

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (In full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
 American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

ADDRESS (number and street) 655 Beach Street
 Check if different than previously reported. (ACC) San Francisco CA 94109

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIPCODE

C00196246

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

4. TYPE OF REPORT (Choose One)	(a) Quarterly Reports:	(b) Monthly Report Due On:	Feb 20 (M2)	May 20 (M5)	Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
	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)	Mar 20 (M3) X Apr 20 (M4)	Jun 20 (M6)	Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)	Jan 31 (YE)
		(c) 12-Day PRE-Election Report for the:	Primary (12P) Convention (12C)	General (12G) Special (12G)	Runoff (12R)	
		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 05 01 2003 through 05 31 2003

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

Type or Print Name of Treasurer Carol Beatty, Treasurer

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

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

Office Use Only							
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SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name

American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

Report Covering the Period: From: ^M05 ^D01 ^Y2003 To: ^M05 ^D31 ^Y2003

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 ^Y 2003 ^M ^D		315892.39
(b) Cash on Hand at Beginning of Reporting Period	329177.57	
(c) Total Receipts (from Line 19)	10578.88	104239.19
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	339756.45	420131.58
<hr/>		
7. Total Disbursements (from Line 31)	70543.41	150918.54
<hr/>		
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	269213.04	269213.04
<hr/>		
9. Debts and Obligations owed TO the committee (itemize all on Schedule C and/or Schedule D)	0.00	
<hr/>		
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**

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Page 3

Write or Type Committee Name

American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

Report Covering the Period: From: ^M05 ^D01 ^Y2003 To: ^M05 ^D31 ^Y2003

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)	8795.00	
(ii) Unitemized	1707.50	
(iii) TOTAL (add Lines 11(a)(i) and (ii))	10502.50	103839.75
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5)	10502.50	103839.75
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	76.38	399.44
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))	10578.88	104239.19
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	10578.88	104239.19

DETAILED SUMMARY PAGE

of Disbursements

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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.....	1043.41	3718.54
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	1043.41	3718.54
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	66500.00	144500.00
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.....	1000.00	2700.00
(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))..... ▶	1000.00	2700.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share.....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds.....	0.00	0.00
(c) Total Federal Election ActMty (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))..	70543.41	150918.54
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(i) from Line 31).....	70543.41	150918.54

DETAILED SUMMARY PAGE
of Disbursements

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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)	10502.50	103839.75
34. Total Contribution Refunds (from Line 28(d))	1000.00	2700.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	9502.50	101139.75
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	1043.41	3716.54
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1043.41	3716.54

**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 / 28	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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)

Full Name (Last, First, Middle Initial) A. Robert Wells Bentley		Date of Receipt M / D / Y 05 / 21 / 2003
Mailing Address 1955 NW Northrup Avenue		Transaction ID: 0605200316C42610
City Portland	State OR	Zip Code 97209-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 365.00
Name of Employer self	Occupation Ophthalmologist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00	

Full Name (Last, First, Middle Initial) B. Evan Black		Date of Receipt M / D / Y 05 / 02 / 2003
Mailing Address Kresge Eye Institute 4717 St Antoine		Transaction ID: 0508200326C42570
City Detroit	State MI	Zip Code 48201-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer self	Occupation Ophthalmologist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Full Name (Last, First, Middle Initial) C. James Binkley		Date of Receipt M / D / Y 05 / 13 / 2003
Mailing Address Sta 302 23981 Calle De La Magdalena		Transaction ID: 0605200316C42581
City Laguna Hills	State CA	Zip Code 92653-3685
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 365.00
Name of Employer self	Occupation Ophthalmologist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00	

SUBTOTAL of Receipts This Page (optional)	980.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 28	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

Full Name (Last, First, Middle Initial) A. Brian Michael Brown		Date of Receipt M / D / Y 05 / 21 / 2003
Mailing Address 11411 Brookshire Ave Ste 402		Transaction ID: 0605200316C42600
City Downey	State CA	Zip Code 90241-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer self	Occupation Ophthalmologist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Louis Cantor		Date of Receipt M / D / Y 05 / 21 / 2003
Mailing Address 702 Rotary Circle		Transaction ID: 0605200316C42606
City Indianapolis	State IN	Zip Code 46202-5175
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 365.00
Name of Employer self	Occupation Ophthalmologist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00	

Full Name (Last, First, Middle Initial) C. Jimmy Carter		Date of Receipt M / D / Y 05 / 30 / 2003
Mailing Address 1806 Fairview Ave		Transaction ID: 0605200316C42615
City Dothan	State AL	Zip Code 36301-5028
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer self	Occupation Ophthalmologist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	1365.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 8 / 28	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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

