12 18 2001

Amount of Each Receipt this Period
125.00

Receipt

Transaction ID: 122020017C38827171

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

Mailing Address
Richmond Eye Assoc PC | 201 N Hamilton St

City | State | Zip Code
Richmond | VA | 23221-

FEC ID number of contributing federal political committee.

Name of Employer
self

Occupation
Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
12 05 2001

Amount of Each Receipt this Period
100.00

Receipt

Transaction ID: 122020017C38728172

SUBTOTAL of Receipts This Page (optional) ▶ **525.00**

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 41 / 78
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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)
David Mallory
Mailing Address
1240 SW 44th
City | State | Zip Code
Oklahoma City | OK | 73109-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 12 04 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C38675175

B. Full Name (Last, First, Middle Initial)
Thomas Manzo
Mailing Address
1329 E High St
City | State | Zip Code
Pottstown | PA | 19464-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C38283176

C. Full Name (Last, First, Middle Initial)
Karl Marchanese
Mailing Address
The Eye Care Center 325 West St
City | State | Zip Code
Canandaigua | NY | 14424-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 122020017C38777177

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

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 42 / 78
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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

A. Full Name (Last, First, Middle Initial)
Mark Christophe Maria
Mailing Address
150 Quail Lane
City: Lebanon | State: PA | Zip Code: 17042-9403
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 750.00
Date of Receipt: 12 18 2001
Amount of Each Receipt this Period: 125.00
Receipt
Transaction ID: 122020017C38825178

B. Full Name (Last, First, Middle Initial)
Theodore Marshburn
Mailing Address
15925 E Whittier Blvd
City: Whittier | State: CA | Zip Code: 90603-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 600.00
Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C38773180

C. Full Name (Last, First, Middle Initial)
Stephen Martin
Mailing Address
P.O. Box 785
City: Presque Isle | State: ME | Zip Code: 04769-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 122020017C38300181

SUBTOTAL of Receipts This Page (optional) ▶ **925.00**

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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[ ] 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)
Jack Mason
Mailing Address
555 South Dora Street
City | State | Zip Code
Ukiah | CA | 95482-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 122020017C38700182

B. Full Name (Last, First, Middle Initial)
Janina Matsko
Mailing Address
250 Philip Place
City | State | Zip Code
Philadelphia | PA | 19106-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 122020017C38679184

C. Full Name (Last, First, Middle Initial)
Richard Mauer
Mailing Address
Mauer Eye Ctr PC 3410 Kimball Ave
City | State | Zip Code
Waterloo | IA | 50702-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 04 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C38665187

SUBTOTAL of Receipts This Page (optional) ▶ **1300.00**

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)
Mark Lawrence Mazow
Mailing Address
7150 Greenville Ave Ste 305
City | State | Zip Code
Dallas | TX | 75231-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 12 07 2001
Amount of Each Receipt this Period: 1000.00
Receipt
Transaction ID: 122020017C38606188

B. Full Name (Last, First, Middle Initial)
Peter McCanna
Mailing Address
1025 Regent Street
City | State | Zip Code
Madison | WI | 53715-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C38780189

C. Full Name (Last, First, Middle Initial)
Michael McEwen
Mailing Address
Ste 304 100 Medical Center Dr
City | State | Zip Code
Gadsden | AL | 35903-1130
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C38736190

SUBTOTAL of Receipts This Page (optional) ▶ **1600.00**

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

SCHEDULE A (FEC Form 3X)
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FOR LINE NUMBER: PAGE 45 / 78
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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A. Full Name (Last, First, Middle Initial)
Calvin Mein
Mailing Address
4499 Medical Dr Ste 166
City | State | Zip Code
San Antonio | TX | 78229-

FEC ID number of contributing federal political committee.

Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C38282191

B. Full Name (Last, First, Middle Initial)
Henry Meisels
Mailing Address
1945 W Wilson Ave Ste 511B
City | State | Zip Code
Chicago | IL | 60640-5258

FEC ID number of contributing federal political committee.

Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C38728192

C. Full Name (Last, First, Middle Initial)
Michael Miller
Mailing Address
2480 S Downing St #100
City | State | Zip Code
Denver | CO | 80210-

FEC ID number of contributing federal political committee.

Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 273.30

Date of Receipt: 12 18 2001
Amount of Each Receipt this Period: 91.10
Receipt
Transaction ID: 122020017C38828193

SUBTOTAL of Receipts This Page (optional) ▶ **691.10**

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)
Carl Minning
Mailing Address
2935 Maple Ave
City | State | Zip Code
Zanesville | OH | 43701-1872
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 700.00
Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 122020017C38285194

B. Full Name (Last, First, Middle Initial)
Craig Morgan
Mailing Address
Eye Consultants of Huntington 1811 13th Ave
City | State | Zip Code
Huntington | WV | 25701-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 122020017C38289196

C. Full Name (Last, First, Middle Initial)
James Murphy
Mailing Address
5202 Faraon St
City | State | Zip Code
Saint Joseph | MO | 64506-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 600.00
Date of Receipt: 12 20 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 011020022BC38847198

SUBTOTAL of Receipts This Page (optional) ▶ **1300.00**

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)
Clifford Myers
Mailing Address
Ste 1B 5401 N Knoxville Ave
City State Zip Code
Peoria IL 61614-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 04 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C38528199

B. Full Name (Last, First, Middle Initial)
Louis Nishimin
Mailing Address
103 Jefferson St
City State Zip Code
Brookville PA 15825-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 122020017C38750200

C. Full Name (Last, First, Middle Initial)
Barbara Ann Nugent
Mailing Address
3125 Matlock Rd Ste 105
City State Zip Code
Arlington TX 76015-2305
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 600.00
Date of Receipt: 12 04 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C38551201

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

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 / 78
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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

A. Full Name (Last, First, Middle Initial)
Patrick Parden
Mailing Address
1B14 Lincoln Way
City | State | Zip Code
Coeur dAlene | ID | 83814-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C38758205

B. Full Name (Last, First, Middle Initial)
Richard Pera
Mailing Address
North Fulton Professional Bldg | 2500 Hospital Boulevard, Ste 115
City | State | Zip Code
Roswell | GA | 30076-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 122020017C38689206

C. Full Name (Last, First, Middle Initial)
Joseph Parisi
Mailing Address
931Tiger Blvd | PO Box 1668
City | State | Zip Code
Clemson | SC | 29631-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C387D2207

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

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 49 / 78
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[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)
Jack Pearson
Mailing Address
615 S Mill St
City | State | Zip Code
Fergus Falls | MN | 56537-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 04 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C38600209

B. Full Name (Last, First, Middle Initial)
William Penland
Mailing Address
The Eye Group of Southern Indiana 1020 West Buena Vista Rd
City | State | Zip Code
Evansville | IN | 47710-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 12 04 2001
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 122020017C38562210

C. Full Name (Last, First, Middle Initial)
Thomas Prater
Mailing Address
Mattax-Neu-Prater Eye Center Inc 1265 E Primrose
City | State | Zip Code
Springfield | MO | 65804-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 12 13 2001
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 122020017C38796215

SUBTOTAL of Receipts This Page (optional) ▶ **1050.00**

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 50 / 78
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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

A. Full Name (Last, First, Middle Initial)
David Pugh
Mailing Address
18599 Lakeshore Boulevard
City | State | Zip Code
Cleveland | OH | 44119-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 12 13 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C38784216

B. Full Name (Last, First, Middle Initial)
Vadrevu Raju
Mailing Address
3140 Collins Ferry Rd
City | State | Zip Code
Morgantown | WV | 26505-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 12 04 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C38670218

C. Full Name (Last, First, Middle Initial)
Robert Rea
Mailing Address
1615 Winsted Dr
City | State | Zip Code
Goshen | IN | 46526-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 12 04 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C38671219

SUBTOTAL of Receipts This Page (optional) ▶ **900.00**

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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[ ] 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)
Syamala H Reddy
Mailing Address
200 Medical Ctr Dr Ste 3
City | State | Zip Code
Hazard | KY | 41701-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C38779220

B.
Full Name (Last, First, Middle Initial)
Michael Redmond
Mailing Address
8333 North Davis Highway
City | State | Zip Code
Pensacola | FL | 32514-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 750.00
Date of Receipt: 12 07 2001
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 122020017C38621221

C.
Full Name (Last, First, Middle Initial)
Raldon Hugh Retter
Mailing Address
3271 N Civic Ctr Plz Ste 8
City | State | Zip Code
Scottsdale | AZ | 85251-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 07 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C38611222

