

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 16 / 52

(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
13	14	15	16					

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NAME OF COMMITTEE (In Full)

American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)

Full Name (Last, First, Middle Initial) <b>A. Sanjay Gaei</b>			Date of Receipt M / D / Y 12 / 15 / 2004		
Mailing Address 5824 Wild Orange Gate			Transaction ID: 31018-51121157407761		
City	State	Zip Code	Amount of Each Receipt this Period		
Clarksville	MD	21029-1656	250.00		
FEC ID number of contributing federal political committee. <b>C</b>					
Name of Employer self		Occupation Ophthalmologist			
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			
Full Name (Last, First, Middle Initial) <b>B. Harold Goldfarb</b>			Date of Receipt M / D / Y 12 / 02 / 2004		
Mailing Address 501 N 17th Street Suite C			Transaction ID: BBY2V8331673		
City	State	Zip Code	Amount of Each Receipt this Period		
Allentown	PA	18104-5044	100.00		
FEC ID number of contributing federal political committee. <b>C</b>					
Name of Employer self		Occupation Ophthalmologist	Batch Total - PAC		
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00			
Full Name (Last, First, Middle Initial) <b>C. Daniel Greenberg</b>			Date of Receipt M / D / Y 12 / 06 / 2004		
Mailing Address 800 Austin Street Suite 258E			Transaction ID: BBY6T136430		
City	State	Zip Code	Amount of Each Receipt this Period		
Evanston	IL	60202-3439	250.00		
FEC ID number of contributing federal political committee. <b>C</b>					
Name of Employer self		Occupation Ophthalmologist	Batch Total - PAC		
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

SUBTOTAL of Receipts This Page (optional) ▶

600.00

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