Full Name (Last, First, Middle Initial) A. Edward Chemy		Date of Receipt M / D / Y 05 / 21 / 2003
Mailing Address 8413 Edinburgh Dr		Transaction ID: 0605200316C42604
City Nashville	State TN	Zip Code 37221-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 365.00
Name of Employer self	Occupation Ophthalmologist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00	

Full Name (Last, First, Middle Initial) B. Gary Cowan		Date of Receipt M / D / Y 05 / 02 / 2003
Mailing Address Ste 320D 1350 S Main St		Transaction ID: 0508200326C42569
City Fort Worth	State TX	Zip Code 76104-7669
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer self	Occupation Ophthalmologist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. James Davidson		Date of Receipt M / D / Y 05 / 21 / 2003
Mailing Address Ste 310 1820 Fullerton Ave		Transaction ID: 0605200316C42609
City Corona	State CA	Zip Code 92881-5175
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer self	Occupation Ophthalmologist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts TN's Page (optional)	▶	365.00
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 / 28	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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

Full Name (Last, First, Middle Initial) A. Anna Luisa Di Lorenzo		Date of Receipt M / D / Y 05 / 02 / 2003
Mailing Address Sta B 2877 Crooks Rd		Transaction ID: 0509200326C42580
City Troy	State MI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer self	Occupation Ophthalmologist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Anna Luisa Di Lorenzo		Date of Receipt M / D / Y 05 / 02 / 2003
Mailing Address Sta B 2877 Crooks Rd		Transaction ID: 0509200326C42578
City Troy	State MI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer self	Occupation Ophthalmologist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Full Name (Last, First, Middle Initial) C. Michael Drinnen		Date of Receipt M / D / Y 05 / 02 / 2003
Mailing Address 101 S San Mateo Dr Ste 310		Transaction ID: 0509200326C42568
City San Mateo	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 125.00
Name of Employer self	Occupation Ophthalmologist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

SUBTOTAL of Receipts This Page (optional)	625.00
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 / 28	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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

Full Name (Last, First, Middle Initial) A. Rafael Galardo		Date of Receipt M / D / Y 05 / 02 / 2003
Mailing Address PD Box 36215B		Transaction ID: 0509200326C42571
City San Juan	State PR	Zip Code 00936-2158
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer self	Occupation Ophthalmologist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Jay Galst		Date of Receipt M / D / Y 05 / 21 / 2003
Mailing Address 30 E 60th St		Transaction ID: 0605200316C42607
City New York	State NY	Zip Code 10022-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer self	Occupation Ophthalmologist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Samuel Gelbert		Date of Receipt M / D / Y 05 / 08 / 2003
Mailing Address 490 Post St Ste 640		Transaction ID: 0605200316C42586
City San Francisco	State CA	Zip Code 94102-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer self	Occupation Ophthalmologist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	300.00
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 / 28	
	<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)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

Full Name (Last, First, Middle Initial) A. Robert Graham		Date of Receipt M / D / Y 05 / 08 / 2003
Mailing Address 1021 West Armitage		Transaction ID: 0605200316C42589
City Chicago	State IL	Zip Code 60614-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 125.00
Name of Employer self	Occupation Ophthalmologist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Richard Grostern		Date of Receipt M / D / Y 05 / 30 / 2003
Mailing Address 1725 W Harrison St Ste 91B		Transaction ID: 0605200316C42619
City Chicago	State IL	Zip Code 60612-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer self	Occupation Ophthalmologist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Peter Hamner		Date of Receipt M / D / Y 05 / 21 / 2003
Mailing Address 295 Washington Ave		Transaction ID: 0605200316C42805
City Hamden	State CT	Zip Code 06518-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 365.00
Name of Employer self	Occupation Ophthalmologist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00	

SUBTOTAL of Receipts This Page (optional)	▶	990.00
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 12 / 28	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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

Full Name (Last, First, Middle Initial) A. Philip Horowitz		Date of Receipt M / D / Y 05 / 30 / 2003
Mailing Address Blason Plaza 509 South Lenola Rd Suite 11		Transaction ID: 0605200316C42618
City Moorestown	State NJ	Zip Code 08057-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 365.00
Name of Employer self	Occupation Ophthalmologist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00	

