2017
ACTION ITEMS
STANDING RULES OF THE 2017 COA HOUSE OF DELEGATES

The 2017 COA House of Delegates must agree and adopt procedures for discussing resolutions and bylaws changes. The following are suggested for appropriate House procedures:

General House of Delegates Operating Guidelines

1. Please be on time and have your delegates available for the policy resolutions, bylaws amendments and other agendized items discussion.

2. Personal communications devices must be silenced and not used when the House is in session.

3. The sergeants-at-arms have the duty to function as “pages” in transmitting messages to persons in the restricted delegates’ seating area from the “gallery” and other outside sources.

4. There will be a minimum of two (2) sergeants-at-arms available in the House of Delegates for relocating resource volunteer doctors of optometry. (Refer to Addendum A for charge to sergeants-at-arms.)

5. The COA president or president-elect will be available to the House of Delegates as a resource. He or she will be seated at the reserved COA leaders’ table.

6. Only credentialed delegates or alternates are seated in the society-designated sections of the House of Delegates meeting. Non-delegate members are seated in the area designated as the “gallery”; however, there will be reserved tables available for the COA Board of Trustees, executive staff, press representatives, distinguished guests and invited guests.

7. The COA president appoints a credentials committee, which also serves as the election teller committee. The chair of the committee shall serve as elections teller. This committee should not include any members of the current year’s COA Nominating Committee.

8. To facilitate credential matters, the credentials committee chairperson should be positioned at the entrance to the delegate’s designated seating area and near the sergeant-at-arms. Also, the speaker of the House will announce the “Credentials Status Report.”

9. Election campaigning for COA elected positions should be planned and implemented so that it is not disruptive or distracting for the delegates in session. This rule is to be publicized to candidates for office.

10. Non-delegates have ample opportunities to submit their input on House of Delegates business and are encouraged to take advantage of those opportunities. Delegates are elected in sufficient time prior to the House of
Delegates meeting; consequently, COA members may contact any or all of them for input. Societies should hold a general membership meeting prior to the House of Delegates meeting for delegate information and education, as well as for discussion of issues with the general membership. Delegates receive House of Delegates information early and are thus aware of many issues that will be addressed to be able to seek input from their society membership. Another opportunity exists during the House meeting when any member may contact his or her own, or any other, delegation through the sergeant-at-arms to offer input. Any delegate may request special permission of the speaker of the House, and/or the House, for a non-delegate to speak. Any delegate may request a postponement of any issue for purposes such as caucusing. Only members of a particular society may attend that society’s caucus unless specifically invited by that society.

11. Scheduled committee meetings shall take place outside of the time that the House of Delegates is meeting.

Submission and Consideration of Policy Resolutions and Bylaws Amendments

1. Policy resolutions and bylaws amendments submitted by the published deadline will be submitted to a reference committee prior to the House of Delegates meeting. The role of the reference committee at this point is to review the proposed resolutions and bylaws amendments for factual content; to determine if they conflict with existing COA policies, bylaws, or state or federal rules; and propose language changes if necessary to clarify the meaning or intent of the proposal. The reference committees shall recommend to the speaker the prioritization of resolutions and bylaw amendments submitted for discussion during the first session of the House. Notwithstanding the foregoing, the committee may not change opinions or perceptions expressed, or the intent, of the proposal.

2. Policy resolutions not submitted to COA’s office by the published deadline may be submitted from the floor for consideration at the first session of the House of Delegates with the approval of two-thirds (2/3) of the delegates seated.

3. With the exception of commendation resolutions, all policy resolutions submitted on the floor and approved for consideration by two-thirds (2/3) of the delegates seated that are not resolved on the House floor will be assigned to a reference committee for consideration and subsequent report to the House at the last session.

4. The author or representative of the society or board proposing a policy resolution or bylaws amendment will be expected to speak to the rationale for their proposal on the floor of the House of Delegates and before the reference committee.
5. Each proposed bylaws amendment and policy resolution will be presented to the House of Delegates during the first session and prioritized as recommended by the reference committees and either discussed on the House floor or referred to open hearings of the reference committees.

6. As a delegate, please keep in mind that proposed policy resolutions are policy statements of COA, and bylaws amendments represent the rules and procedures for how COA will operate and be governed. Each generally remains in force long after the House of Delegates meeting at which they are adopted. Therefore, it is important to consider the long-term implications and consequences of any resolution or bylaws amendment being considered.

7. If you wish to speak, stand for recognition by the speaker, and then state your name and society. Your time must be limited to 2 (two) minutes at the microphone. Please make your comments succinct.

8. If someone else makes a point which you were going to make, don’t stand up and say the same thing - this is a waste of time.

9. Remember, you are voting on the intent of the resolution or bylaws amendment. If you agree or disagree with the intent, say so - but, if your concern is with only a word or two, say so, but make it brief. Always state whether you are speaking “for” or “against.”

10. **Reference Committees:** The speaker shall appoint reference committees comprised of three (3) or more delegates or alternate delegates to study and report to the House of Delegates on business that comes before it. The reference committee will review the proposals prior to the House of Delegates meeting and, if referred to committee, take public testimony during an open hearing on policy resolutions, bylaws amendments and other matters referred to it by the House of Delegates.

   a. The reference committee will work with the author(s) and opponents of a policy resolution or bylaws amendment in an attempt to find a mutually agreeable proposal.

   b. Following the open hearing, the reference committee will meet in closed session to consider the testimony and other relevant information and prepare its report.

   c. Reference committees shall recommend to the House of Delegates the adoption, rejection, amendment, postpone indefinitely, referral or substitution of all recommendations, bylaws amendments and policy resolutions which have been assigned to them.

   d. The report should be delivered to staff for typing as soon as it is finished. No changes will be made without the permission of the reference committee chair who will be available for consultation. Upon completion, the report will be reviewed and signed by all committee members. One
copy of each reference committee report shall be made available to each
designated society delegation leader. Contents of the reference
committee reports are considered confidential until they are distributed to
all delegates.

e. The chair or a designated committee member is to present the report to
the House.

11. When presenting policy resolutions for a vote on the House floor during the last
session, only the “RESOLVED” portion of the resolutions should be read out
loud; however, resolutions newly introduced to the House should be read in
their entirety.

Election Procedures

1. The following procedures will be employed for COA Board of Trustees, speaker
and vice speaker elections:

a. Elections for any office or position shall take place with all candidates for
that office or position collectively offered as a group for voting purposes.

i. The COA Nominating Committee report shall be scheduled and
nominations from the floor are requested during the first session
of the House. During the last session, candidate presentations
and elections shall be scheduled.

ii. When the House’s session schedule does not adhere to the
above format, then the speaker of the House should make
modifications to conform to the above as closely as possible.

(It is recognized that alternative options for candidate
nominations, presentations and elections may be decided upon
prior to the COA House of Delegates meeting, and may require
changes in the House’s time schedule and programming.)

b. Voting will follow the close of nominations for each office or position with
the results announced prior to proceeding to the next office or position.
Losing candidates for a first office or position may be nominated upon a
motion and second for a subsequent office or position prior to the vote
for that office or position.

c. Uncontested elections may be held by voice vote.

d. In the event of a contested election, a secret ballot, voice vote, or roll call
vote by societies is allowed.

e. If a roll call voted is conducted, each society delegation’s leader, e.g.,
society president, shall announce the society votes by roll call. The vote
by roll call of societies shall be projected and tabulated live. However,
the final election result will not be official until the COA House of Delegates Election Teller Committee has tabulated and confirmed the vote.

f. If a secret ballot vote is conducted, votes cast for contested offices will be recorded by secret society ballots and tabulated by the election teller committee. The final election result will not be official until the COA House of Delegates Election Tellers Committee has tabulated and confirmed the vote.

g. For individual offices and positions, each delegate may cast one vote for the nominee of his or her choice. Where multiple vacancies exist for one position, each society will have a total number of votes equal to their number of seated delegates multiplied by the number of vacancies to be filled. However, no more than the number of votes equal to the society’s delegate strength may be cast for any one candidate. There will be no cumulative voting.

h. Delegates cannot be required to cast their votes if they do not so choose. Each delegate has the right and obligation to cast his or her vote for each candidate or to abstain from casting a vote.

i. When there are three or more nominees and no one receives a majority of the votes cast, i.e., 50 percent plus one of the delegates voting, a second ballot is ordered with all nominees listed as on the first ballot. If no one receives the majority vote on the second ballot, a third ballot is taken. Balloting continues until one of the nominees receives the majority of the votes cast.

j. Candidates receiving a majority of the total number of delegates voting are elected. If on any ballot more than the required number of candidates for available positions receives a majority, the required number of candidates with the most votes is elected. If fewer than the total number of candidates required to fill all positions are elected on any ballot, subsequent ballots will be taken among the remaining candidates until all positions are filled.

k. For both individual and multiple positions and offices, following each ballot and after the election teller committee has certified the results of the ballot, the number of votes received by each candidate will be announced. Thus, the delegates will know which nominees were stronger and which were weaker on the prior ballot.

m. Delegates will be informed of the election procedures prior to the beginning of the election process.
ADDENDUM A

Charge to Sergeants-at-Arms

The sergeants-at-arms are to be properly and distinctively identified.

The sergeants-at-arms have the duty to function as “pages” in transmitting messages to persons in the restricted delegates’ seating area from the “gallery” and other outside sources.

