

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
Advanced Medical Optics Inc Political Action Committee

ADDRESS (number and street) 2148 E. Orangeview Ln.
 Check if different than previously reported. (ACC)
Orange CA 92867

2. **FEC IDENTIFICATION NUMBER** C00379719
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 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 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 07 01 2006 through 09 30 2006

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 Edith Bennett

Signature of Treasurer Electronically Filed by Edith Bennett Date 10 10 2006

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									
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Advanced Medical Optics Inc Political Action Committee

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		20944.38
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	14329.66									
(c) Total Receipts (from Line 19)	7576.34	23991.62								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	21906.00	44936.00								
7. Total Disbursements (from Line 31)	13515.00	36545.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	8391.00	8391.00								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
Advanced Medical Optics Inc Political Action Committee

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

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	6390.37	16486.63
(i) Itemized (use Schedule A)	1185.97	7504.99
(ii) Unitemized	7576.34	23991.62
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	7576.34	23991.62
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	7576.34	23991.62
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	7576.34	23991.62

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	13500.00	36500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(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	0.00
29. Other Disbursements.....	15.00	45.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	13515.00	36545.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	13515.00	36545.00

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	7576.34	23991.62
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7576.34	23991.62
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

**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 6 / 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 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)
Advanced Medical Optics Inc Political Action Committee

Full Name (Last, First, Middle Initial) A. Anthony Amado		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006
Mailing Address 16 Quailbush Dr.		Transaction ID: SA11A1.5340
City State Zip Code Fairport NY 14450	Amount of Each Receipt this Period 178.21	
FEC ID number of contributing federal political committee. C		payroll deduction
Name of Employer AMO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Territory Manager Aggregate Year-to-Date ▼ 611.29	

Full Name (Last, First, Middle Initial) B. Sheree Aronson		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006
Mailing Address 24 Aguila Way		Transaction ID: SA11A1.5322
City State Zip Code Coto de Caza CA 92679	Amount of Each Receipt this Period 331.59	
FEC ID number of contributing federal political committee. C		payroll deduction
Name of Employer AMO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation VP Corp Comm. Aggregate Year-to-Date ▼ 947.40	

Full Name (Last, First, Middle Initial) C. George Bator		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006
Mailing Address 4 Aspen Way		Transaction ID: SA11A1.5341
City State Zip Code Thornwood NY 10594	Amount of Each Receipt this Period 87.34	
FEC ID number of contributing federal political committee. C		payroll deduction
Name of Employer AMO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Territory Mgr Aggregate Year-to-Date ▼ 221.16	

SUBTOTAL of Receipts This Page (optional) ▶	597.14
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 / 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Advanced Medical Optics Inc Political Action Committee

A. Full Name (Last, First, Middle Initial) Edward Blanco		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 103 Ripple Creek		Transaction ID: SA11A1.5342	
City State Zip Code San Antonio TX 78231		Amount of Each Receipt this Period 87.50	
FEC ID number of contributing federal political committee. C		payroll deduction	
Name of Employer Occupation AMO Territory Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

B. Full Name (Last, First, Middle Initial) Chris Calcaterra		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 6 Michener Ln.		Transaction ID: SA11A1.5344	
City State Zip Code Coto de Caza CA 92679		Amount of Each Receipt this Period 310.45	
FEC ID number of contributing federal political committee. C		payroll deduction	
Name of Employer Occupation Advanced Medical Optics VP, Sales & Marketing			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 881.87	

C. Full Name (Last, First, Middle Initial) Alan L. Cebrian		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 9245 Cadenza St.		Transaction ID: SA11A1.5346	
City State Zip Code Sacramento CA 95826		Amount of Each Receipt this Period 180.90	
FEC ID number of contributing federal political committee. C		payroll deduction	
Name of Employer Occupation AMO DM			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 462.38	

SUBTOTAL of Receipts This Page (optional) ▶	578.85
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 / 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Advanced Medical Optics Inc Political Action Committee

Full Name (Last, First, Middle Initial) A. Max H. Dansereau		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 5486 E. Mineral Ln.		Transaction ID: SA11A1.5349	
City Littleton	State CO	Zip Code 80122	Amount of Each Receipt this Period 87.50
FEC ID number of contributing federal political committee. C		payroll deduction	
Name of Employer AMO	Occupation Senior Territory Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. William G. Fox		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 16926 Windrow Dr.		Transaction ID: SA11A1.5351	
City Spring	State TX	Zip Code 77379	Amount of Each Receipt this Period 105.00
FEC ID number of contributing federal political committee. C		payroll deduction	
Name of Employer AMO	Occupation Senior Territory Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) C. James Francese		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 5574 E. Edinger Ave.		Transaction ID: SA11A1.5324	
City Anaheim	State CA	Zip Code 92807	Amount of Each Receipt this Period 212.38
FEC ID number of contributing federal political committee. C		payroll deduction	
Name of Employer Advanced Medical optics	Occupation Marketing Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 603.29		

