02/13/2003 16 : 03

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) — **USE FEC MAILING LABEL OR TYPE OR PRINT** ▼ — Example: If typing, type over the lines

American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

ADDRESS (number and street) ▼ 655 Beach Street

Check if different than previously reported. (ACC)

San Francisco | CA | 94109 –

2. **FEC IDENTIFICATION NUMBER** ▼ — CITY ▲ — STATE ▲ — ZIPCODE ▲

C00196246

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

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report(Q1)

July 15 Quarterly Report(Q2)

October 15 Quarterly Report(Q3)

January 31 Quarterly Report(YE)

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

Termination Report (TER)

(b) Monthly Report Due On: X

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 (12S)

Election on in the State of

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

Election on in the State of

5. Covering Period 01 01 2003 through 01 31 2003

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

Type or Print Name of Treasurer Carol Beatty, Treasurer

Signature of Treasurer Electronically Filed by Carol Beatty, Treasurer Date 02 13 2003

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: 01 01 2003 To: 01 31 2003

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2003		315892.39
(b) Cash on Hand at Begining of Reporting Period	315892.39	
(c) Total Receipts (from Line 19)	31968.29	31968.29
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	347860.68	347860.68
7. Total Disbursements (from Line 30)	931.33	931.33
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	346929.35	346929.35
9. Debts and Obligations owed **TO** the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed **BY** the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

CA

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
OF RECEIPTS

Write or Type Committee Name

American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	24365.00	
(ii) Unitemized	7514.75	
(iii) TOTAL (add Lines 11(a)(i) and (ii) ▶	31879.75	31879.75
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 32, page 4) ▶	31879.75	31879.75
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 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.)	88.54	88.54
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) ▶	31968.29	31968.29
20. Total Federal Receipts (subtract Line 16 from Line 19) ▶	31968.29	31968.29

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	731.33	731.33
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)) ▶	731.33	731.33
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26. Loan Repayments Made	0.00	0.00
27. Loans Made	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	200.00	200.00
(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)) ▶	200.00	200.00
29. Other Disbursements	0.00	0.00
30. Total Disbursements (add Lines 21(c), 22, 23,24,25,26,27,28(d),and 29) ▶	931.33	931.33
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30) ▶	931.33	931.33
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) from Line 11(d), page 3)	31879.75	31879.75
33. Total Contribution Refunds (from Line 28(d))	200.00	200.00
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)	31679.75	31679.75
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	731.33	731.33
36. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
37. Net Operating Expenditures (subtract Line 36 from Line 35) ▶	731.33	731.33

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 5 / 29

[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): Robert Alan
Mailing Address: 3149 Ellis St Ste 202
City: Bellingham State: WA Zip Code: 98225-
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: 01 06 2003
Amount of Each Receipt this Period: 365.00
Receipt
Transaction ID: 01152003280421782

B.
Full Name (Last, First, Middle Initial): Colin Arnold
Mailing Address: 7501 Hospital Dr Ste 105
City: Sacramento State: CA Zip Code: 95823-
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: 01 06 2003
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 01152003280421535

C.
Full Name (Last, First, Middle Initial): Donald Benefield
Mailing Address: 743 16th Street
City: Gulfport State: MS Zip Code: 39507-
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: 01 07 2003
Amount of Each Receipt this Period: 365.00
Receipt
Transaction ID: 01152003280422006

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

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 6 / 29

[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): Herman Berg
Mailing Address: 180-01 Union Turnpike
City: Fresh Meadows State: NY Zip Code: 11366-
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: 01 10 2003
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 0115200328C422237

B.
Full Name (Last, First, Middle Initial): Herman Berg
Mailing Address: 180-01 Union Turnpike
City: Fresh Meadows State: NY Zip Code: 11366-
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: 01 10 2003
Amount of Each Receipt this Period: .00
Receipt
Transaction ID: 0115200328C422228

C.
Full Name (Last, First, Middle Initial): Bradley Berman
Mailing Address: 1330 Interstate Pkwy
City: Augusta State: GA Zip Code: 30909-5825
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: 01 10 2003
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 0115200328C4222410

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

FOR LINE NUMBER: (check only one) PAGE 7 / 29

[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): Carol Boerner
Mailing Address: 843 Whitmore Rd
City: Reading State: VT Zip Code: 05062-9630
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: 01 06 2003
Amount of Each Receipt this Period: 365.00
Receipt
Transaction ID: 0115200328C4214612