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

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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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 Richardson
Mailing Address
416 W Las Tunas Dr Ste 102
City | State | Zip Code
San Gabriel | CA | 91776-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 12 04 2001
Amount of Each Receipt this Period: 1000.00
Receipt
Transaction ID: 122020017C38655224

B. Full Name (Last, First, Middle Initial)
HMiller Richert
Mailing Address
1750 Pine St
City | State | Zip Code
Abilene | TX | 79601-3044
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 12 20 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 011020022BC38835225

C. Full Name (Last, First, Middle Initial)
Allen Richmond
Mailing Address
3998 Red Lion Rd | Ste 302
City | State | Zip Code
Philadelphia | PA | 19114-1441
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 12 20 2001
Amount of Each Receipt this Period: 150.00
Receipt
Transaction ID: 011020022BC38849226

SUBTOTAL of Receipts This Page (optional) ▶ **1450.00**

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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(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)
J Frederick Riedel
Mailing Address
112 L Casa Via | Ste 260
City | State | Zip Code
Walnut Creek | CA | 94598-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C38768227

B. Full Name (Last, First, Middle Initial)
Frank Romano
Mailing Address
102 Fairview Dr Ste H | Southampton Medical Bldg
City | State | Zip Code
Franklin | VA | 23851-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 12 04 2001
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 122020017C38548232

C. Full Name (Last, First, Middle Initial)
Harvey Rosenblum
Mailing Address
220 Madison Ave
City | State | Zip Code
New York | NY | 10016-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C38687233

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

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 54 / 78
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[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)
Gerald Roust
Mailing Address
1630 Adams St
City | State | Zip Code
Mankato | MN | 56001-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C38684235

B. Full Name (Last, First, Middle Initial)
Richard Ruiz
Mailing Address
Hermann Eye Ctr 6411 Fannin St/7th Fl
City | State | Zip Code
Houston | TX | 77030-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 12 04 2001
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 122020017C38580236

C. Full Name (Last, First, Middle Initial)
Edwin Hurlbut Ryan
Mailing Address
7760 France Ave S Ste 310
City | State | Zip Code
Minneapolis | MN | 55435-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C38765237

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

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 55 / 78
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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)
Paul Ryan
Mailing Address
1420 Tara Hills Drive Apt D
City | State | Zip Code
Pinole | CA | 94564-2517

FEC ID number of contributing federal political committee.

Name of Employer: self
Occupation: Ophthalmologist

Receipt For: Primary / General / Other (specify)

Aggregate Year-to-Date: 300.00

Date of Receipt: 12 04 2001

Amount of Each Receipt this Period: 300.00

Receipt

Transaction ID: 122020017C38672238

B. Full Name (Last, First, Middle Initial)
Daniel Schaefer
Mailing Address
4590 Main St
City | State | Zip Code
Buffalo | NY | 14226-

FEC ID number of contributing federal political committee.

Name of Employer: self
Occupation: Ophthalmologist

Receipt For: Primary / General / Other (specify)

Aggregate Year-to-Date: 300.00

Date of Receipt: 12 04 2001

Amount of Each Receipt this Period: 300.00

Receipt

Transaction ID: 122020017C38660240

C. Full Name (Last, First, Middle Initial)
Todd Andrew Scott
Mailing Address
1240 Colonial Commons
City | State | Zip Code
Lancaster | SC | 29720-

FEC ID number of contributing federal political committee.

Name of Employer: self
Occupation: Ophthalmologist

Receipt For: Primary / General / Other (specify)

Aggregate Year-to-Date: 300.00

Date of Receipt: 12 04 2001

Amount of Each Receipt this Period: 300.00

Receipt

Transaction ID: 122020017C38575247

SUBTOTAL of Receipts This Page (optional) ▶ **900.00**

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)
Ronald Self
Mailing Address
Golden Ring Executive Pk 19 Fontana Ln Ste 108
City State Zip Code
Baltimore MD 21237-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C38781248

B. Full Name (Last, First, Middle Initial)
Susan Senft
Mailing Address
75-1026 Henry St Ste 200
City State Zip Code
Kailua-Kona HI 96740-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C38776249

C. Full Name (Last, First, Middle Initial)
Joseph Shalew
Mailing Address
108 E Lake Mead Dr Ste 303
City State Zip Code
Henderson NV 89015-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 600.00

Date of Receipt: 12 20 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 011020022BC38B4625D

SUBTOTAL of Receipts This Page (optional) ▶ **900.00**

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SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 57 / 78
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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