The sergeants-at-arms will maintain a bulletin board in the rear of the House of Delegates (depending upon physical arrangements) to be utilized to post non-urgent messages for delegates, etc.

The sergeants-at-arms will monitor the quality and utilization of audio-visuals, including the floor microphones in the House of Delegates.

The sergeants-at-arms are responsible for controlling the access to the House of Delegates room and the delegates seating area.

The sergeants-at-arms will assist in monitoring orderly access to and line-up in the credentialing desk area.

The sergeants-at-arms are responsible for maintaining order in the House of Delegates meeting room (including the gallery) and adjacent areas. Maintaining order includes not only decorum of occupants, but also the noise level, lighting, temperature, etc.

The sergeants-at-arms are responsible for enforcement of restricted seating areas within the House to include the reserved tables for the COA board, guests, staff, press, etc.

The sergeants-at-arms are responsible for notifying the speaker of the House of the arrival of distinguished guests, speakers and visitors. The sergeants-at-arms are to direct and escort such dignitaries to their seats in the House. The COA staff House of Delegates coordinator is to provide the sergeants-at-arms with a daily listing of expected dignitaries.

The sergeants-at-arms are responsible for the distribution of handout materials and the collection of same within the House.

The sergeants-at-arms are responsible for the placement, retention and retrieval of all society and other table signs, posters, panel speaker signs, lectern signs, and COA House of Delegates wall banner in the House meeting room.

The sergeants-at-arms are responsible for designating the caucus area(s) in which society delegates and other groups can convene.

The sergeants-at-arms are responsible for monitoring the numerical strength of the delegates, ensuring the proper number for a quorum of the House.
First Day of the House of Delegates – February 26, 2016

A breakfast for COA society presidents and presidents-elect was held from 7:30 a.m. to 8:30 a.m. where procedures for the COA House of Delegates meeting were reviewed.

First Session of the House of Delegates

I. Call to Order

Dr. Fred Dubick, 2016 speaker of the COA House of Delegates (HOD), called the first session to order at approximately 9:00 a.m.

II. Parade of Societies

The parade of society flags followed the call to order.

III. Pledge of Allegiance

Dr. Richard Hom, COA trustee, led the delegates in the Pledge of Allegiance.

IV. Presentation of Optometric Oath

Dr. Elizabeth Hoppe, dean, College of Optometry at Western University of Health Sciences, led the delegates in the Optometric Oath.

V. Credentials Teller Report

Dr. Cindy Wang, credentials teller, reported that there were 137 credentialed and present delegates out of a possible 196.

The speaker determined that there was a quorum present.

There being no objection, the speaker accepted the Credentials Teller's report as presented and the delegates were seated.

Motion: To seat the delegates from the societies that were unable to get their delegates credentialed prior to the deadline for submission of society delegations.
Moved by: Dr. David Jones, Redwood Empire Optometric Society Seconded.
Motion passed unanimously.

The speaker asked for the adoption of the 2016 COA House of Delegates standing rules as presented.
Motion: To adopt the COA House of Delegates proposed standing rules as presented.
Moved by: Dr. Amy Jo Calder, HOD Rules Committee chair
Seconded.
Motion passed unanimously.

The speaker asked for the adoption of the 2016 COA House of Delegates agenda as presented.

There being no objection, the speaker accepted the 2016 House of Delegates agenda as presented.

VI. Delegate Briefing

The speaker of the house introduced Lorenzo Cuesta, COA's professional parliamentarian, who delivered the delegate briefing on Robert's Rules of Order.

VII. Approval of 2015 COA House of Delegates Meeting Minutes

COA Secretary-Treasurer Dr. Sage Hider presented the 2015 COA House of Delegates meeting minutes for approval.

There being no objection, the speaker accepted the 2015 House of Delegates meeting minutes as presented.

VIII. State of the Association

The speaker introduced COA President Dr. Barry Weissman who delivered the State of the Association address.

IX. COA Nominating Committee Report

The speaker introduced Dr. Movses D'Janbatian, chair of the 2015 COA Nominating Committee, to present the committee's report.

Dr. D'Janbatian presented the 2015 COA Nominating Committee-recommended candidates for the 2016 COA Board of Trustees (BOT) and 2016 COA House of Delegates leadership:

President: Dr. Stevin Minie
President-elect: Dr. Steven Sage Hider
Secretary-Treasurer: Dr. Ron Seger
Trustee: Dr. Jason Tu
Trustee: Dr. Ida Chung
Trustee: Dr. Amanda Dexter
2016 Speaker of the House: Dr. John Rosten
2016 Vice Speaker of the House: Dr. Fred Dubick
Immediate Past-President: Dr. Barry Weissman

Dr. D'Janbatian reported that the following doctors would continue to serve on the COA BOT for 2016:

Trustee: Dr. Jan Cooper
Trustee: Dr. Ranjeet S. Bajwa
Trustee: Dr. Richard Hom

The speaker called for additional nominations from the floor.
Nomination: Dr. Mark Nakano for COA trustee
Moved by: Dr. Rob Omoto, COA Sacramento Valley Optometric Society
Seconded
Passed

X. Secretary-Treasurer’s Report, Presentation of Audit Report and Approval of 2016-2017 Proposed Budgets

A. Dr. Hider, COA secretary-treasurer, presented the 2014 COA audit report.
B. Dr. Hider presented the COA Treasurer's Report for fiscal year 2015. Michael Guglielmo, presented Mercer Health and Benefits Insurance 2015 financial support to the COA.
C. Dr. Joseph Mallinger, president and CEO of Vision West, made a presentation representing VWI’s contributions to COA from 1988 to present day totaling $170,439.
D. Dr. Mallinger presented Vision West’s contribution to COA for 2015 and announced VWI entered into another five year contract with COA.
E. Dr. Mallinger announced VWI’s proposal to offer practice management education as a member benefit to COA members.
C. Dr. Hider presented the proposed 2016 and 2017 COA operating budgets.

Discussion took place regarding the proposed budget.

The speaker asked for the adoption of the 2016-2017 proposed budgets as presented.

There being no objection, the 2016 and 2017 COA operating budgets were adopted as presented.

XI. Presentation by Senator Ed Hernandez, OD

Dr. David Redman introduced Senator Ed Hernandez, OD, who addressed the delegation highlighting his activities as chair of the Senate Health Committee. He reported that his Senate Bill 951 established California’s essential health benefit package, stemming from the federal Affordable Care Act, which included comprehensive vision benefits and materials for children. He stated there are 440,000 new enrollees in Covered California, California health benefit exchange. He observed that challenges in health care include lack of primary care physicians, access problems and fewer physicians taking Medi-Cal. Additionally, he said challenges for optometry include access to medical and IPA panels, reimbursement, internet refractions and online optical materials. He stated that optometry is positioned to play a critical role as an entry point for care into the health care system and must be prepared to compete in the market place.

Senator Hernandez announced his intent to run for the office of California lieutenant governor in 2018.

XII. Last Call for Proposed Policy Resolutions

The speaker asked if there were any new proposed policy resolutions to be presented. There were none.

XIII. Report to Speaker: Recommendations for Treatment of COA HOD Past Policy Resolutions

Dr. Page Yarwood, chair of the COA of the Speaker's Task Force on COA Past Policy Resolution Review, introduced the members of the task force: Drs. Tony Carnevali, Larry Thal, Steve Minie and Sage Hider. He reminded delegates that the 2014 COA HOD adopted Policy Resolution (PR)
6 that brought back into force resolutions previously “deleted” by the HOD. He stated that the 2015 HOD speaker instructed the task force to review these resolutions “to make recommendations to delete and place in HOD archives, maintain as ongoing policy, maintain as an active resolution, or other recommendation as determined. As part of that review, he reported that the task force reviewed COA’s records, including COA HOD minutes and “past policy resolution” documents created over the years, to assemble policy resolutions that were no longer a part of the “official record” as they had been “deleted” or determined to be “completed.” Based upon its review, he said the task force identified four recommendations for consideration by the COA HOD.

Motion: That the report titled “Recommendations for Treatment of COA HOD Past Policy Resolutions,” including the three proposed policy resolutions embedded in the report, submitted by the Speaker’s Task Force on COA Past Policy Resolution Review, be approved in its entirety as amended.
Moved by: Dr. Steve Minie COA president-elect
Seconded.
Motion Passed. The “Recommendations for Treatment of COA HOD Past Policy Resolutions” report is made a part of these minutes as Attachment A, and its Policy Resolution Numbers One, Two and Three are made a part of these minutes as Attachments B-D, respectively.

Motion: To adopt Proposed Policy Resolution Number Four, relating to review of 2011 and earlier resolutions, as presented by the BOT.
Moved By: Dr. Minie, COA president-elect
Seconded.
Motion passed. Policy Resolution Number Four is made a part of these minutes as Attachment E.

XIV. AOA Report

AOA trustee Dr. Ron Benner presented an update on American Optometric Association activities and member benefit programs. He urged all ODs to register for AOA MORE, a free benefit to AOA members that is a private, secure optometric registry that systematically integrates patient data from multiple electronic health record (“EHR”) systems and facilitates secondary uses of the data. Dr. Benner said the California State PAC has done very well and is first in the nation with total dollars raised. He thanked AOA PAC Chairman Dr. Fred Dubick for his 2015 fundraising efforts.