B.
Full Name (Last, First, Middle Initial): Michael Brennan
Mailing Address: 1214 Vaughn Rd
City: Burlington State: NC Zip Code: 27217-
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: 01 07 2003
Amount of Each Receipt this Period: 365.00
Receipt
Transaction ID: 0115200328C4219513

C.
Full Name (Last, First, Middle Initial): Charles Calhoun
Mailing Address: West Georgia Eye Care Center 2816 Warm Springs Rd
City: Columbus State: GA Zip Code: 31904-
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: 01 13 2003
Amount of Each Receipt this Period: 365.00
Receipt
Transaction ID: 0115200328C4223014

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

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 8 / 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): Peter Chen
Mailing Address: Fl 2 76 Mott St
City: New York State: NY Zip Code: 10013-4811
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: 01 09 2003
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 0115200328C4221815

B.
Full Name (Last, First, Middle Initial): Franklin Chu
Mailing Address: Bainbridge Eyeland Eyecare 1122 Madison Avenue North
City: Bainbridge Island State: WA Zip Code: 98110-
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: 01 31 2003
Amount of Each Receipt this Period: 365.00
Receipt
Transaction ID: 0213200325C4228816

C.
Full Name (Last, First, Middle Initial): Jose Cumba
Mailing Address: PO Box 130
City: Bayamon State: PR Zip Code: 00960-0130
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: 01 06 2003
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 0115200328C4217121

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

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 9 / 29

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

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

A. Full Name (Last, First, Middle Initial): Michael Daun
Mailing Address: 5890 Park Rd
City: Cincinnati State: OH Zip Code: 45243-3412
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: 01 31 2003
Amount of Each Receipt this Period: 365.00
Receipt
Transaction ID: 0213200325C4229022

B. Full Name (Last, First, Middle Initial): Sujata David
Mailing Address: 8919 Parallel Pky Ste 226
City: Kansas City State: KS Zip Code: 66112-
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: 01 06 2003
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 0115200328C4214023

C. Full Name (Last, First, Middle Initial): Patrick Dennis
Mailing Address: 116B Ashley Ave
City: Charleston State: SC Zip Code: 29401-
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: 01 07 2003
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 0115200328C4218925

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

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 10 / 29

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

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

A.
Full Name (Last, First, Middle Initial): Richard Eiferman
Mailing Address: 6400 Dutchmans Pky, Ste 220
City: Louisville State: KY Zip Code: 40205-
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: 01 09 2003
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 01152003280C4221227

B.
Full Name (Last, First, Middle Initial): Paul Fecko
Mailing Address: Ste 302, 189 Townsend St
City: Birmingham State: MI Zip Code: 48009-6011
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: 01 06 2003
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 01152003280C4216929

C.
Full Name (Last, First, Middle Initial): Gerald Farenstein
Mailing Address: 401 East Gold Coast Road
City: Papillion State: NE Zip Code: 68126-
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: 01 06 2003
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 01152003280C4216431

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: (check only one) PAGE 11 / 29

[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): Dwain Fuller
Mailing Address: Ste 400 — 7150 Greenville Ave
City: Dallas — State: TX — Zip Code: 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: 365.00
Date of Receipt: 01 07 2003
Amount of Each Receipt this Period: 365.00
Receipt
Transaction ID: 0115200328C4219334

B.
Full Name (Last, First, Middle Initial): Geoffrey Garrett
Mailing Address: PO Box 51455 — 1455 E Bert Kouns
City: Shreveport — State: LA — Zip Code: 71135-
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: 01 06 2003
Amount of Each Receipt this Period: 365.00
Receipt
Transaction ID: 0115200328C4217735

C.
Full Name (Last, First, Middle Initial): Lawrence Goldberg
Mailing Address: 4957 38th Ave N Ste D
City: St Petersburg — State: FL — Zip Code: 33710-
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: 01 06 2003
Amount of Each Receipt this Period: 365.00
Receipt
Transaction ID: 0115200328C4217037

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

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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[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): Irvin Handelman
Mailing Address: 2525 NW Lovejoy Ste 10D
City: Portland State: OR Zip Code: 97210-
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: 01 06 2003
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 0115200328C4214742