SUBTOTAL of Receipts This Page (optional) ▶	404.88
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 / 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Advanced Medical Optics Inc Political Action Committee

A. Full Name (Last, First, Middle Initial) Grant W. Gelb		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 6553 W. Summerdale Cir.		Transaction ID: SA11A1.5353	
City Ypsilanti	State MI	Zip Code 48197	Amount of Each Receipt this Period 154.84
FEC ID number of contributing federal political committee. C		payroll deduction	
Name of Employer AMO	Occupation Equipment Specialist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 410.16		

B. Full Name (Last, First, Middle Initial) Curtis Grelle		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 10212 Leeward Blvd.		Transaction ID: SA11A1.5354	
City Indianapolis	State IN	Zip Code 46256	Amount of Each Receipt this Period 87.50
FEC ID number of contributing federal political committee. C		payroll deduction	
Name of Employer Advanced Medical Optics	Occupation Sr. Training Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

C. Full Name (Last, First, Middle Initial) Tom E. Grosskopf		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 22831 North 53rd St.		Transaction ID: SA11A1.5355	
City Phoenix	State AZ	Zip Code 85054	Amount of Each Receipt this Period 264.32
FEC ID number of contributing federal political committee. C		payroll deduction	
Name of Employer AMO	Occupation Vice President Sales		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.82		

SUBTOTAL of Receipts This Page (optional)	506.66
TOTAL This Period (last page this line number only)	(Empty box)

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 / 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Advanced Medical Optics Inc Political Action Committee

Full Name (Last, First, Middle Initial) A. Julie A. Hupfauer		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 13309 Odom Ct.		Transaction ID: SA11A1.5358	
City State Zip Code Cypress TX 77429	Amount of Each Receipt this Period 105.00		
FEC ID number of contributing federal political committee. C		payroll deduction	
Name of Employer AMO Occupation Manager	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. James V. Mazzo		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address P.O. Box 25162		Transaction ID: SA11A1.5326	
City State Zip Code Santa Ana CA 92799	Amount of Each Receipt this Period 350.00		
FEC ID number of contributing federal political committee. C		payroll deduction	
Name of Employer Advanced Medical Optics Occupation CEO	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Terrance McNulty		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 2725 E. 47th St.		Transaction ID: SA11A1.5362	
City State Zip Code Tulsa OK 74105	Amount of Each Receipt this Period 102.41		
FEC ID number of contributing federal political committee. C		payroll deduction	
Name of Employer Advanced Medical Optics Occupation Territory Manager	Aggregate Year-to-Date ▼ 298.70		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	557.41
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 / 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Advanced Medical Optics Inc Political Action Committee

Full Name (Last, First, Middle Initial) A. George W. Merrill		Date of Receipt M M / D D / Y Y Y Y Y 09 / 30 / 2006	
Mailing Address 294 Oak View Ct.		Transaction ID: SA11A1.5363	
City State Zip Code Auburn CA 95603	Amount of Each Receipt this Period 122.50		
FEC ID number of contributing federal political committee. C		payroll deduction	
Name of Employer Advanced Medical Optics, Inc.	Occupation Territory Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) B. Francine Meza		Date of Receipt M M / D D / Y Y Y Y Y 09 / 30 / 2006	
Mailing Address 32 Flores		Transaction ID: SA11A1.5327	
City State Zip Code Foothill Ranch CA 92610	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C		payroll deduction	
Name of Employer Advanced Medical Optics	Occupation VP Human Resources		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

Full Name (Last, First, Middle Initial) C. Sean M. Morrissey		Date of Receipt M M / D D / Y Y Y Y Y 09 / 30 / 2006	
Mailing Address 210 Goodings Trail		Transaction ID: SA11A1.5365	
City State Zip Code Baldwinsville NY 13027	Amount of Each Receipt this Period 178.14		
FEC ID number of contributing federal political committee. C		payroll deduction	
Name of Employer AMO	Occupation Equipment Specialist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 625.52		

SUBTOTAL of Receipts This Page (optional) ▶	450.64
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 12 / 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Advanced Medical Optics Inc Political Action Committee

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

Mailing Address 393 Broombridge Way

City State Zip Code
Marietta GA 30066

FEC ID number of contributing federal political committee. **C**

Name of Employer AMO Occupation Equipment Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: SA11A1.5366

Amount of Each Receipt this Period
87.50

payroll deduction

B. Full Name (Last, First, Middle Initial)
Jonathan Patton

Mailing Address 5220 W. 157th Pl.