A.
Full Name (Last, First, Middle Initial)
James Sharp
Mailing Address
103 West Colt Square Drive
City | State | Zip Code
Fayatteville | AR | 72703-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C38291251

B.
Full Name (Last, First, Middle Initial)
Jeffrey Shaver
Mailing Address
Dean A McGee Eye Inst 301 S Blvd Ste 119
City | State | Zip Code
Edmond | OK | 73034-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C38695252

C.
Full Name (Last, First, Middle Initial)
John Sheppard
Mailing Address
Medical Tower Ste 403
City | State | Zip Code
Norfolk | VA | 23507-1901
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C38719255

SUBTOTAL of Receipts This Page (optional) ▶ **900.00**

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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)
Bradford Shingleton
Mailing Address
Oph Cnslts of Boston
50 Staniford St Ste 600
City: Boston | State: MA | Zip Code: 02114-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 12202001 7C38717257

B.
Full Name (Last, First, Middle Initial)
Douglas Shore
Mailing Address
669 Boston Post Road
City: Guilford | State: CT | Zip Code: 06437-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 225.00
Date of Receipt: 12 04 2001
Amount of Each Receipt this Period: 225.00
Receipt
Transaction ID: 12202001 7C38554258

C.
Full Name (Last, First, Middle Initial)
David Shulman
Mailing Address
999 East Basse Suite #127
City: San Antonio | State: TX | Zip Code: 78209-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1125.00
Date of Receipt: 12 18 2001
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 12202001 7C38828259

SUBTOTAL of Receipts This Page (optional) ▶ **775.00**

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

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ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial)
David Shultz
Mailing Address
18350 Roscoe Blvd Ste 300
City | State | Zip Code
Northridge | CA | 91325-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 122020017C38744260

B. Full Name (Last, First, Middle Initial)
Gary Sole
Mailing Address
PO Box 430
City | State | Zip Code
Lapeer | MI | 48446-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 12 20 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 011020022BC38850264

C. Full Name (Last, First, Middle Initial)
Samuel Solish
Mailing Address
Eyecare Med Group | 53 Sewall St
City | State | Zip Code
Portland | ME | 04102-2825
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 365.00

Date of Receipt: 12 07 2001
Amount of Each Receipt this Period: 365.00
Receipt
Transaction ID: 122020017C38620265

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

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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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)
Sydney Stapleton
Mailing Address
1726 Metromedical Dr
City | State | Zip Code
Fayatteville | NC | 28304-3861
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 550.00
Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 122020017C38260266

B.
Full Name (Last, First, Middle Initial)
Domenic Strazzulla
Mailing Address
500 Congress St Ste 1-A1
City | State | Zip Code
Quincy | MA | 02169-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C38686272

C.
Full Name (Last, First, Middle Initial)
Scott Strekw
Mailing Address
5770 Club Lane
City | State | Zip Code
Roanoke | VA | 24018-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C387D1273

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

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 61 / 78
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[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)
Gerald Stiph
Mailing Address
2885 N Reynolds Rd
City | State | Zip Code
Toledo | OH | 43615-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 04 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C38531275

B. Full Name (Last, First, Middle Initial)
Vincent Sutton
Mailing Address
1710 South 70th St PO Box 8068
City | State | Zip Code
Lincoln | NE | 68506-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 04 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C38569276

C. Full Name (Last, First, Middle Initial)
Joseph Terry
Mailing Address
2500 Como Avenue
City | State | Zip Code
St Paul | MN | 55108-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C38787279

SUBTOTAL of Receipts This Page (optional) ▶ **900.00**

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 62 / 78
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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

A. Full Name (Last, First, Middle Initial)
John Thomas
Mailing Address
3519 Friendsville Road
City | State | Zip Code
Wooster | OH | 44691-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 13 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C38801280

B. Full Name (Last, First, Middle Initial)
Matthew Thomas
Mailing Address
1600 S Brentwood | Ste 800
City | State | Zip Code
St Louis | MO | 63144-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 12 04 2001
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 122020017C38856282

C. Full Name (Last, First, Middle Initial)
Jonathan Til
Mailing Address
Lewis-Gale Clinic | 1802 Braeburn Dr
City | State | Zip Code
Salem | VA | 24153-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 20 2001
Amount of Each Receipt this Period: 100.00
Receipt
Transaction ID: 011020022BC38851283