Full Name (Last, First, Middle Initial) B. David Lightman		Date of Receipt M / D / Y 05 / 02 / 2003
Mailing Address 1705 Warren Ave Ste 302		Transaction ID: 0509200326C42563
City Williamsport	State PA	Zip Code 17701-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 125.00
Name of Employer self	Occupation Ophthalmologist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Malcolm Mazow		Date of Receipt M / D / Y 05 / 02 / 2003
Mailing Address 2855 Gramercy		Transaction ID: 0509200328C42567
City Houston	State TX	Zip Code 77025-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 125.00
Name of Employer self	Occupation Ophthalmologist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

SUBTOTAL of Receipts This Page (optional)	615.00
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 / 28	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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

Full Name (Last, First, Middle Initial) A. Stephen Powell		Date of Receipt M / D / Y 05 / 30 / 2003
Mailing Address White Birch Towers 1255 Pineview Dr		Transaction ID: 0605200316C42616
City Morgantown	State WV	Zip Code 26505-2713
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 365.00
Name of Employer self	Occupation Ophthalmologist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00	

Full Name (Last, First, Middle Initial) B. John Sheppard		Date of Receipt M / D / Y 05 / 02 / 2003
Mailing Address Medical Tower Ste 403 400 Gresham Dr		Transaction ID: 0508200326C42561
City Norfolk	State VA	Zip Code 23507-1801
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 125.00
Name of Employer self	Occupation Ophthalmologist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. David Silbert		Date of Receipt M / D / Y 05 / 02 / 2003
Mailing Address Family Eye Group 2110 Harrisburg Pike		Transaction ID: 0508200326C42566
City Lancaster	State PA	Zip Code 17601-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 125.00
Name of Employer self	Occupation Ophthalmologist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	615.00
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 14 / 28	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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

Full Name (Last, First, Middle Initial) A. Derek Sprunger		Date of Receipt M / D / Y 05 / 02 / 2003
Mailing Address Midwest Eye Inst 201 Pennsylvania Pky		Transaction ID: 0509200326C42577
City Indianapolis	State IN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer self	Occupation Ophthalmologist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Michael Steiner		Date of Receipt M / D / Y 05 / 02 / 2003
Mailing Address 8015 SE 28th St		Transaction ID: 0509200326C42562
City Mercer Island	State WA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 125.00
Name of Employer self	Occupation Ophthalmologist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Gwen Sterna		Date of Receipt M / D / Y 05 / 13 / 2003
Mailing Address 1425 Portland Ave		Transaction ID: D605200316C42564
City Rochester	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 365.00
Name of Employer self	Occupation Ophthalmologist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00	

SUBTOTAL of Receipts This Page (optional)	690.00
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 15 / 28	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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

Full Name (Last, First, Middle Initial) A. S Allen Stocks		Date of Receipt M / D / Y 05 / 02 / 2003
Mailing Address 133D Interstate Pky		Transaction ID: 0509200326C42574
City Augusta	State GA	Zip Code 30909-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer self	Occupation Ophthalmologist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. George Waring		Date of Receipt M / D / Y 05 / 13 / 2003
Mailing Address Emory Vision 4170 Ashford Dunwoody Rd Ste 300		Transaction ID: 0605200316C42563
City Atlanta	State GA	Zip Code 30319-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer self	Occupation Ophthalmologist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Barry Welch		Date of Receipt M / D / Y 05 / 02 / 2003
Mailing Address 721 Sheridan Ave Ste 280		Transaction ID: 0509200326C42575
City Cody	State WY	Zip Code 82414-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer self	Occupation Ophthalmologist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	1000.00
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 / 28	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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

Full Name (Last, First, Middle Initial) A. Maynard Wheeler		Date of Receipt M / D / Y 05 / 21 / 2008
Mailing Address PD Box 538 10 Sandy Brae		Transaction ID: 0605200316C42602
City Grantham	State NH	
Zip Code 03753-0538		Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer self	Occupation Ophthalmologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	250.00
TOTAL This Period (last page this line number only)	▶	8795.00

**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 17 / 28	
	<input type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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

Full Name (Last, First, Middle Initial) A. Union Bank		Date of Receipt
Mailing Address PD Box 24512		M / D / Y 05 / 31 / 2003
City	State	Zip Code
San Francisco	CA	94124-0512
FEC ID number of contributing federal political committee.		Transaction ID: 0605200316C42622
Name of Employer		Amount of Each Receipt this Period
Occupation		76.38
Receipt For: Primary General Other (specify) ▼		Other Receipt
Aggregate Year-to-Date ▼		
		399.44