XV. Health Care Update

COA Health Care Delivery Systems (HCDS) Committee Chair Dr. Karen Meng reported on committee activities and accomplishments. She discussed the rapidly evolving health care marketplace as managed care plans continue to grow across the state. She said HCDS Committee members and COA’s attorneys met with Jennifer Kent, the director of state Department of Health Care Services, to urge inclusion of ODs in Medi-Cal managed care plans and Ms. Kent agreed to help. In an effort to reverse the exclusion of optometry from Medicare panels, AOA has requested written examples of California ODs unfairly denied from these panels. She said the committee focus for 2016 is on optometry gaining access to health care panels and to better integrate optometry in California’s unique health care market.

XVI. In Memoriam Ceremony

Dr. Sage Hider, COA secretary-treasurer, presented the “In Memoriam” ceremony recognizing those member doctors of optometry who had passed away since the 2015 COA House of Delegates meeting. They are as follows:
The COA HOD observed a moment of silence in honor of these doctors of optometry.

XVII. Announcements

The speaker introduced Jim McGrann, president and CEO of VSP Global.

Mr. McGrann reported on VSP’s pilot project with CVS in Maryland. He also discussed the VSP Premiere Program and stated ODs participating in the program saw a 26 percent increase in new patients. Mr. McGrann state that VSP would like to collaborate with COA to develop a white paper to help educate benefit managers on the cost- and outcome-effectiveness of optometric care in a medical setting.

XVIII. Recess

At approximately 12:55 p.m. the speaker recessed the First Session of the COA House of Delegates meeting.

Second Session of the 2016 House of Delegates
February 27, 2016
Newport Beach Marriott
Newport Beach, CA

XIX. Call to Order

The Second Session of the 2016 COA House of Delegates was called to order at 9:00 a.m. by the Speaker of the House, Dr. Fred Dubick.

XX. Credentials Teller Report

Dr. Cindy Wang, credentials teller, reported that there were 145 credentialed and present delegates out of a possible 196.

The speaker determined that there was a quorum present.

Motion: That the roll of delegates submitted be the official roll of the 2016 COA House of Delegates meeting.
Moved by: Dr. Wang, credentials teller
The speaker welcomed students from the three California schools and colleges of optometry.

**XXI. COA Legislation-Regulation Committee Report**

The speaker introduced Dr. David Redman, chair of the COA Legislation-Regulation Committee. Dr. Redman discussed the changing environment of the practice of optometry. He reported that legislative accomplishments in 2015 include the enactment of Assembly Bill 684 which forbade opticians and optical retailers from employing doctors of optometry and established statutory guidelines for a lease relationship in its place, and the defeat of Assembly Bill 789, which would have outlawed uniform pricing policies (UPP). He reviewed the progress with of COA-sponsored Senate Bill 622, which would expand the optometric scope of practice, and said it was awaiting a hearing in the Assembly Business and Professions Committee.

**XXII. Sensitive Issues Political Update**

Motion: To take the HOD into executive session, allowing all AOA members, optometric students and COA staff to stay in the room.  
Moved by: Dr. Fred Dubick  
Seconded.  
Motion passed

The HOD went into executive session.

The HOD came out of executive session. There were no motions considered in executive session.

**XXIII. Candidate Presentations/Questions & Answers**

Drs. Ida Chung, Amanda Dexter, Mark Nakano and Jason Tu, candidates for trustee, each gave a three minute presentation followed by questions from the delegates.

The speaker called 2015 Nominating Committee chairman, Dr. Movses D’Janbatian, to the podium to report on the committee’s candidate selection process.

**XXIV. Local Society Caucus**

The speaker reviewed the local society caucus and voting procedures and called for the HOD to caucus for approximately 20 minutes.

**XXV. Elections**

The speaker called for a voice acclamation for the uncontested elections of the following positions:

- President (one-year term): Dr. Stevin Minie  
- President-elect (one-year term): Dr. Sage Hider  
- Secretary-Treasurer (two-year term): Dr. Ron Seger  
- Trustee (one-year term): Dr. Jason Tu  
- Speaker of the 2016 COA House of Delegates: Dr. John Rosten  
- Vice Speaker of the 2016 COA House of Delegates: Dr. Fred Dubick

By voice acclamation, the HOD elected the above candidates to the positions noted. The speaker announced that Dr. Barry Weissman would serve as immediate past president.
There was a roll call vote for the contested elections for the two two-year trustee positions among the candidates Drs. Ida Chung, Amanda Dexter and Mark Nakano.

Dr. Amanda Dexter was elected for a two-year term as trustee.

There was a second roll call vote for the contested elections for the remaining one two-year trustee position among the candidates Drs. Ida Chung and Mark Nakano.

Dr. Ida Chung was elected for a two-year term as trustee.

The speaker invited the new and returning 2016 COA Board of Trustees and the 2016 HOD speaker to the stage to be recognized:

President: Dr. Stevin Minie  
President-elect: Dr. Sage Hider  
Secretary-Treasurer: Dr. Ron Seger  
Immediate Past President: Dr. Barry Weissman  
Trustees:  
Dr. Ranjeet Bajwa  
Dr. Ida Chung  
Dr. Janet Cooper  
Dr. Amanda Dexter  
Dr. Richard Hom  
Dr. Jason Tu  

Speaker of the 2016 COA House of Delegates: Dr. John Rosten

XXVI. Installation of 2016 Officers/Trustees

Speaker Dubick invited AOA Trustee Dr. Ron Benner to the podium to conduct the installation of the COA officers and trustees. The 2016 officers and trustees took the oath of office.

XXVII. Passing of the Gavel

Immediate Past President Dr. Barry Weissman conducted the Passing of the Gavel Ceremony. The following COA past presidents participated in the ceremony:

Dr. Larry Creasey  
Dr. Ren Anelle  
Dr. Bob Gordon  
Dr. Tony Carnevali  
Dr. Joseph Mallinger  
Dr. Bill Smith  
Dr. Dawn Miller  
Dr. Scott Daly  
Dr. Larry Thal  
Dr. John Larcabal  
Dr. David Redman  
Dr. Hilary Hawthorne  
Dr. Harue Marsden  
Dr. Movses D’Janbatian  
Dr. Fred Dubick  
Dr. John Rosten  
Dr. Barry Weissman
XXVIII. President’s Address

Dr. Steve Minie, newly elected president of the California Optometric Association, delivered his presidential inaugural address.

XXIX. Unfinished Business/New Business

Speaker Dubick invited delegates to present any new or unfinished business. There was none.

XXX. Volunteer Recognition

A. Dr. John Rosten presented the COA Past President’s pin to Dr. Weissman.
B. On behalf of COA, Dr. Dubick presented a 2016 House of Delegates commendation resolution to Dr. Barry Weissman. In addition, Congresswoman Karen Bass honored Dr. Weissman with a commendation for his service to COA.
C. Dr. Sharlene Gee presented the COA Los Angeles County Optometric Society gift to Dr. Weissman.
D. Immediate Past President Dr. Barry Weissman presented a commendation to Dr. Fred Dubick from Congressman Brad Sherman for his service as speaker of the house and Commendation Resolution #1 from the COA Board of Trustees for his service to COA.

MOTION: That the 2016 House of Delegates unanimously commend Dr. Fred Dubick for his service to COA and advocacy advancing COA and the optometric profession.

Moved and seconded.
Motion passed unanimously.

E. Speaker Dubick presented a commendation from Congressman Brad Sherman to Dr. Steve Minie for becoming president of COA.
F. Speaker Dubick presented a commendation from Congressman John Garamendi to Dr. John Rosten for his service to COA.
G. Speaker Dubick presented Dr. Steve Langsford with a commendation from Congresswoman Julia Brownley recognizing his service to COA and Commendation Resolution #2 from the COA Board of Trustees.

MOTION: That the 2016 House of Delegates unanimously commend Dr. Steve Langsford for his service to COA and advocacy advancing COA and the optometric profession.

Moved and seconded.
Motion passed unanimously.

H. Speaker of the House Dr. Fred Dubick recognized the following COA committee volunteers with a presidential citation award:
   • Dr. Chris Gee, 2015 chair of the COA Education and Clinical Practice Committee
   • Dr. Sage Hider, 2015 chair of the COA Finance Committee
   • Dr. Karin Meng, 2015 chair of the COA Health Care Delivery Systems Committee
   • Dr. Isabell Choi, 2015 chair of the COA Membership Committee
   • Dr. David Ardaya, 2015 chair of the COA Communications Committee
   • Dr. Brent Chinn, 2015 chair of the COA Sponsored Services Committee
   • Dr. David Redman, 2015 chair of the COA Legislation-Regulation Committee
   • Dr. Jennifer Che, 2015 chair of the COA Low Vision Rehabilitation Section

I. Speaker of the House Dubick acknowledged the following 2016 COA HOD meeting corporate sponsors for their continued and generous support:
   • Vision West
   • VSP
J. Speaker Dubick recognized and thanked COA House of Delegate committee members and COA staff.

XXXI. Announcements

Drs. Mark Galvan and John Larcabal presented proposed Commendation Resolution #3 for Drs. Richard Hoppe and Ren Anelle in recognition of their contributions to the success of the COA.