SUBTOTAL of Receipts This Page (optional) ▶ **650.00**

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 63 / 78
(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)
Gerald Tiller
Mailing Address
PO Drawer L
400 Marina Drive
City: Georgetown | State: SC | Zip Code: 29442-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 04 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C38581284

B. Full Name (Last, First, Middle Initial)
Kevin Treacy
Mailing Address
645 Ridgewood Road
City: Duluth | State: MN | Zip Code: 55804-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 600.00
Date of Receipt: 12 04 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C38576286

C. Full Name (Last, First, Middle Initial)
Robert Trent
Mailing Address
PO Box 1379
615 Laurens Street
City: Camden | State: SC | Zip Code: 29020-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 12 04 2001
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 122020017C38532287

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

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 64 / 78
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[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)
Sam Unterrichi
Mailing Address
23 Erick Ave
City | State | Zip Code
Hewlett | NY | 11557-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 375.00

Date of Receipt: 12 18 2001
Amount of Each Receipt this Period: 125.00
Receipt
Transaction ID: 122020017C38824288

B.
Full Name (Last, First, Middle Initial)
Leo Watson
Mailing Address
3433 S Lafountain
City | State | Zip Code
Kokomo | IN | 46902-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 12 04 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C38553293

C.
Full Name (Last, First, Middle Initial)
Tony Weaver
Mailing Address
2819 Capitol Medical Boulevard
City | State | Zip Code
Tallahassee | FL | 32308-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 12 04 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C38535294

SUBTOTAL of Receipts This Page (optional) ▶ **725.00**

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 65 / 78
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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

A. Full Name (Last, First, Middle Initial)
Thomas Weed
Mailing Address
510 West 25th St
City | State | Zip Code
Merced | CA | 95340-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C38284295

B. Full Name (Last, First, Middle Initial)
Aaron Weingeist
Mailing Address
3934 S Americus St
City | State | Zip Code
Seattle | WA | 98118-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 07 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C38682298

C. Full Name (Last, First, Middle Initial)
Charles Weeley
Mailing Address
110 Lakeview Drive ste 1
City | State | Zip Code
Noblesville | IN | 46060-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 04 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C38668301

SUBTOTAL of Receipts This Page (optional) ▶ **900.00**

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 66 / 78
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[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)
Wayne Whitmore
Mailing Address
116 E 68th St
City | State | Zip Code
New York | NY | 10021-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 12 13 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C38800303

B.
Full Name (Last, First, Middle Initial)
Peter Whitted
Mailing Address
Midwest Eye Care 4353 Dodge Street
City | State | Zip Code
Omaha | NE | 68131-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 12 07 2001
Amount of Each Receipt this Period: 1000.00
Receipt
Transaction ID: 122020017C38805304

C.
Full Name (Last, First, Middle Initial)
Dan Allin Wills
Mailing Address
1325 Pennsylvania Ave Ste 670
City | State | Zip Code
Fort Worth | TX | 76104-2133
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 12 07 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C38809305

SUBTOTAL of Receipts This Page (optional) ▶ **1600.00**

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 67 / 78
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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

A. Full Name (Last, First, Middle Initial)
John Wilmeth
Mailing Address
PO Box 1226
City | State | Zip Code
Anderson | SC | 29622-1226
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 122020017C38286306

B. Full Name (Last, First, Middle Initial)
Kai Wong
Mailing Address
2323 16th St Ste 501
City | State | Zip Code
Bakersfield | CA | 93301-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 04 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C38587307

C. Full Name (Last, First, Middle Initial)
George Wyhinny
Mailing Address
1875 W Dempster
City | State | Zip Code
Park Ridge | IL | 60068-
FEC ID number of contributing federal political committee.
Name of Employer: self
Occupation: Ophthalmologist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 04 2001
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 122020017C38533308

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

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 68 / 78
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

A. Full Name (Last, First, Middle Initial)
David Deok Yu

Mailing Address
10 Congress St Ste 340

City | State | Zip Code
Pasadena | CA | 91105-3023

FEC ID number of contributing federal political committee.

Name of Employer: self
Occupation: Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
12 05 2001

Amount of Each Receipt this Period
300.00

Receipt

Transaction ID: 12202001 7C38705310

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

Mailing Address
309 West Quinto St

City | State | Zip Code
Santa Barbara | CA | 93105-

FEC ID number of contributing federal political committee.