B. Full Name (Last, First, Middle Initial): Thomas Hedvin
Mailing Address: Eye Consultants of Atlanta 95 Collier Rd NW Ste 3000
City: Atlanta State: GA Zip Code: 30309-1604
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: 01 06 2003
Amount of Each Receipt this Period: 365.00
Receipt
Transaction ID: 0115200328C4218543

C. Full Name (Last, First, Middle Initial): H King Hartman
Mailing Address: 516 Pellis Rd
City: Greensburg State: PA Zip Code: 15601-
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: 01 06 2003
Amount of Each Receipt this Period: 365.00
Receipt
Transaction ID: 0115200328C4214144

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1030.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 13 / 29

[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): Bruce Heron
Mailing Address: 668 Skyline Dr
City: Jackson State: TN Zip Code: 38301-
FEC ID number of contributing federal political committee.
Name of Employer: THE EYE CLINIC
Occupation: Ophthalmologist
Receipt For: Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt: 01 13 2003
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 0115200328C4223545

B.
Full Name (Last, First, Middle Initial): David Hill
Mailing Address: Suite 522 85 Seymour Street
City: Hartford State: CT Zip Code: 06106-
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: 01 06 2003
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 0115200328C4217246

C.
Full Name (Last, First, Middle Initial): Ana Huaman
Mailing Address: 7916 William Moyers Ave NE
City: Albuquerque State: NM Zip Code: 87122-2739
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: 01 30 2003
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 0213200325C4228149

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

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: (check only one) PAGE 14 / 29

[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): Jerry Hunsaker
Mailing Address: Ste 1D6 4707 Everhart Rd
City: Corpus Christi State: TX Zip Code: 78411-2752
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: 01 23 2003
Amount of Each Receipt this Period: 365.00
Receipt
Transaction ID: 0213200325C4226850

B.
Full Name (Last, First, Middle Initial): Randolph Johnston
Mailing Address: Cheyenne Eye Clinic 1300 E 20th St
City: Cheyenne State: WY Zip Code: 82001-
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: 01 15 2003
Amount of Each Receipt this Period: 1000.00
Receipt
Transaction ID: 0122200348C4224852

C.
Full Name (Last, First, Middle Initial): Kenneth Juechter
Mailing Address: 20 Watch Hill Road
City: Croton-on-Hudson State: NY Zip Code: 10520-
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: 01 29 2003
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 0213200325C4227853

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1665.00**

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): Abdul Khaliq
Mailing Address: Attn: Cheryl Arnold, 146 Hazard Ave Ste 106
City: Enfield State: CT Zip Code: 06082-
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: 01 31 2003
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 0213200325C4228655

B. Full Name (Last, First, Middle Initial): Robert Kinker
Mailing Address: PO Box 4265
City: Frankfort State: KY Zip Code: 40604-4265
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: 01 06 2003
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 0115200328C4218856

C. Full Name (Last, First, Middle Initial): Allan Kolker
Mailing Address: Glaucoma Inst Eye Hlth Care Assoc, 12601 Olive Blvd
City: St Louis State: MO Zip Code: 63141-
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: 01 13 2003
Amount of Each Receipt this Period: 300.00
Receipt
Transaction ID: 0115200328C4223857

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

A.
Full Name (Last, First, Middle Initial): Daniel Krach
Mailing Address: 2510 E Dupont Rd Ste 128
City: Fort Wayne State: IN Zip Code: 46825-
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: 01 13 2003
Amount of Each Receipt this Period: 225.00
Receipt
Transaction ID: 0115200328C4222758

B.
Full Name (Last, First, Middle Initial): Mark Allan Lebowitz
Mailing Address: 1301 Avenue J
City: Brooklyn State: NY Zip Code: 11230-
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: 01 24 2003
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 0213200325C4227161

C.
Full Name (Last, First, Middle Initial): Charles Lederer
Mailing Address: 1004 Carondelet #405
City: Kansas City State: MO Zip Code: 64114-4801
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: 01 23 2003
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 0213200325C4228062

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

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): Eigijus Lelis
Mailing Address: 14488 Hawthorn Dr
City: Lemont State: IL Zip Code: 60439-
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: 01 07 2003
Amount of Each Receipt this Period: 365.00
Receipt
Transaction ID: 0115200328C4219063

B. Full Name (Last, First, Middle Initial): Andrew Lewicky
Mailing Address: 3962 North Milwaukee Avenue
City: Chicago State: IL Zip Code: 60641-
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: 01 23 2003
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 0213200325C4226765