MOTION: That the 2016 House of Delegates unanimously commend and thank Drs. Richard Hoppe and Ren Anelle for their contributions to the financial success and health of the COA and a copy of the commendation resolution be displayed at the COA office.
Moved and seconded.
Motion passed unanimously.

Drs. Galvan and Larcabal presented plaques to Dr. Richard Hoppe and Dr. Ren Anelle in appreciation of starting Vision West.

XXXII. Change of Speakers

2016 Speaker of the House Dr. Dubick officially passed the gavel to Dr. John Rosten as speaker of the 2017 COA House of Delegates.

XXXIII. Adjournment Sine Die

Dr. John Rosten, speaker of the 2017 COA House of Delegates, adjourned the meeting of the 2016 COA House of Delegates at approximately 1:30 p.m.

Minutes prepared by:

Laurel O’Leary
COA Executive Assistant

Minutes attested to and submitted by:

Dr. Ron Seger
COA Secretary-Treasurer
To: Speaker, COA House of Delegates

From: Page Yarwood, OD, MS, FAAO, Chair, Speaker’s Task Force on COA Past Policy Resolution Review

Date: December 21, 2015

Subject: Recommendations for Treatment of COA HOD Past Policy Resolutions

The Speaker’s Task Force on COA Past Policy Resolution Review is pleased to present its recommendations for the treatment of COA House of Delegates (HOD)-adopted past policy resolutions as directed by the 2015 COA HOD speaker. In addition to me as chair, the speaker’s appointees to this task force, who brought to the review a wealth of COA HOD history and policy knowledge, were:

- Tony Carnevali, OD, 1991 COA president
- Lawrence Thal, OD, 2003-04 COA president
- Stevin Minie, OD, COA president-elect
- Sage Hider, OD, COA secretary-treasurer

In summary, the task force is recommending that new a policy resolution be adopted by the COA HOD that defines an active resolution, standing policy and archived resolution. In addition, it recommends that specified past policy resolutions be designated as active, standing policy or archived. In some instances, the task force also recommends amendment to certain past policy resolutions. Additionally, the task force recommends updating COA policy on children’s vision and equitable Medi-Cal reimbursement for doctors of optometry.

Background

At the 2014 COA HOD meeting, delegates adopted policy resolution 6 that brought back into force resolutions previously “deleted” by the HOD. This action was taken in response to COA legal counsel’s determination that policy resolutions that the HOD had voted to “delete” were no longer in force. Additionally, there were questions as to policy resolution record-keeping over the years that inadvertently might not have been conducted in a consistent manner reflective of the intent of HOD in all cases.

In a subsequent review of the policy resolutions newly brought back as COA policy, it appeared that for a variety of reasons many were no longer applicable. As a result, Dr. Movses D’Janbatian, the 2015 COA HOD speaker, appointed this task force review these resolutions “to make recommendations to delete and place in HOD archives, maintain as ongoing policy, maintain as an active resolution, or other recommendation as determined” for presentation at the 2016 COA HOD meeting.

Review Process
Over COA’s history, hundreds policy resolutions have been adopted by the HOD. The task force reviewed COA’s records, including COA HOD minutes and “past policy resolution” documents created over the years, to assemble policy resolutions that were no longer a part of the “official record” as they had been “deleted” or determined to be “completed.” Each of these identified policy resolutions was reviewed by the task force to determine their appropriate standing as COA policy.

**Recommendations**

Based upon its review, the task force has identified four recommendations as set forth below for consideration by the COA HOD.

**Recommendation 1:** During the course of its review, the task force found that the COA HOD did not have in place formal policy resolution definitions, be they designated to be actively implemented or pursued, ongoing policy or rescinded. In addition, the task force determined that there was not a formal mechanism to document and store in an organized manner policy resolutions adopted by the COA HOD. The task force concluded, and recommends, in the interest of effective and efficient operations of COA at all levels, that a new policy resolution be adopted by the COA HOD that defines the status of all policy resolutions adopted by the COA HOD and that creates mechanisms to maintain these policy statements in an organized manner that is transparent and accessible to all COA members and other stakeholders as appropriate. The proposed policy resolution is set forth below in the addendum to this report under “Recommendation 1.”

**Recommendation 2:** In reviewing past policy resolutions adopted by the COA HOD that had been “deleted” or determined “completed,” the task force found that specified resolutions should continue as active, be designated as standing policy or rescinded and placed in archives. Therefore, the task force recommends that these past resolutions be designated as active, standing policy or archived using the guidelines set forth below:

1. Designate as an **Active** policy resolution either as written or proposed to be amended. This means the resolution reflects the COA policy as adopted by the COA HOD and that the resolution should be actively implemented or pursued by COA.
2. Designate as a **standing policy**. This means that the resolution has been implemented, completed or achieved and has been determined to reflect an ongoing matter which continues to reflect COA policy.
3. Designate to be placed in a **COA Policy Resolution Archive**. This means the resolution was determined to have been implemented or replaced by another resolution and is no longer applicable or reflective of COA policy.

The recommended designation of past policy resolutions are set forth below in the addendum to this report under “Recommendation 2.”

**Recommendation 3:** Dating back to 1964, the COA HOD has enacted numerous policy resolutions advocating the early detection of vision and eye problems in children. The task force recommends that the COA HOD consider a new policy resolution that combines and updates the many resolutions adopted over the years to succinctly state COA policy on this matter in one place. The proposed policy resolution is set forth below in the addendum to this report under “Recommendation 3.”

**Recommendation 4:** Virtually throughout COA’s history, the association has worked to bring equitable reimbursement by Medi-Cal to doctors of optometry for services rendered. In pursuing that goal, the COA HOD has adopted over the years two policy resolutions, i.e., 1995 Policy Resolution 9 and 1996 Policy Resolution 15. The task force recommends that the COA HOD consider a new policy resolution that combines and updates these resolutions to clearly state COA
policy on this matter in one place. The proposed policy resolution is set forth below in the addendum to this report under “Recommendation 4.”

Conclusion

We thank 2015 COA HOD Speaker Movses D’Janbatian for the opportunity to conduct this important COA policy resolution review and urge the 2016 COA HOD to adopt this report as presented.

ADDENDUM

Recommendation 1

Proposed Policy Resolution Number One
to the 2016 House of Delegates

COA Policy Resolutions: Definitions and Retention

Proposed by the COA House of Delegates

WHEREAS, in the course of its century-plus history, the governing body currently called the California Optometric Association (COA) House of Delegates (HOD) has been exclusively empowered and is responsible for establishing COA’s official views and positions on all issues deemed important to the California optometric profession, as well as to set membership dues and assessments, along with assigning specific directions to the COA Board of Trustees and COA committees, through the use of policy resolutions; and,

WHEREAS, of the hundreds of policy resolutions adopted over the years by the COA HOD, many have a direct impact on the day-to-day operations of COA, including, but not limited to, budgets; legislative and regulatory activity; third-party payer engagement; education programs; and, communications, public relations and public affairs activity; and,

WHEREAS, in exercising its authority and responsibility, the COA HOD does not have in place formal policy resolution definitions, be they designated to be actively implemented or pursued, ongoing policy or rescinded; and,

WHEREAS, since the COA HOD voted to eliminate the COA Codified Policy Manual wherein policy resolutions adopted by the COA HOD were documented, there currently is not in place a cohesive, formal mechanism to document and store in an organized manner policy resolutions adopted by the COA HOD, be they actively pursued, ongoing policy or rescinded; and,

WHEREAS, it is in the interest for the effective and efficient operations of COA at all levels that the rich history of COA governance through policy resolutions adopted by the COA HOD be defined and maintained in an organized manner that is transparent and accessible to all COA members and other stakeholders as deemed appropriate; now, therefore be it

RESOLVED, that the COA House of Delegates (HOD), in an effort to clearly set forth the designation of policy resolutions adopted so as to better guide the governance and operation of COA, and to maintain those policy resolutions in an organized manner that is transparent to all members and other stakeholders as deemed appropriate, enacts the following definitions of policy resolutions and the mechanisms for their documentation and storage:
1. **Active**: A policy resolution that represents the policy of COA as adopted by the COA HOD and in which its intent or mandate is being actively implemented or pursued by COA. These resolutions shall be kept in a record called "COA Active Policy Resolutions."

2. **Standing Policy**: An active policy resolution that has been implemented, completed or achieved, and has been determined to reflect an ongoing matter, which the COA HOD determines continues to be policy of COA. These resolutions shall be kept in a record called "COA Standing Policies," which shall replace the "COA HOD Resolution Implementation Record" created by Policy Resolution 6 in 2013.

3. **Archived**: An active or standing policy resolution that has been implemented, completed, achieved or replaced that the COA HOD determines is no longer applicable or representative of COA policy. These resolutions shall be kept in a record called the "COA Policy Resolution Archive."

And, be it further

RESOLVED, that active, standing policy and archived resolutions be subject to review as COA societies and the COA Board of Trustees deem necessary in accordance with the procedures set forth in 2013 Policy Resolution 6, relating to review of policy resolutions; and be it further

RESOLVED, that active, standing policy and archived resolutions be made accessible to COA members and other stakeholders as determined appropriate.

**Recommendation 2**

Adopt the classification of past policy resolutions, as presented or recommended to be amended, as either active, standing policy or archived as set forth below.