SUBTOTAL of Receipts This Page (optional)	▶	76.38
TOTAL This Period (last page this line number only)	▶	76.38

**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 / 28

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

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

Full Name (Last, First, Middle Initial) A. Union Bank		Transaction ID: D8052D0317E3448	
Mailing Address PO Box 24512		Date of Disbursement 05 / 31 / 2003	
City San Francisco	State CA	Zip Code 94124-0512	Amount of Each Disbursement this Period 1043.41
Purpose of Disbursement UB CKING ACCT EXP 5/03		Category/ Type	
Candidate Name			UB CKING ACCT EXP 5/03
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)	▶	1043.41
TOTAL This Period (last page this line number only)	▶	1043.41

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

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

Full Name (Last, First, Middle Initial) A. Becerra For Congress		Transaction ID: D805200317E3419 Date of Disbursement 05 / 14 / 2003	
Mailing Address PO Box 261060		Amount of Each Disbursement this Period 1000.00	
City Los Angeles	State CA	Zip Code 90026-0878	Category/ Type HOUSE CA-31 PRIMARY
Purpose of Disbursement HOUSE CA-31 PRIMARY		Candidate Name	
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. Citizens For Bunning		Transaction ID: D805200317E3441 Date of Disbursement 05 / 14 / 2003	
Mailing Address 1717 Dixie Highway, Suite 180		Amount of Each Disbursement this Period 1000.00	
City Covington	State KY	Zip Code 41011-	Category/ Type SENATE KY PRIMARY
Purpose of Disbursement SENATE KY PRIMARY		Candidate Name	
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. LEGPAC		Transaction ID: D805200317E3431 Date of Disbursement 05 / 14 / 2003	
Mailing Address 38 Ivy Street SE		Amount of Each Disbursement this Period 1000.00	
City Washington	State DC	Zip Code 20003-	Category/ Type LEADERSHIP PAC
Purpose of Disbursement LEADERSHIP PAC		Candidate Name	
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	3000.00
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 20 / 28			
	<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b		

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

Full Name (Last, First, Middle Initial) A. Cardoza For Congress		Transaction ID: D106200448E3576 Date of Disbursement 05 / 14 / 2003	
Mailing Address 555 Capitol Mall Suite 1425		Amount of Each Disbursement this Period 1000.00	
City Sacramento	State CA	Zip Code 95814	Category/ Type HOUSE CA-18
Purpose of Disbursement HOUSE CA-18			
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. Crane For Congress Committee		Transaction ID: D805200317E3421 Date of Disbursement 05 / 14 / 2003	
Mailing Address PO Box 8534		Amount of Each Disbursement this Period 1000.00	
City Rolling Meadows	State IL	Zip Code 60008-8534	Category/ Type HOUSE IL-6 PRIMARY
Purpose of Disbursement HOUSE IL-6 PRIMARY			
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. Democratic Congl Cmpgn Committee		Transaction ID: D805200317E3447 Date of Disbursement 05 / 14 / 2003	
Mailing Address 430 S Capital St SE		Amount of Each Disbursement this Period 5000.00	
City Washington	State DC	Zip Code 20003-4080	Category/ Type CONGRESSIONAL CAMPAIGN CO- NTRIBUTION
Purpose of Disbursement CONGRESSIONAL CAMPAIGN CONTRIBUTION			
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

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

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

Full Name (Last, First, Middle Initial) A. Democratic National Committee		Transaction ID: D805200317E3445 Date of Disbursement 05 / 14 / 2003	
Mailing Address 430 S Capitol St SE			
City Washington	State DC	Zip Code 20003-4080	Amount of Each Disbursement this Period 5000.00
Purpose of Disbursement CAMPAIGN CONTRIBUTION		Category/ Type	CAMPAIGN CONTRIBUTION
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. Democratic Senatorial Campaign Comm		Transaction ID: D805200317E3445 Date of Disbursement 05 / 14 / 2003	
Mailing Address 120 Maryland Ave NE			
City Washington	State DC	Zip Code 20002-	Amount of Each Disbursement this Period 5000.00
Purpose of Disbursement SENATE CAMPAIGN CONTRIBUTION		Category/ Type	SENATE CAMPAIGN CONTRIBUTION
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. Fletcher For Congress		Transaction ID: D805200317E3445 Date of Disbursement 05 / 14 / 2003	
Mailing Address PO Box 4703			
City Lexington	State KY	Zip Code 40544-4703	Amount of Each Disbursement this Period 2500.00
Purpose of Disbursement HOUSE KY-6 PRIMARY		Category/ Type	HOUSE KY-6 PRIMARY
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	12500.00
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 22 / 28	
	<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b