Name of Employer: self
Occupation: Ophthalmologist

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
12 04 2001

Amount of Each Receipt this Period
500.00

Receipt

Transaction ID: 12202001 7C38585313

C.

SUBTOTAL of Receipts This Page (optional)	▶	**800.00**
TOTAL This Period (last page this line number only)	▶	**66047.20**

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 69 / 78
(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 | State | Zip Code
San Francisco | CA | 94124-0512

FEC ID number of contributing federal political committee.

Name of Employer | Occupation

Receipt For:
Primary X General
Other (specify) ▼

Aggregate Year-to-Date ▼
716.64

Date of Receipt
M M / D D / Y Y Y Y
12 31 2001

Amount of Each Receipt this Period
79.78

Other Receipt

Transaction ID: 011820024C38889

B.

C.

SUBTOTAL of Receipts This Page (optional) ▶ **79.78**

TOTAL This Period (last page this line number only) ▶ **79.78**

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

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

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

Purpose of Disbursement
UB cking acct exp Nov 01

Candidate Name

Category/ Type

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

Disbursement For: Primary / General / Other (specify)

Date of Disbursement
12 31 2001

Amount of Each Disbursement this Period
513.22

UB cking acct exp Nov 01

Transaction ID: 011020023DE2821

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 Dec 01

Candidate Name

Category/ Type

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

Disbursement For: Primary / General / Other (specify)

Date of Disbursement
12 31 2001

Amount of Each Disbursement this Period
1264.25

UB cking acct exp Dec 01

Transaction ID: 011620024E2922

C.

SUBTOTAL of Disbursements This Page (optional) ▶	**1777.47**
TOTAL This Period (last page this line number only) ▶	**1777.47**

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

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

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

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

Mailing Address
215 Fourth Ave, Suite 200
City: Haddon Heights | State: NJ | Zip Code: 08035-

Purpose of Disbursement
House NJ-1

Candidate Name

Category/ Type

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

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

Date of Disbursement: 12 06 2001

Amount of Each Disbursement this Period: 1000.00

House NJ-1

Transaction ID: 12202001 7E2917

B.
Full Name (Last, First, Middle Initial)
Barrett For Congress

Mailing Address
7720 Rogers Ave
City: Wauwatosa | State: WI | Zip Code: 53213-1748

Purpose of Disbursement
check voided, orig rptd 3/00

Candidate Name

Category/ Type

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

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

Date of Disbursement: 12 31 2001

Amount of Each Disbursement this Period: -1000.00

check voided, orig rptd 3/00

Transaction ID: 0429200223E3D46

C.
Full Name (Last, First, Middle Initial)
Brian Bilbray For Congress

Mailing Address
970 Seacoast Dr
City: Imperial Beach | State: CA | Zip Code: 91932-2402

Purpose of Disbursement
check voided, orig rptd 11/99

Candidate Name

Category/ Type

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

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

Date of Disbursement: 12 31 2001

Amount of Each Disbursement this Period: -1000.00

check voided, orig rptd 11/99

Transaction ID: 0429200223E3D42

SUBTOTAL of Disbursements This Page (optional) ▶ **-1000.00**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

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

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

A. Full Name (Last, First, Middle Initial)
Charles A Gonzalez Congrl Cmpgn

Mailing Address
Po Box 12612
City: San Antonio | State: TX | Zip Code: 78212-0612

Purpose of Disbursement
check voided, orig rptd 2/00

Candidate Name

Category/ Type

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

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

Date of Disbursement: 12 / 31 / 2001

Amount of Each Disbursement this Period: -1000.00

check voided, orig rptd 2/00

Transaction ID: 0429200223E3043

B. Full Name (Last, First, Middle Initial)
Crane For Congr Comm

Mailing Address
Po Box 8534
City: Rolling Meadows | State: IL | Zip Code: 60008-8534

Purpose of Disbursement
House IL-8

Candidate Name

Category/ Type

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

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

Date of Disbursement: 12 / 06 / 2001

Amount of Each Disbursement this Period: 1000.00

House IL-8

Transaction ID: 122020017E2920

C. Full Name (Last, First, Middle Initial)
Ed Bryant For Congress

Mailing Address
1715 Aaron Brenner Dr, 8th Fl
City: Memphis | State: TN | Zip Code: 38120-