The resolutions listed below contain the following information:
- Original year of adoption
- Policy resolution number
- Year the COA HOD "deleted" the resolution, if known (in some cases, while the policy resolution was found, the task force could not locate a record showing the date it was deleted).
- Title of resolution
- The “resolved” portion of the resolution
- The last known recommendation pertaining to the resolution reported to the COA HOD, if known (in some cases, while the policy resolution was found, the task force could not locate a record containing the recommendation last reported to the COA HOD).
- The reason for the recommendation by the task force, i.e., “2015 Recommendation.”

### Active Policy Resolutions

<table>
<thead>
<tr>
<th>Year</th>
<th>Resolution Number</th>
<th>Original Year</th>
<th>Deleted Year</th>
<th>Title of Resolution</th>
<th>Resolution</th>
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RESOLVED, that the 1973 House of Delegates of the California Optometric Association request that the California Optometric Association continue to make every effort to insure that freedom of choice of health care practitioners is an integral part of all health care delivery systems.

2015 Recommendation: As this policy goal is still relevant and not fully achieved relative to third-party payers, it is recommended that it be retained as an Active Policy Resolution. (See 1990 PR#A-3.)

1975 PR#A-8 Originally Deleted 2009 Third Party Health Care Programs

RESOLVED, That optometric vision care be included in all third party health care programs; and be it

RESOLVED further, That optometric vision care include the full scope of the practice of optometry.

December 2007 Status: See PR#5 from the 2002 House of Delegates.

2015 Recommendation: As access to all third-party panels by doctors of optometry has yet to be achieved, and patients’ access to full scope optometry through all third-party payers is not available, it is recommended that this resolution be retained as an Active Policy Resolution.

1982 PR#A-3 Originally Deleted 2007 Corporate Practice

RESOLVED, That the Board of Trustees of the California Optometric Association, in alliance and conjunction with other associations, develop a program engage in all endeavors necessary to appeal to the public and other stakeholders to prevent changes in California law that would allow lay control of health care practices in this state.

December 2006 Status: Implemented. California law currently requires that health care practices be owned by licensed professionals; the Moscone-Knox Professional Corporations Act prohibits unlicensed individuals or shareholders to exercise majority control in a health care corporation. Health care in California is delivered through private practitioners, clinics, or other licensed entities.

2015 Recommendation: Restricting ownership and control of health care practices to licensees continues to be a public policy goal of COA. It is recommended to amend the resolution to be broader in applicability as set forth above and retained as an Active Policy Resolution.

1987 PR#A-9 Originally Deleted 2003 Senior Screening Evaluation Guidelines

RESOLVED, that the COA seek to promote educating the elderly on the importance of a complete visual examination; and be it further

RESOLVED, that the COA encourages the schools of optometry or other appropriate research entities to develop a standardized screening evaluation technique specifically designed for the elderly.

2015 Recommendation: COA’s policy is to further the availability of comprehensive visual examinations for seniors (as well as other population demographics). At the same time, it does not support screenings as they are limited in scope. Further, the mandate of this resolution has not been completed. Therefore, it is recommended that this resolution be amended as presented and be retained as an Active Policy Resolution.

1990 PR#A-3 Originally Deleted 2007 Freedom of Choice Laws

RESOLVED, That the California Optometric Association continue to seek legislation to strengthen existing freedom of choice laws in California; and be it
RESOLVED further, That the California Optometric Association encourage the American Optometric Association to continue to seek federal legislation to give optometry true freedom of choice laws.

December 2006 Status: Ongoing. Current law requires that health plans in California which receive public monies, in whole or in part, allow patients the ability to choose either an OD or OMD as their eye care professional. Legislation to sharpen enforcement of current California antidiscrimination laws sponsored by COA and other provider organizations has been unsuccessful due to strong, organized opposition from for-profit health plans and others. Both the Legislation and Regulation Committee and the Health Care Services Delivery Committee have determined that a better short-term strategy for OD access and inclusion is through either negotiation directly with or litigation against California health care plans. The Legislation and Regulation Committee continues to support pro-provider legislation sponsored by others but sees sponsorship as unwise, given the likelihood of failure; moreover, giving COA a higher profile and presence in legislative and regulatory health care coverage reform debates and working to define ODs as primary care “gatekeepers” will assure access and equal treatment sooner. Recommendation: Delete.

2015 Recommendation: The mandate to ensure freedom of choice laws for consumers are enacted or broadened in California and at federal level is still a worthy goal. It is recommended that it be retained as an Active Policy Resolution. (See 1973 PR#A-11.)

1991 PR#12 Clarification Of State Board Policy Regarding Non-Traditional Patient-Doctor Settings

RESOLVED, that the California Optometric Association’s Board of Trustees take the necessary steps needed to bring about a clarification of the official policy of the California State Board of Optometry concerning the opportunity to provide care in non-traditional settings; and be it

RESOLVED, further, that the California Optometric Association’s Board of Trustees take the necessary and appropriate steps to insure that the patients in such settings have access to optometric care.

2015 Recommendation: Non-traditional patient-doctor settings and the State Board of Optometry’s official policy is a continuing issue, e.g., mobile clinics. It is therefore recommended that this resolution be made an Active Policy Resolution.

1992 PR#13 CPR Certification

RESOLVED, that the House of Delegates recommends the COA Legislative Committee pursue, at the appropriate time, legislation mandating optometrists to maintain a current CPR certificate.

2015 Recommendation: Previously, there was a regulation that mandated CPR certification and, as a result, accomplished this resolution. However, that regulation was later repealed. Currently, the State Board of Optometry gives CE credit for CPR. Additionally, the COA-sponsored scope of practice bill requires CPR certification for advanced procedures certification. Therefore, it is recommended that this resolution be made an Active Policy Resolution.

1993 PR 2 CPR Certification

RESOLVED, that the California Optometric Association Board of Trustees encourages all members to maintain current certification in procedures to cardiopulmonary resuscitation.
2015 Recommendation: Doctors maintaining current certification in CPR is even more important as we seek to expand scope of practice. It is therefore recommended that this resolution be made an Active Policy Resolution.

1996 PR#13 Optician Filling of Outdated Prescriptions

RESOLVED, that the California Optometric Association take appropriate steps to inform the general public and appropriate state agencies including the Medical Board of California State Board of Optometry as the licensing and regulatory agency for dispensing opticians, and the Pharmacy Board of California, as the licensing and regulatory body governing pharmacists in the State of California, of the danger inherent in the filling of expired prescriptions and to take appropriate steps to insure that their licensees adhere to the expiration date contained in ophthalmic prescriptions.

2015 Recommendation: The problem of dispensing opticians filling expired prescriptions continues to exist, despite current law. Further, the passage in 2015 of Assembly Bill 684 (Chapter 405) transferred the regulation of dispensing opticians to the State Board of Optometry. Therefore, it is recommended that this resolution be amended to reflect the new regulatory oversight of opticians and be maintained as an Active Policy Resolution.

2002 PR#5 Third Party Pay

RESOLVED, that the California Optometric Association aggressively encourage third party payers to reimburse optometrist or patients for the enhanced level of optometric eye care, and be it further

RESOLVED, that the California Optometric Association accomplish this through negotiation, the judicial process, legislation or any other feasible avenues.

2015 Recommendation: As access to all third-party panels by doctors of optometry has yet to be achieved, and patients’ access to full scope optometry through all third-party payers, e.g., glaucoma treatment, is not available, it is recommended that this resolution be retained as an Active Policy Resolution.

2004 PR#6 Originally Deleted 2009 Educator Member- AOA Bylaws

RESOLVED, that upon successful passage of COA Bylaws Amendment Number Four to the 2004 House of Delegates that the COA Board of Trustees seek the following change in Article 1, Membership, Section 1 E of AOA Bylaws:

“An optometrist is considered an “educator” if he or she is primarily engaged in school-related activities such as teaching, research, direct and indirect patient care within the institution, and/or administration at a University or College in the United States. Such institutions may be either an Optometry School or College accredited or pre-accredited by the Accreditation Council on Optometric Education, or an equivalent institution of higher learning. An optometrist, certified annually by a school or college for purposes of this membership classification determination as being at least one-half (1/2) full-time equivalent, shall be eligible for “optometric educator” membership in this Association.

December 2008 Status: Complete.

2015 Recommendation: In 2012, the AOA HOD revised extensively the bylaws defining various membership categories, including an “educator” member. However, the revised definition did not recognize as qualified for this category those doctors of optometry who worked for “an equivalent institution of higher learning.” COA has continued to advocate for this change, most recently in
2013-14 through the AOA Faculty Relations Committee. Therefore, it is recommended to retain the resolution as an Active Policy Resolution.

2004 PR#10 Originally Deleted 2011 Chair for an Optometric Clinician/Scientist at the David Geffen School of Medicine at UCLA

RESOLVED, that the 2004 California Optometric Association House of Delegates wishes to go on record in support of the successful creation of the position of faculty level Chair for an Optometric Clinician/Scientist to enhance research and educational activities in vision science at the Jules Stein Eye Institute and Department of Ophthalmology at the David Geffen School of Medicine at UCLA.

December 2010 Status: Ongoing.

2015 Recommendation: As this goal has not been achieved, it is recommended to retain the resolution as an Active Policy Resolution.