C. Full Name (Last, First, Middle Initial): Edward Loree
Mailing Address: Suite D 4950 SW Lejeune Road
City: Coral Gables State: FL Zip Code: 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: 01 06 2003
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 0115200328C4216068

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

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): James Mims
Mailing Address: 311 Camden Ste 511
City: San Antonio State: TX Zip Code: 78215-
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: 01 13 2003
Amount of Each Receipt this Period: 365.00
Receipt
Transaction ID: 0115200328C4223373

B.
Full Name (Last, First, Middle Initial): Ken Mishler
Mailing Address: 966 Hamburg Tpk
City: Wayne State: NJ Zip Code: 07470-3225
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: 01 13 2003
Amount of Each Receipt this Period: 365.00
Receipt
Transaction ID: 0115200328C4223474

C.
Full Name (Last, First, Middle Initial): Michael OBrien
Mailing Address: 618 Tollgate Rd
City: Warwick State: RI Zip Code: 02886-
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: 01 07 2003
Amount of Each Receipt this Period: 365.00
Receipt
Transaction ID: 0115200328C4218877

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

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): Stephen Petty
Mailing Address: 850 E Harvard Ave Ste 505
City: Denver State: CO Zip Code: 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 ▼ 500.00
Date of Receipt: 01 09 2003
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 0115200328C4221384

B.
Full Name (Last, First, Middle Initial): David Pugh
Mailing Address: 18599 Lakeshore Boulevard
City: Cleveland State: OH Zip Code: 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: 01 07 2003
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 0115200328C4220186

C.
Full Name (Last, First, Middle Initial): Brian Ranelle
Mailing Address: 1872 Norwood Dr
City: Hurst State: TX Zip Code: 76054-3066
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: 01 06 2003
Amount of Each Receipt this Period: 365.00
Receipt
Transaction ID: 0115200328C4215087

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

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A.
Full Name (Last, First, Middle Initial): Erman Rawings
Mailing Address: 3430 Bienville Blvd
City: Ocean Springs State: MS Zip Code: 39564-5732
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: 01 07 2003
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 0115200328C4219788

B.
Full Name (Last, First, Middle Initial): Michael Redmond
Mailing Address: 8333 North Davis Highway
City: Pensacola State: FL Zip Code: 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: 500.00
Date of Receipt: 01 06 2003
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 0115200328C4215489

C.
Full Name (Last, First, Middle Initial): David Rothberg
Mailing Address: 3820 Tampa Rd Ste 101
City: Palm Harbor State: FL Zip Code: 34684-
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: 01 10 2003
Amount of Each Receipt this Period: 365.00
Receipt
Transaction ID: 0115200328C4222091

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

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): Gary Rubin
Mailing Address: 7001 W Archer Ave
City: Chicago State: IL Zip Code: 60638-2201
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: 01 06 2003
Amount of Each Receipt this Period: 365.00
Receipt
Transaction ID: 01152003280C4216392

B.
Full Name (Last, First, Middle Initial): Bryan Rutledge
Mailing Address: Retina Vitreous Surgeons 3107 E Genesee St
City: Syracuse State: NY Zip Code: 13224-
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: 01 13 2003
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 01152003280C4223193

C.
Full Name (Last, First, Middle Initial): Jeffrey Shaver
Mailing Address: Dean A McGee Eye Inst 1005 Medical Park Blvd
City: Edmond State: OK Zip Code: 73013-3025
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: 01 06 2003
Amount of Each Receipt this Period: 365.00
Receipt
Transaction ID: 01152003280C4216898

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

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): James Silone
Mailing Address: Center for Sight, 1371 W Main St
City: Newark State: OH Zip Code: 43055-
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: 01 06 2003
Amount of Each Receipt this Period: 365.00
Receipt
Transaction ID: 0115200328C42155100

B.
Full Name (Last, First, Middle Initial): Gary Sole
Mailing Address: PO Box 430
City: Lapeer State: MI Zip Code: 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 ▼ 500.00
Date of Receipt: 01 15 2003
Amount of Each Receipt this Period: 500.00
Receipt
Transaction ID: 0122200348C42244102

C.
Full Name (Last, First, Middle Initial): Robert Stamper
Mailing Address: UCSF Dept Ophthalmology, 10 Kirkham St Rm K-301
City: San Francisco State: CA Zip Code: 94143-0730
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: 01 06 2003
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 0115200328C42145103