Purpose of Disbursement
check voided, orig rptd 4/00

Candidate Name

Category/ Type

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

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

Date of Disbursement: 12 / 31 / 2001

Amount of Each Disbursement this Period: -1000.00

check voided, orig rptd 4/00

Transaction ID: 0429200223E3048

SUBTOTAL of Disbursements This Page (optional) ▶ **-1000.00**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
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☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29

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

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

Mailing Address
462 California Rd
City: Bronxville | State: NY | Zip Code: 10708-2306

Purpose of Disbursement
check voided, orig rptd 5/00

Candidate Name

Category/ Type

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

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

Date of Disbursement: 12 / 31 / 2001

Amount of Each Disbursement this Period: -2000.00

check voided, orig rptd 5/00

Transaction ID: 0429200223E3050

B. Full Name (Last, First, Middle Initial)
Friends Of Connie Morella

Mailing Address
7101 Wisconsin Ave Ste 102
City: Bethesda | State: MD | Zip Code: 20814-4805

Purpose of Disbursement
House MD-8

Candidate Name

Category/ Type

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

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

Date of Disbursement: 12 / 06 / 2001

Amount of Each Disbursement this Period: 2000.00

House MD-8

Transaction ID: 122020017E2912

C. Full Name (Last, First, Middle Initial)
Friends Of Jim Clyburn

Mailing Address
2725 Devine St Fl 2
City: Columbia | State: SC | Zip Code: 29205-2411

Purpose of Disbursement
check voided, orig rptd 5/00

Candidate Name

Category/ Type

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

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

Date of Disbursement: 12 / 31 / 2001

Amount of Each Disbursement this Period: -1000.00

check voided, orig rptd 5/00

Transaction ID: 0429200223E3049

SUBTOTAL of Disbursements This Page (optional) ▶ **-1000.00**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

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

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

A. Full Name (Last, First, Middle Initial)
Friends Of John Tanner

Mailing Address
Po Box 1994
City: Union City | State: TN | Zip Code: 38281-1994

Purpose of Disbursement
check voided, orig rptd 2/00

Candidate Name

Category/ Type

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

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

Date of Disbursement: 12 31 2001

Amount of Each Disbursement this Period: -1000.00

check voided, orig rptd 2/00

Transaction ID: 0429200223E3045

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

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

Purpose of Disbursement
Senate MT

Candidate Name

Category/ Type

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

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

Date of Disbursement: 12 06 2001

Amount of Each Disbursement this Period: 2500.00

Senate MT

Transaction ID: 122020017E2916

C. Full Name (Last, First, Middle Initial)
Gerald C Jerry Weller For Congress

Mailing Address
PO Box 15283
City: Washington | State: DC | Zip Code: 20003-

Purpose of Disbursement
check voided, orig rptd 9/00

Candidate Name

Category/ Type

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

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

Date of Disbursement: 12 31 2001

Amount of Each Disbursement this Period: -1000.00

check voided, orig rptd 9/00

Transaction ID: 0429200223E3052

SUBTOTAL of Disbursements This Page (optional) ▶ **500.00**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

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

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

A. Full Name (Last, First, Middle Initial)
Hagel For Senate

Mailing Address
818 Connecticut Ave NW, Suite 1008
City: Washington | State: DC | Zip Code: 20006-

Purpose of Disbursement
Senate NE

Candidate Name

Category/ Type

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

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

Date of Disbursement: 12 / 06 / 2001

Amount of Each Disbursement this Period: 1000.00

Senate NE

Transaction ID: 122020017E2915

B. Full Name (Last, First, Middle Initial)
Kompac

Mailing Address
PO Box 20209
City: Alexandria | State: VA | Zip Code: 22320-

Purpose of Disbursement
Leadership PAC contribution

Candidate Name

Category/ Type

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

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

Date of Disbursement: 12 / 06 / 2001

Amount of Each Disbursement this Period: 5000.00

Leadership PAC contribution

Transaction ID: 0429200214E3D19

C. Full Name (Last, First, Middle Initial)
John Shadegg For Congress

Mailing Address
Po Box 45444
City: Phoenix | State: AZ | Zip Code: 85064-5444

Purpose of Disbursement
House AZ-4

Candidate Name

Category/ Type

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

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

Date of Disbursement: 12 / 06 / 2001

Amount of Each Disbursement this Period: 1000.00

House AZ-4

Transaction ID: 122020017E2918

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

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

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

Mailing Address
Po Box 1077
City: Tarpon Springs | State: FL | Zip Code: 34688-1077