Standing Policy

1975 PR#A-13 Originally Deleted 2007 Distribution of Congress Resolutions

RESOLVED, that the COA Resolutions Committee be instructed to distribute the resolutions to be discussed at the COA Congress to all local societies, not less than thirty (30) days prior to the annual COA Congress; and it be further

RESOLVED, that the COA Resolutions Committee be instructed to distribute all background data that is available relating to Congress resolutions not less than thirty (30) days prior to the annual COA Congress.

December 2006 Status: Accomplished.

2015 Recommendation: This resolution has been adopted and faithfully carried out as official COA HOD procedure. Retain the resolution in the COA Standing Policies record as standing policy.

1978 PR#A-4 Originally Deleted 2003 Hypertension Screening

RESOLVED, that the California Optometric Association go on record using optometrists to actively screen their patients for the detection of hypertension.

December 2002 Status: Ongoing, but unnecessary. The current standard of care for trained, licensed optometrists includes and considers this important health care issue.

2015 Recommendation: This resolution represents the optometric standard of care; therefore, it is recommended to retain the resolution in the COA Standing Policies record as standing policy.

1980 PR#A-5(a) Originally Deleted 2007 Illegal Yellow Page Listings

RESOLVED, That the California Optometric Association immediately take any and all steps necessary to stop the illegal listings under the “optometrists” heading in the yellow pages.

December 2006 Status: Implemented. The State Board of Optometry is authorized to enforce this law.
2015 Recommendation: Even though the concern expressed by this resolution is addressed by the State Board of Optometry, it is recommended to retain the resolution in the COA Standing Policies record as standing policy.

1981 PR#A2  House Of Delegates Approval Of COA Budget

RESOLVED, That the COA annual budget continue to be presented annually at the annual COA Congress; and be it

RESOLVED, further, That the COA House of Delegates be empowered to review and approve the COA Budget presented to the House of Delegates at COA’s annual Congress.

2015 Recommendation: COA budget approval continues to rest with the COA HOD. Recommend that this resolution be retained in the COA Standing Policies record as standing policy.

1983 PR#A-3  Originally Deleted 2007  Practice of Optometry by Non-Licensed Persons

RESOLVED, That the COA Board of Trustees pursue the enforcement of current optometric laws relating to what constitutes the practice of optometry; and be it further

RESOLVED, That the COA Board of Trustees be asked to seek changes in California law, if necessary, to restrict non-licensed personnel from practicing optometry.

December 2006 Status: Implemented. COA’s Legislation and Regulation Committee has determined that current California laws and regulations are sufficiently clear on who may interpret refractive data and that their effectiveness depends on adequate enforcement.

2015 Recommendation: As it is in the interest of the optometric profession that only licensed doctors of optometry (and ophthalmologists) are able to practice optometry, it is recommended to retain the resolution in the COA Standing Policies record as standing policy.

1984 PR#A-11  Originally Deleted 2007  Optometric Education Requirements

RESOLVED, That the California Optometric Association go on record as opposing any reduction of the educational requirements to qualify to take the California State Board examination; and be it further

RESOLVED, That the California Optometric Association support the maintaining of equivalency in educational and clinical requirements to those of American optometry school graduates and nothing less as a prerequisite for California licensure; and be it further

RESOLVED, That the California Optometric Association Board be encouraged to take whatever measures necessary to assure that these high quality standards are maintained and that this be transmitted to the State Board at its next meeting.

December 2006 Status: Implemented. California law and regulation are clear in their requirements for licensure as an Optometric Doctor. COA’s sponsored Senate Bill 579, effective January 1, 2007, establishes a licensure by credential program that both requires out-of-state applicants already licensed elsewhere to be certified and educated to California levels and gives the State Board the discretion to determine “equivalency.”

2015 Recommendation: Equivalency of education is not required for licensure by foreign graduates. As promoting and maintaining high optometric educational standards and clinical
requirements for licensees continues to be a priority for COA, it is recommended to amend the resolution to clearly state that policy and retain it in the COA Standing Policies record as standing policy.

1989 PR#A-1 Originally Deleted 2002 AOA Delegate Votes

RESOLVED, that the California Optometric Association’s Board of Trustees be requested to change COA Codified Policy regulating AOA delegate votes from two (2) to four (4) votes.

RESOLVED, that in all cases, the delegate vote shall be at least one-half of total delegation vote. This shall be achieved by dividing the votes equally among the delegates present.

December 2001 Status: Accomplished.

Codified Policy

9510 COA Delegates to AOA Congress

9511 Each seated delegate including the President, President-elect and Immediate Past President shall have four (4) votes. Adopted February 1989, House of Delegates Resolution

2015 Recommendation: The HOD direction embodied in this resolution has been made permanent in the “Guidelines for COA Delegates to AOA House of Delegates.” Retain the resolution in the COA Standing Policies record as standing policy.


RESOLVED, that the California Optometric Association continue its ongoing support of the American Optometric Foundation in its function of providing the necessary funds for the support of optometric research.

December 2011 Status: The California Optometric Association encourages its members to support the charitable programs sponsored by the American Optometric Association and the American Academy of Optometry.

2015 Recommendation: COA continues to encourage members to financially support the American Optometric Foundation, renamed Optometry Cares® - The AOA Foundation. In 2013, the COA Board of Trustees adopted a policy to directly solicit financial donations on behalf of third-parties and in 2014 approved the solicitation of financial donations to Optometry Cares® which first occurred in September 2014. It is recommended to retain the resolution in the COA Standing Policies record as standing policy.

1990 PR#A-1 Originally Deleted 2007 Alliance with Allied Health Professionals

RESOLVED, That the California Optometric Association Board of Trustees and staff be encouraged to form a strong and cooperative alliance with other allied health professional organization such as the California Dental Association, the California Pharmacists Association, the California Chiropractic Association and any other organization that shares common interest with the California Optometric Association; and be it

RESOLVED further, That the alliance be encouraged to conduct periodic (perhaps quarterly) meetings between the organizations, including letters of support, sharing of information, and any other cooperative measures that the Board and staff feel would be in the best interest of the California Optometric Association.
December 2006 Status: Implemented. The COA’s Legislation and Regulation Committee and staff establish such liaisons and coalitions anytime it advances COA’s legislative or regulatory interests.

2015 Recommendation: COA, its legislation-regulation and health care delivery services committees, continue to reach out and work with allied health care associations as appropriate. Retain the resolution in the COA Standing Policies record as standing policy.

1990 PR#2 Annual Congress Held In California

RESOLVED, That the California Optometric Association hold its Annual Congress within the State of California.

2015 Recommendation: All COA Annual Congresses (now known as “COA House of Delegates”) meetings have been held in California since the adoption of this resolution. Additionally, there has been no move to hold them outside the state. It is recommended to retain the resolution in the COA Standing Policies record as standing policy.

1990 PR#A-5 Originally Deleted 2007 COA Working with COLA

RESOLVED, That the California Optometric Association Board of Trustees be encouraged to create a working relationship with the California Optical Laboratories Association for the purpose of further enhancing the provision of quality service and ophthalmic materials in a timely manner for the benefit of patients.

December 2006 Status: Implemented. COA/CVP have been working with the California Optical Laboratories Association for many years.

2015 Recommendation: COA continues to work with the California Optical Laboratories Association. Retain the resolution in the COA Standing Policies record as standing policy.

1991 PR#2 California Vision Project, Management

RESOLVED, that the California Optometric Association urge the California Vision Project board to appoint a proven, committed volunteer to head the California Vision Project, and that this individual have not duties with a higher priority, and be it

RESOLVED, further, that an active statewide committee with a regular and frequent meeting schedule be appointed to promote and conduct the California Vision Project; and be it

RESOLVED, further, that information and promotional materials concerning the California Vision Project be given to the local societies far in advance so that local efforts can produce a maximum effect.

2015 Recommendation: CVF, which oversees CVP, has for many years been headed by a past president of COA. The CVF board continues to meet when necessary with the primary functions of promoting CVP to the public and doctors of optometry. It is recommended to retain the resolution in the COA Standing Policies record as standing policy.

1991 PR#A-5 Originally Deleted 2003 Continuing Education for Practice Management Course

RESOLVED, that the Board of Trustees of the California Optometric Association be encouraged to convey to the California State Board of Optometry its desire to recognize for credit practice
administration and patient management courses which could positively impact the quality of patient care.

**December 2002 Status:** The SBO recognized legitimate patient management courses for continuing education – “No more than 4 hours of course work shall be in the area of patient care management. Courses dealing with business management shall not be approved.” (California Code of Regulations, Title 16, Section 1536).

**2015 Recommendation:** Retain the resolution in the COA Standing Policies record as standing policy.

**1992 PR#5  COA/California State Board of Optometry Peer Review/Investigation**

Resolved, that the California Optometric Association promulgate information to its members regarding methods of complaint submission to the California State Board of Optometry, the processing and prioritizing of their complaints, and the usual course of violation investigation with the California State Board of Optometry.

**2015 Recommendation:** Educating members is an ongoing responsibility of COA. Since the 1992 adoption of this resolution, many new ODs have been added. COA should periodically inform members about SBO procedures. Therefore, it is recommended that the resolution be retained in the COA Standing Policies record as standing policy.

**1992 PR#A-6  Originally Deleted 2007  Medicare Working Relationship**

Resolved, that the California Optometric Association Board of Trustees be encouraged to create a working relationship with Medicare and its carriers for the purpose of enhancing the provision of quality service and ophthalmic materials for the benefit of the patients and to help in correcting errors or miscalculations in their reimbursement schedules.