City State Zip Code
Overland Park KS 66224

FEC ID number of contributing federal political committee. **C**

Name of Employer AMO Occupation Equipment Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1491.41

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: SA11A1.5368

Amount of Each Receipt this Period
454.36

payroll deduction

C. Full Name (Last, First, Middle Initial)
Alan H. Peck

Mailing Address 9 Kimberry Dr.

City State Zip Code
Brookfield CT 06804

FEC ID number of contributing federal political committee. **C**

Name of Employer Advanced Medical Optics Occupation Surgical Territory Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 578.45

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: SA11A1.5369

Amount of Each Receipt this Period
174.83

payroll deduction

SUBTOTAL of Receipts This Page (optional)	▶	716.69
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 / 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Advanced Medical Optics Inc Political Action Committee

Full Name (Last, First, Middle Initial) A. James B. Pritchard		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 5211 E. Helena		Transaction ID: SA11A1.5370	
City State Zip Code Scottsdale AZ 85254	Amount of Each Receipt this Period 87.50		
FEC ID number of contributing federal political committee. C		payroll deduction	
Name of Employer AMO Occupation Senior Territory Manager	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Paul W. Rockley		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 535 De Anza Dr.		Transaction ID: SA11A1.5329	
City State Zip Code Corona del Mar CA 92625	Amount of Each Receipt this Period 140.00		
FEC ID number of contributing federal political committee. C		payroll deduction	
Name of Employer Advanced Medical Optics Occupation Business Development	Aggregate Year-to-Date ▼ 400.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Kevin J. Shearer		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 4344 53rd Ave. NE		Transaction ID: SA11A1.5373	
City State Zip Code Seattle WA 98105	Amount of Each Receipt this Period 282.12		
FEC ID number of contributing federal political committee. C		payroll deduction	
Name of Employer AMO Occupation Senior Territory Manager	Aggregate Year-to-Date ▼ 1280.62		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	509.62
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 14 / 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Advanced Medical Optics Inc Political Action Committee

Full Name (Last, First, Middle Initial) A. Wayne A. Spencer		Date of Receipt M M / D D / Y Y Y Y Y 09 / 30 / 2006
Mailing Address 11894 SE Main Ln.		Transaction ID: SA11A1.5374
City Portland	State OR	Zip Code 97236
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 105.00
Name of Employer AMO	Occupation Senior Equipment Specialist	payroll deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Andris Stapars		Date of Receipt M M / D D / Y Y Y Y Y 09 / 30 / 2006
Mailing Address 2602 Freeman Ct.		Transaction ID: SA11A1.5331
City Southlake	State TX	Zip Code 76092
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 215.95
Name of Employer Advanced Medical Optics	Occupation Manager National Accounts	payroll deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 611.46	

Full Name (Last, First, Middle Initial) C. Dinamarie Stefani		Date of Receipt M M / D D / Y Y Y Y Y 09 / 30 / 2006
Mailing Address 25032 Via Del Rio		Transaction ID: SA11A1.5332
City Lake Fores	State CA	Zip Code 42630
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 87.50
Name of Employer Advanced Medical Optics, Inc.	Occupation Sr. QA Analyst	payroll deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	408.45
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 15 / 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Advanced Medical Optics Inc Political Action Committee

Full Name (Last, First, Middle Initial) A. Leeanne Swift		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006
Mailing Address 25315 Plantation Dr. NE		Transaction ID: SA11A1.5376
City State Zip Code Atlanta GA 30324	Amount of Each Receipt this Period 299.36	
FEC ID number of contributing federal political committee. C		payroll deduction
Name of Employer AMO	Occupation Regional Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 719.24	

Full Name (Last, First, Middle Initial) B. Nicholas Tarantino		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006
Mailing Address 19 Larkfield Ln.		Transaction ID: SA11A1.5334
City State Zip Code Laguna Niguel CA 92677	Amount of Each Receipt this Period 140.00	
FEC ID number of contributing federal political committee. C		payroll deduction
Name of Employer Advanced Medical Optics, Inc.	Occupation Director, Clinical R&D	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) C. Charles III Trenary		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006
Mailing Address 3 Flax		Transaction ID: SA11A1.5336
City State Zip Code Coto de Caza CA 92679	Amount of Each Receipt this Period 464.45	
FEC ID number of contributing federal political committee. C		payroll deduction
Name of Employer Advanced Medical Optics	Occupation President Americas	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1309.69	

SUBTOTAL of Receipts This Page (optional) ▶	903.81
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 16 / 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Advanced Medical Optics Inc Political Action Committee

A. Full Name (Last, First, Middle Initial)
Michael Tyson

Mailing Address 92 Circle Court

City Mission Viejo State CA Zip Code 92692

FEC ID number of contributing federal political committee. **C**

Name of Employer AMO Occupation Director Finance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2006

Transaction ID: SA11A1.5377

Amount of Each Receipt this Period
 175.00

payroll deduction

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

Mailing Address 13743 Bainwick Dr.