Purpose of Disbursement
check voided, orig rptd 11/99

Candidate Name

Category/ Type

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

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

Date of Disbursement: 12 31 2001

Amount of Each Disbursement this Period: -1000.00

check voided, orig rptd 11/99

Transaction ID: 0429200223E3041

B. Full Name (Last, First, Middle Initial)
Mike Honda For Congress

Mailing Address
111 W Saint John St Ste 400
City: San Jose | State: CA | Zip Code: 95113-1104

Purpose of Disbursement
House CA-15

Candidate Name

Category/ Type

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

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

Date of Disbursement: 12 06 2001

Amount of Each Disbursement this Period: 1000.00

House CA-15

Transaction ID: 122020017E2914

C. Full Name (Last, First, Middle Initial)
Mike Thompson For Congress

Mailing Address
Po Box 1998
City: Saint Helena | State: CA | Zip Code: 94574-

Purpose of Disbursement
check voided, orig rptd 3/00

Candidate Name

Category/ Type

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

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

Date of Disbursement: 12 31 2001

Amount of Each Disbursement this Period: -1000.00

check voided, orig rptd 3/00

Transaction ID: 0429200223E3047

SUBTOTAL of Disbursements This Page (optional) ▶ **-1000.00**

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

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

Mailing Address
1600 R St Nw Apt 605
City: Washington | State: DC | Zip Code: 20009-1617

Purpose of Disbursement
check voided, orig rptd 7/00

Candidate Name

Category/ Type

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

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

Date of Disbursement: 12 / 31 / 2001

Amount of Each Disbursement this Period: -1000.00

check voided, orig rptd 7/00

Transaction ID: 0429200223E3D51

B.
Full Name (Last, First, Middle Initial)
Rangel For Congress

Mailing Address
Po Box 5577 Manhattanville Station
City: New York | State: NY | Zip Code: 10027-5570

Purpose of Disbursement
check voided, orig rptd 10/00

Candidate Name

Category/ Type

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

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

Date of Disbursement: 12 / 31 / 2001

Amount of Each Disbursement this Period: -2000.00

check voided, orig rptd 10/00

Transaction ID: 0429200223E3D54

C.
Full Name (Last, First, Middle Initial)
Re-elect Nancy Johnson To Congress

Mailing Address
Po Box 1986
City: New Britain | State: CT | Zip Code: 06050-1986

Purpose of Disbursement
House CT-6

Candidate Name

Category/ Type

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

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

Date of Disbursement: 12 / 06 / 2001

Amount of Each Disbursement this Period: 1000.00

House CT-6

Transaction ID: 122020017E2913

SUBTOTAL of Disbursements This Page (optional) ▶ **-2000.00**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

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

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

A. Full Name (Last, First, Middle Initial)
Richard E Neal For Congress Comm

Mailing Address
76 Magnolia Ter
Po Box 718
City: Springfield
State: MA
Zip Code: 01109-2533

Purpose of Disbursement
check voided, orig rptd 2/00

Candidate Name

Category/ Type

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

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

Date of Disbursement: 12 31 2001

Amount of Each Disbursement this Period: -1000.00

check voided, orig rptd 2/00

Transaction ID: 0429200223E3044

B. Full Name (Last, First, Middle Initial)
Richardson For Congress Exploratory Co

Mailing Address
PO Box 13585
City: Tucson
State: AZ
Zip Code: 85732-

Purpose of Disbursement
House-AZ 2

Candidate Name

Category/ Type

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

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

Date of Disbursement: 12 06 2001

Amount of Each Disbursement this Period: 2500.00

House-AZ 2

Transaction ID: 122020017E2911

C. Full Name (Last, First, Middle Initial)
The Tom Sawyer Committee

Mailing Address
1540 W Market St Ste 201
City: Akron
State: OH
Zip Code: 44313-7119

Purpose of Disbursement
check voided, orig rptd 9/00

Candidate Name

Category/ Type

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

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

Date of Disbursement: 12 31 2001

Amount of Each Disbursement this Period: -1000.00

check voided, orig rptd 9/00

Transaction ID: 0429200223E3053

SUBTOTAL of Disbursements This Page (optional) ▶ **500.00**

TOTAL This Period (last page this line number only) ▶ **2000.00**