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

Full Name (Last, First, Middle Initial) A. Gingrey For Congress		Transaction ID: D805200317E3425 Date of Disbursement 05 / 14 / 2003	
Mailing Address PO Box U		Amount of Each Disbursement this Period 1000.00	
City Marietta	State GA	Zip Code 30060-	Category/ Type HOUSE GA-11 PRIMARY
Purpose of Disbursement HOUSE GA-11 PRIMARY		Candidate Name	
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. Judd Gregg Committee		Transaction ID: D805200317E3438 Date of Disbursement 05 / 14 / 2003	
Mailing Address PO Box 1812		Amount of Each Disbursement this Period 2500.00	
City Concord	State NH	Zip Code 03302-	Category/ Type SENATE NH PRIMARY
Purpose of Disbursement SENATE NH PRIMARY		Candidate Name	
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. Kompac		Transaction ID: D805200317E3424 Date of Disbursement 05 / 14 / 2003	
Mailing Address PO Box 20209		Amount of Each Disbursement this Period 5000.00	
City Alexandria	State VA	Zip Code 22320-1209	Category/ Type LEADERSHIP PAC
Purpose of Disbursement LEADERSHIP PAC		Candidate Name	
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

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

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

Full Name (Last, First, Middle Initial) A. Friends of Congressman Tim Holden		Transaction ID: D805200317E3435 Date of Disbursement 05 / 14 / 2003	
Mailing Address 18 N Second St PO Box 37		Amount of Each Disbursement this Period 1000.00	
City Saint Clair	State PA	Zip Code 17970-	Category/ Type HOUSE PA-17 PRIMARY
Purpose of Disbursement HOUSE PA-17 PRIMARY		Candidate Name	
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. Hulshof For Congress		Transaction ID: D805200317E3430 Date of Disbursement 05 / 14 / 2003	
Mailing Address PO Box 1621		Amount of Each Disbursement this Period 1000.00	
City Columbia	State MO	Zip Code 65205-1621	Category/ Type HOUSE MO-9 PRIMARY
Purpose of Disbursement HOUSE MO-9 PRIMARY		Candidate Name	
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. Friends of Sam Johnson		Transaction ID: D805200317E3422 Date of Disbursement 05 / 14 / 2003	
Mailing Address PO Box 860096		Amount of Each Disbursement this Period 1000.00	
City Plano	State TX	Zip Code 75086-0096	Category/ Type HOUSE TX-3 PRIMARY
Purpose of Disbursement HOUSE TX-3 PRIMARY		Candidate Name	
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	3000.00
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 24 / 28	
	<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b

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

Full Name (Last, First, Middle Initial) A. Sen. Blanche Lincoln		Transaction ID: D805200317E3428 Date of Disbursement 05 / 14 / 2003	
Mailing Address PO Box 3197			
City Little Rock	State AR	Zip Code 72203-	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement SENATE AR PRIMARY		Category/ Type	SENATE AR PRIMARY
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. Lucas For Congress		Transaction ID: D805200317E3436 Date of Disbursement 05 / 14 / 2003	
Mailing Address PO Box 17344			
City Ft Mitchell	State KY	Zip Code 41017-0344	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement HOUSE KY-6 PRIMARY		Category/ Type	HOUSE KY-6 PRIMARY
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. Bob Matsui For Congress Committee		Transaction ID: D805200317E3429 Date of Disbursement 05 / 14 / 2003	
Mailing Address 8885 Wilshire Blvd, Suite 220			
City Beverly Hills	State CA	Zip Code 90211-	Amount of Each Disbursement this Period 5000.00
Purpose of Disbursement HOUSE CA-5 PRIMARY		Category/ Type	HOUSE CA-5 PRIMARY
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

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

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

A. Full Name (Last, First, Middle Initial) Cmte for the Preservation of Capitalis		Transaction ID: D805200317E3432 Date of Disbursement 05 / 14 / 2003	
Mailing Address PO Box 22614			
City Alexandria	State VA	Zip Code 22304-	Amount of Each Disbursement this Period 5000.00
Purpose of Disbursement LEADERSHIP PAC		Category/ Type	LEADERSHIP PAC
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