City Pickerton State OH Zip Code 43147

FEC ID number of contributing federal political committee. **C**

Name of Employer AMO Occupation Equipment Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 471.29

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2006

Transaction ID: SA11A1.5378

Amount of Each Receipt this Period
 152.15

payroll deduction

C. Full Name (Last, First, Middle Initial)
Vic Wildenrad

Mailing Address 2213 Pebble Beach Dr.

City Plainfield State IL Zip Code 60544

FEC ID number of contributing federal political committee. **C**

Name of Employer AMO Occupation Territory Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 434.50

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2006

Transaction ID: SA11A1.5379

Amount of Each Receipt this Period
 145.75

payroll deduction

SUBTOTAL of Receipts This Page (optional)	▶	472.90
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 / 20
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Advanced Medical Optics Inc Political Action Committee

A. Full Name (Last, First, Middle Initial)
Vicki L. Williams

Mailing Address 6403 Arbor Rose Ln.

City State Zip Code
Spring TX 77379

FEC ID number of contributing federal political committee. **C**

Name of Employer AMO Occupation Refractive Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.33

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: SA11A1.5380

Amount of Each Receipt this Period
70.00

payroll deduction

B. Full Name (Last, First, Middle Initial)
William H. Woodward

Mailing Address 1808 Pony Run Rd.

City State Zip Code
Raleigh NC 27615

FEC ID number of contributing federal political committee. **C**

Name of Employer AMO Occupation Regional Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
477.59

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: SA11A1.5381

Amount of Each Receipt this Period
213.32

payroll deduction

SUBTOTAL of Receipts This Page (optional)	▶	283.32
TOTAL This Period (last page this line number only)	▶	6390.37

**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)

PAGE 18 / 20

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Advanced Medical Optics Inc Political Action Committee

Full Name (Last, First, Middle Initial) A. Anna Eshoo for Congress		Transaction ID: SB23.5389 Date of Disbursement 09 / 27 / 2006
Mailing Address 555 Capitol Mall Suite 1425		Amount of Each Disbursement this Period 1000.00
City Sacramento State CA Zip Code 95814	Purpose of Disbursement contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 14	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. BRIAN BILBRAY FOR CONGRESS		Transaction ID: SB23.5386 Date of Disbursement 08 / 25 / 2006
Mailing Address 2466 Unicornio Street		Amount of Each Disbursement this Period 2500.00
City Carlsbad State CA Zip Code 92009	Purpose of Disbursement contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 50	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. COMMITTEE TO RE-ELECT LORETTA SANCHEZ		Transaction ID: SB23.5384 Date of Disbursement 08 / 09 / 2006
Mailing Address 601 S GLENOAKS BLVD. Suite 211		Amount of Each Disbursement this Period 5000.00
City BURBANK State CA Zip Code 91502	Purpose of Disbursement contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 47	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	8500.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 19 / 20

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Advanced Medical Optics Inc Political Action Committee

Full Name (Last, First, Middle Initial) A. CONGRESSMAN JOE BARTON COMMITTEE, THE		Transaction ID: SB23.5385 Date of Disbursement
Mailing Address P.O. Box 1444		<input type="text" value="08"/> / <input type="text" value="24"/> / <input type="text" value="2006"/>
City Ennis	State TX	Zip Code 75120
Purpose of Disbursement contribution	<input type="text" value="2000.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: TX	District: 06	

Full Name (Last, First, Middle Initial) B. CONGRESSMAN JOE BARTON COMMITTEE, THE		Transaction ID: SB23.5388 Date of Disbursement
Mailing Address P.O. Box 1444		<input type="text" value="09"/> / <input type="text" value="11"/> / <input type="text" value="2006"/>
City Ennis	State TX	Zip Code 75120
Purpose of Disbursement contribution	<input type="text" value="2000.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: TX	District: 06	

Full Name (Last, First, Middle Initial) C. VICTORY IN NOVEMBER ELECTION PAC (VINEPAC)		Transaction ID: SB23.5382 Date of Disbursement
Mailing Address 607 14th Street NW Suite 800		<input type="text" value="07"/> / <input type="text" value="28"/> / <input type="text" value="2006"/>
City Washington	State DC	Zip Code 20005
Purpose of Disbursement contribution	<input type="text" value="1000.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="5000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="13500.00"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 20 / 20

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Advanced Medical Optics Inc Political Action Committee

Full Name (Last, First, Middle Initial)

A. Comerica Bank

Mailing Address 611 Anton Blvd.

City Costa Mesa State CA Zip Code 92626-1904

Purpose of Disbursement
Bank Fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.5390

Date of Disbursement

/ /

Amount of Each Disbursement this Period

15.00

SUBTOTAL of Disbursements This Page (optional)

15.00

TOTAL This Period (last page this line number only)

15.00