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

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): Jeffrey Starkey
Mailing Address: 31 Conservatory Drive
City: Barberton State: OH Zip Code: 44203-
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: 01 06 2003
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 0115200328C42181104

B. Full Name (Last, First, Middle Initial): Jonathan Stock
Mailing Address: Baraboo Regional Eye Associates 703 14th St
City: Baraboo State: WI Zip Code: 53913-
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: 01 06 2003
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 0115200328C42179106

C. Full Name (Last, First, Middle Initial): Shigemi Sugiki
Mailing Address: 1380 Lusitana St Ste 714
City: Honolulu State: HI Zip Code: 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 ▼ 250.00
Date of Receipt: 01 02 2003
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 0115200328C42207108

SUBTOTAL of Receipts This Page (optional) ..... ▶ **750.00**

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): Walter Taylor
Mailing Address: Ste 1D1-M, 1200 First Colonial Rd
City: Virginia Beach State: VA Zip Code: 23454-
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: 01 09 2003
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 0115200328C42217113

B.
Full Name (Last, First, Middle Initial): H Nicholas Vondrak
Mailing Address: Vondrak Eye Care & Surgery, 1414 West 12th St
City: Hastings State: NE Zip Code: 68901-
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: 01 13 2003
Amount of Each Receipt this Period: 250.00
Receipt
Transaction ID: 0115200328C42232115

C.
Full Name (Last, First, Middle Initial): L Andrew Watkins
Mailing Address: 427 W 20th St Ste 100
City: Houston State: TX Zip Code: 77008-
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: 01 07 2003
Amount of Each Receipt this Period: 365.00
Receipt
Transaction ID: 0115200328C4220311B

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

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): John Anderson Wells
Mailing Address: 2750 Laurel St Ste 101
City: Columbia State: SC Zip Code: 29204-
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: 01 13 2003
Amount of Each Receipt this Period: 1000.00
Receipt
Transaction ID: 0115200328C42228125

B.
Full Name (Last, First, Middle Initial): Charles Wesley
Mailing Address: Ste 101 18051 River Ave
City: Noblesville State: IN Zip Code: 46060-8329
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: 01 23 2003
Amount of Each Receipt this Period: 365.00
Receipt
Transaction ID: 0213200325C42269126

C.
Full Name (Last, First, Middle Initial): Arthur Willis
Mailing Address: Ste 1100 6500 Fannin St
City: Houston State: TX Zip Code: 77030-1593
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: 01 06 2003
Amount of Each Receipt this Period: 1000.00
Receipt
Transaction ID: 0115200328C42148129

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

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): Curt Wischmeier
Mailing Address: 310 8th Avenue, Suite 507
City: Aberdeen State: SD Zip Code: 57401-
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: 01 15 2003
Amount of Each Receipt this Period: 365.00
Receipt
Transaction ID: 0122200348C42247130

B.
Full Name (Last, First, Middle Initial): Chauncey Witcraft
Mailing Address: 310 Second Avenue SW
City: Miami State: OK Zip Code: 74354-
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: 01 06 2003
Amount of Each Receipt this Period: 365.00
Receipt
Transaction ID: 0115200328C42138131

C.

SUBTOTAL of Receipts This Page (optional) ..... ▶ **730.00**

TOTAL This Period (last page this line number only) ..... ▶ **24365.00**

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 27 / 29

☐ 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)
Union Bank

Mailing Address
PO Box 24512

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

FEC ID number of contributing federal political committee.

Name of Employer

Occupation

Date of Receipt
01 31 2003

Amount of Each Receipt this Period
88.54

Other Receipt

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
88.54

Transaction ID: 02132003260C42314

B.

C.

SUBTOTAL of Receipts This Page (optional) ..... ▶	**88.54**
TOTAL This Period (last page this line number only) ..... ▶	**88.54**

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 1/03

Candidate Name

Category/Type

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

Disbursement For: Primary / General / Other (specify)

Date of Disbursement
01 31 2003

Amount of Each Disbursement this Period
731.33

UB CKING ACCT EXP 1/03

Transaction ID: 0213200326E3365

B.

C.

SUBTOTAL of Disbursements This Page (optional) ..... ▶	**731.33**
TOTAL This Period (last page this line number only) ..... ▶	**731.33**

Form/Schedule: F3XN
Transaction ID: C00195246