**December 2006 Status:** Implemented. COA members and staff currently participate in meetings conducted by the Centers for Medicare and Medicaid Services of the federal Department of Health and Human Services and by the National Health Insurance Company, the Medicare fiscal intermediary for California.

**2015 Recommendation:** A working relationship with the Centers for Medicare and Medicaid is ongoing and necessary in promoting optometry within the federal Medicare and Medicaid (Medi-Cal in California) system and resolving issues as they arise. Therefore, it is recommended that the resolution be retained in the COA Standing Policies record as standing policy.

**1992 PR#7  Mandatory Continuing Education**

Resolved, that the California Optometric Association Board of Trustees safeguard the statutory authority for mandatory optometric continuing education and promote the development and maintenance of regulations that have a positive impact on patient care.

**2015 Recommendation:** Statutorily mandated continuing education, and their related regulations promulgated by the State Board of Optometry, for all licensed doctors of optometry continues to be in existence. COA continues to ensure those authorities are maintained. As these objectives continue to be COA policy, it is recommended that the resolution be retained in the COA Standing Policies record as standing policy.

**1993 PR#5  Medi-Cal Sponsored Managed Care Programs**
RESOLVED, that the COA develop a program for dissemination at a society level that will allow societies to present a competitive program on an organized approach to MEDI-Cal sponsored managed care programs.

2015 Recommendation: COA continues to pursue doctor of optometry access to full-scope participation in Medi-Cal managed care plans. Likewise, COA continues to disseminate information to COA societies on overcoming obstacles to such participation and will continue to do so. Therefore, it is recommended that this resolution be placed in the COA Standing Policies record as standing policy.

1994 PR#A-4 Originally Deleted 2007 Disaster Relief Plan

RESOLVED, that the California Optometric Association Board of Trustees encourage doctors of optometry to volunteer their services during natural and man-made disasters and follow relevant state and federal rules on how they can participate in disaster relief efforts. Plan to aid all residents of the State, patterned after the emergency relief plan previously developed by the California Optometric Association for fire and earthquake victims in Southern California.

December 2006 Status: Following the attacks that occurred on September 11, 2001, both the U.S. Congress and the California Legislature have adopted laws and regulations governing governmental and first-responder activities following disasters, whether natural or man-made. Any organization like COA desiring to participate in disaster relief and recovery would be required to work with established agencies in conformity with their mandated disaster plans.

2015 Recommendation: Assisting victims of natural or made-made disasters continues to be a worthy goal for COA. As noted above, state and federal rules have been adopted governing participation in disaster relief efforts. It is therefore recommended to amend the resolution, as set forth above, to account for those rules, encourage doctors of optometry to participate in relief efforts and retain it in the COA Standing Policies record as standing policy.

1994 PR#A-12 Originally Deleted 2007 Payment of Dues by Automatic Debit

RESOLVED, that the California Optometric Association Board of Trustees consider implementing a voluntary automatic debit payment system for its dues paying members.

December 2006 Status: Implemented.

2015 Recommendation: An automatic debit (and credit) system exists for the payment of dues investments. Retain the resolution in the COA Standing Policies record as standing policy.

1995 PR#1 Staff/Volunteer Communication

RESOLVED, that the House of Delegates herein assembled declares that there shall be no prohibition against Association staff members and volunteers of the Association maintaining communication with regard to the activities of this Association, and be it further;

RESOLVED, that the COA Board of Trustees amend the present employee manual to include a vehicle to address employee grievances as soon as possible.

2015 Recommendation: There currently is no policy or practice prohibiting COA staff and volunteers communicating about COA activities, in point of fact, it is encouraged. Further, the COA Employee Handbook contains provisions to fairly address employee grievances in a timely manner. It is recommended that the resolution be retained in the COA Standing Policies record as standing policy.
1995  PR#A-3  Originally Deleted 2011  Board of Trustees/Volunteer
Communication

RESOLVED, that the California Optometric Association Board of Trustees and its
officers be encouraged to communicate directly and adequately with affected
volunteers where they wish to change COA’s ongoing programs.

December 2010 Status: Actions of the COA Board are reported in CO magazine and on the
official website. COA trustees serve as liaisons to assigned societies.

2015 Recommendation: The COA Board of Trustees (BOT) actively seeks input on COA
programs and activities from volunteers and other members through the appointment of BOT
liaisons to societies, society town hall meetings, COA HOD meetings, COA Presidents’ Council
meetings and other venues. Retain the resolution in the COA Standing Policies record as standing
policy.

1995  PR#5  Disclosure Of Conflict Of Interest
RESOLVED, that the Board of Trustees develop disclosure and conflict of interest guidelines; and
be it further;

RESOLVED, that all elected officials, staff employees and paid consultants of the California
Optometric Association and all volunteers in the California Optometric Association structure be
required to complete and file a Disclosure of Conflict of Interest Report, and be it further;

RESOLVED, that an appropriate Board committee be formed to adjudicate and resolve conflicts as
they occur.

2015 Recommendation: COA has in place a formal conflict of interest disclosure policy for all
COA elected officials and appointees, along with paid consultants. Article VI, Section 2 of the COA
bylaws provides for a COA Judicial Council to adjudicate conflicts. As the objectives of the
resolution are formalized in practice and bylaws, it is recommended to retain the resolution in the
COA Standing Policies record as standing policy.

1995  PR#8  Establishment Of Second Political Action Committee

RESOLVED, that the California Optometric Association Board of Trustees IMMEDIATELY pursue
the implementation and establishment of a second Political Action Committee.

2015 Recommendation: COA has three political action committees, Cal-OPAC, LOSCOA-PAC
and an independent expenditure PAC (IE PAC). The resolution has been implemented and should
be retained in the COA Standing Policies record as standing policy.

1995  PR#10  Credit Card Dues Payments

RESOLVED, that the California Optometric Association Board of Trustees be encouraged to
submit a resolution to the American Optometric Association House of Delegates requesting that
state optometric associations collecting dues by credit card be allowed to pass through the
discount fee on the American Optometric Association dues portion to the American Optometric
Association.

2015 Recommendation: AOA provides a partial rebate to COA for offset credit card fees paid in
accepting members’ dues payments. As the objective of the resolution has been accomplished and
it reflects COA policy, it is recommended that this resolution be retained in the COA Standing Policies record as standing policy.

1996 PR#3 Originally Deleted 2007 Vision Therapy Exclusion

RESOLVED, that the California Optometric Association legislative program take assertive action to include optometric vision therapy and orthoptic treatment as benefits of Crippled California Children's Services, and be it further

RESOLVED, that litigative action be considered to require that optometrists not be discriminated against in their ability to provide services to those patients covered by either government programs or private insurance companies, and be it further

RESOLVED, that the California Optometric Association meet with insurance companies believed to be discriminating against services performed by optometrists to communicate Association members’ displeasure with the discrimination and the Association’s intent to pursue legislation and/or litigation to correct the situation.

December 2006 Status: The Crippled Childrens’ Services no longer exists within the California governmental structure – it was renamed the California Childrens’ Services many years ago and only deals with medically fragile children born with extreme medical conditions. While the recommendation of the Board of Trustees is to delete the first resolved, legal advice was that either the entire resolution must be retained or deleted, not portions thereof.

COA continues to actively pursue the profession’s ability to provide comprehensive eye care services in all state-sponsored programs (which include vision therapy and other age-appropriate treatments). This activity occurs through the HCDS and Legislative Committee structure. See (2000)-PR # 16.

2015 Recommendation: COA, its legislation-regulation and health care delivery systems committees, continue to promote non-discriminatory practices toward doctors of optometry and their services by all public and private third-party payers and challenge discriminatory practices by these same payers. Litigation continues to be a consideration to fight instances of OD discrimination with government programs and private insurance companies. It is therefore recommended that the resolution be retained, as amended to reflect current governmental agency referenced, in the COA Standing Policies record as standing policy.

1997 PR#3 Originally Deleted 2008 Resolution Information

RESOLVED, that the COA Board of Trustees research, prepare and publish factual background information and potential budgetary impact for each resolution.

December 2007 Status: Completed.

2015 Recommendation: All COA Board of Trustee-sponsored HOD policy resolutions contain a potential budgetary impact when it exists; as well as applicable Society-proposed policy resolutions that are submitted by the deadline established each year prior to the COA HOD meeting. Retain the resolution in the COA Standing Policies record as standing policy.

1997 PR#5 Originally Deleted 2011 Public Relations and Marketing of Optometric Services to Combat Illiteracy
**1997 PR#7 Originally Deleted 2008 Optometric Input in the Establishment of Telemedicine Protocols**

RESOLVED, that the COA consider marketing optometric care to healthy start programs, reading recovery programs, schools, learning centers, and managed care organizations or any other institutions that serve persons who need optometric services.

**December 2010 Status:** COA supports charitable causes through the California Vision Foundation.

**2015 Recommendation:** Retain the resolution in the COA Standing Policies record as standing policy.

**1997 PR#8 Originally Deleted 2008 Communication of Board of Trustees’ Actions to Societies**

RESOLVED, that all California Optometric Association Board of Trustees minutes be distributed to all society presidents and secretaries within a thirty day period after approval; and let it further be

RESOLVED, that Board members’ voting records be documented.