B. Full Name (Last, First, Middle Initial) Murtha For Congress Committee		Transaction ID: D805200317E3434 Date of Disbursement 05 / 14 / 2003	
Mailing Address 551 Main St BT Financial Plaza, Suite 220			
City Johnstown	State PA	Zip Code 15001-	Amount of Each Disbursement this Period 2000.00
Purpose of Disbursement HOUSE PA-12 PRIMARY		Category/ Type	HOUSE PA-12 PRIMARY
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

C. Full Name (Last, First, Middle Initial) National Republican Congl Comm		Transaction ID: D805200317E3443 Date of Disbursement 05 / 14 / 2003	
Mailing Address 320 1st St SE			
City Washington	State DC	Zip Code 20003-1826	Amount of Each Disbursement this Period 5000.00
Purpose of Disbursement CONGRESSIONAL CAMPAIGN CONTRIBUTION		Category/ Type	CONGRESSIONAL CAMPAIGN CO- NTRIBUTION
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	12000.00
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 26 / 28			
	<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b		

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

A. Full Name (Last, First, Middle Initial) Natl Republican Senatorial Campn Comm			Transaction ID: D805200317E3442 Date of Disbursement 05 / 14 / 2003		
Mailing Address Ronald Reagan Republican Center 425 2nd St NE			Amount of Each Disbursement this Period 5000.00		
City Washington	State DC	Zip Code 20002-			
Purpose of Disbursement SENATE CAMPAIGN CONTRIBUTION		Category/ Type	SENATE CAMPAIGN CONTRIBUTION		
Candidate Name					
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼				
State: District					

B. Full Name (Last, First, Middle Initial) Jim Ramstad Volunteer Committee			Transaction ID: D805200317E3427 Date of Disbursement 05 / 14 / 2003		
Mailing Address 1809 Plymouth Rd, Suite 310			Amount of Each Disbursement this Period 1000.00		
City Hopkins	State MN	Zip Code 55305-1080			
Purpose of Disbursement HOUSE MN-3 PRIMARY		Category/ Type	HOUSE MN-3 PRIMARY		
Candidate Name					
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼				
State: District					

C. Full Name (Last, First, Middle Initial) Republican National Committee			Transaction ID: D805200317E3444 Date of Disbursement 05 / 14 / 2003		
Mailing Address 310-1st Street Se			Amount of Each Disbursement this Period 5000.00		
City Washington	State DC	Zip Code 20003-			
Purpose of Disbursement CAMPAIGN CONTRIBUTION		Category/ Type	CAMPAIGN CONTRIBUTION		
Candidate Name					
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼				
State: District					

SUBTOTAL of Disbursements This Page (optional)	▶	11000.00
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 27 / 28
	<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b

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

Full Name (Last, First, Middle Initial) A. Santorum 2006		Transaction ID: D805200317E3440 Date of Disbursement 05 / 14 / 2003	
Mailing Address One Tower Bridge, Suite 1440		Amount of Each Disbursement this Period 1000.00	
City Conshohocken	State PA	Zip Code 19426-	Category/ Type SENATE PA PRIMARY
Purpose of Disbursement SENATE PA PRIMARY		Candidate Name	
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. David Scott For Congress		Transaction ID: D805200317E3437 Date of Disbursement 05 / 14 / 2003	
Mailing Address 162 Hurt St NE		Amount of Each Disbursement this Period 1000.00	
City Atlanta	State GA	Zip Code 30307-2538	Category/ Type HOUSE GA-13 PRIMARY
Purpose of Disbursement HOUSE GA-13 PRIMARY		Candidate Name	
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. The Billy Tauzin Congressional Committ		Transaction ID: D805200317E3423 Date of Disbursement 05 / 14 / 2003	
Mailing Address PO Box 2268		Amount of Each Disbursement this Period 2500.00	
City Houma	State LA	Zip Code 70361-	Category/ Type HOUSE LA-3 PRIMARY
Purpose of Disbursement HOUSE LA-3 PRIMARY		Candidate Name	
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	4500.00
TOTAL This Period (last page this line number only)	▶	68500.00

**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)

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<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 checked="" 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)
American Academy of Ophthalmology, Inc Political Committee (OPHTHPAC)

Full Name (Last, First, Middle Initial) A. Richard Shugarman		Transaction ID: D8052D0317E3418 Date of Disbursement 05 / 13 / 2003
Mailing Address Apt 1001 40D N Flagler Dr		Amount of Each Disbursement this Period 1000.00
City West Palm Beach	State FL	
Zip Code 33401-4302	Category/ Type	
Purpose of Disbursement Refund of Contribution To refund duplca	Candidate Name	
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	
State: District		

SUBTOTAL of Disbursements This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	1000.00