**December 2007 Status:** Completed.

**2015 Recommendation:** The minutes are posted to COA’s website once they have been approved by the COA Board of Trustees and are accessible by any member. Further, the motions and other actions considered at a BOT meeting are published in *California Optometry* magazine. Therefore, it is recommended that the resolution be retained in the COA Standing Policies record as standing policy.

**1997 PR#21 Originally Deleted 2008 Optometric Locator Service**

RESOLVED, that the COA Board of Trustees study the necessary steps to promote optometry’s interest by way of establishing a public relations program, public service announcements and media advertisements.

**December 2007 Status:** Completed.

**2015 Recommendation:** COA has a doctor locator on its website. Additionally, it has in place a robust public relations program that includes aggressive social media outreach and various public service announcements. Further, the COA Strategic Plan sets as a goal the expansion of the
doctor locator tool. Therefore, it is recommended to retain this resolution in the COA Standing Policies record as standing policy.

1998 PR#B-6 Originally Deleted 2008 Impartial Bylaw and Resolution Analysis

RESOLVED, that before publication in the delegates' binders, of the bylaw amendment or resolution analyses, it be submitted to the author of the resolution for review and additional comments.

December 2007 Status: An analysis is provided by staff and submitted to delegates for each Proposed Policy resolution.

2015 Recommendation: Beginning with the 2013 COA HOD meeting, the standing rules were revised to provide an opportunity for the author of a policy resolution and bylaws amendment to clarify his or her proposal or otherwise make changes if the proposal was found to conflict with state or federal law, COA bylaws or other COA-adopted policies. It is therefore recommended that this resolution be amended to apply to bylaw amendment proposals and be retained in the COA Standing Policies record as standing policy.

1998 PR#B-8 Originally Deleted 2004 New Member Acknowledgement

RESOLVED, that new members will not receive their first dues bill until after verbal communication that they have received their welcome and information packet; and be it further

RESOLVED, that this verbal confirmation come from the COA Membership Chair.

December 2004 Status: The Board of trustees voted to delete this policy resolution since there is now a standardized process in place. New members are sent their welcome letter and information packet upon society approval of membership. Dues invoicing commences the month following their join date.

2015 Recommendation: For now, it is recommended that this resolution be retained in the COA Standing Policies record as standing policy. However, the task notes that membership recruitment and billing processes have changed since this resolution was adopted almost 20 years ago. As a result, the task force strongly encourages the COA Membership Committee to review this resolution and bring back to the COA HOD an updated resolution or a recommendation for the policy to be archived, including the rationale for either recommendation.

1998 PR#B-10 Originally Deleted 2007 Optometric Vision Therapy

RESOLVED, that the COA Board of Trustees should continue actively promoting the broad scope of optometric services as an inclusion in all government and private health care plans.


2015 Recommendation: COA continues to promote full scope optometric services in all health care plans. Therefore, it is recommended that the resolution be retained in the COA Standing Policies record as standing policy.

1999 PR#16 Originally Deleted 2004 Credentialing Criteria

RESOLVED, that the California Optometric Association endorses and ratifies Resolution #4 of the 1998 AOA House of Delegates, which encourages all optometrists to seek therapeutic licensure
and encourages managed care entities to show reasonable accommodations for those doctors of optometry who have not yet attained therapeutic licensure.

December 2004 Status: No action necessary.

2015 Recommendation: COA continues to encourage doctors of optometry to practice to the highest level allowed by law. Therefore, it is recommended to retain this resolution in the COA Standing Policies record as standing policy.

2000 PR# 16 Vision Therapy Inclusion in Vision Coverage

RESOLVED, that the California Optometric Association encourage all private and government vision carriers, to include vision therapy as a benefit in plans which provide primary care.

2015 Recommendation: Retain and place this resolution in the COA Standing Policies record as standing policy.

2000 PR#20 Originally Deleted 2008 Relative Dues Category

RESOLVED, that the percentage of dues paid in any individual dues category will not be changed without passage of a resolution by the House of Delegates.

December 2007 Status: Complete

2015 Recommendation: This resolution continues to be COA policy. Therefore, it is recommended that the policy resolution be retained in the COA Standing Policies record as standing policy.

2001 PR#1 Project Keep

RESOLVED, that in order to be eligible for the dues extension each year (within five years of licensure) the new licentiates must be active in the society and that this be evaluated by the society president on a year to year basis; and be it

RESOLVED, that codified policy be changed as follows:

7330 Project Keep
1. As a membership recruitment/retention technique, dues for new optometric licentiates will be based on the following structure.
2. Dues will be zero for the first two years of licensure; 20% of the full amount for the third and fourth years; 40% of the full amount for the fifth and sixth years; 60% of the full amount for the seventh and eighth years; 80% of the full amount for the ninth and tenth years; and, a full dues obligation for the eleventh year forward.
3. The maximum number of years of dues extension is ten years. Adopted February 1989
4. The Project Keep dues scale applies only to COA, Society, Cal-OPAC and PVL-LIT dues.
5. In order to qualify for Project Keep, a member must be continuously active as an officer or committee member in his/her local society, or have made a significant contribution to COA.
6. The Membership Chair and the COA Secretary/Treasurer will report to the Board on Project Keep at the end of each fiscal year. House of Delegates Resolution 1989

Dues changes become effective January 2002
2015 Recommendation: Project Keep continues as a program, but is undergoing review for potential revision. As it is an existing program, it is recommended that this resolution be placed in the COA Standing Policies record as standing policy.

2002 PR#4 Originally Deleted 2008 Payment of Dues by Credit Card

RESOLVED, that the California Optometric Association shall offer members the option of paying their dues by credit card; and be it further

RESOLVED, that the COA shall offer members the option of paying their annual dues by one credit card payment as soon as possible.

December 2007 Status: Completed.

2015 Recommendation: Credit card payment of COA (and AOA and society) dues investment is accepted. Retain the resolution in the COA Standing Policies record as standing policy.

2003 PR#3 Originally Deleted 2008 Reserve Fund Investment

RESOLVED, that a Task Force be appointed to study and make recommendations regarding the application of the California Optometric Association’s investment policy with regard to the reserve fund; and be it further

RESOLVED, that the 2004 California Optometric Association House of Delegates, upon review of the recommendations of the Task Force, consider formal action to establish House of Delegates policy regarding the appropriate investment allocations for the reserve fund.

December 2007 Status: Completed.

2015 Recommendation: An investment policy for the COA Reserve Fund was adopted in 2006 and continues to be in place. Therefore, it is recommended to retain the resolution in the COA Standing Policies record as standing policy.

2004 PR#4 Originally Deleted 2009 Licensure by Endorsement

RESOLVED, that the 2004 COA House of Delegates endorses the concept of Licensure by Endorsement for optometrists.

December 2008 Status: Senate Bill 579 (Aanestad – Stats. 2006, Ch. 302), sponsored by COA, enacted licensure by credential in California. The law became fully effective in September 2008 with adoption of final regulations by the State Board of Optometry.

2015 Recommendation: As noted above, the subject of this resolution was accomplished. It remains COA policy to endorse the concept of licensure by endorsement. Therefore, it is recommended to retain the resolution in the COA Standing Policies record as standing policy.

2004 PR#9 Originally Deleted 2009 House of Delegates Scheduling

RESOLVED that the House of Delegates recommend to the COA Board of Trustees to hold the Annual House of Delegates meeting during the months the California Legislature is in session in Sacramento if feasible.

2015 Recommendation: For many years, the COA HOD meeting has been held during the time the California Legislature is in session. For most of those years, it has alternated between Northern and Southern California for the convenience of delegates, which has included Sacramento. It is recommended to retain the resolution in the COA Standing Policies record as standing policy.

2004 PR#12 Originally Deleted 2011 InfantSEE

RESOLVED, that the 2004 California Optometric Association House of Delegates strongly supports and endorses the American Optometric Association InfantSEE program and encourages every COA member to sign up for and participate in this public service program to improve the eye and vision care for children in the state of California.

December 2010 Status: Completed. Involvement in the InfantSEE program will be a high priority this year because COA’s Legislation and Regulation Committee has recommended the introduction of legislation in 2012 to encourage children to receive comprehensive eye exams before entering school. Lawmakers will object to this legislation because of cost therefore it will be important for COA to offer free optometric services through the InfantSEE program.

2015 Recommendation: COA continues to strongly support InfantSEE. Additionally, it remains a COA goal to obtain mandatory comprehensive eye examinations for children entering school. Therefore, it is recommended to retain the resolution in the COA Standing Policies record as standing policy.

2006 PR#6 Originally Deleted 2011 Support of the American Academy of Optometry

RESOLVED, that the California Optometric Association be supportive of the American Academy of Optometry and of the Academy’s efforts to recruit Fellowship applications and encourage membership of Doctors of Optometry in California.

December 2010 Status: Completed. COA Continues to be supportive of stakeholder organizations.

2015 Recommendation: COA continues to support the American Academy of Optometry and its programs. Therefore, it is recommended to retain the resolution in the COA Standing Policies record as standing policy.

2007 PR#2 Originally Deleted 2012 Relationship of Computer Vision Syndrome to Musculoskeletal Disorders

RESOLVED, that the California Optometric Association recognizes that Computer Related Vision Syndrome (to include ocular discomfort, muscular strain and stress) has a significant impact on the comfort and productivity of individuals who engage in computer use in the work place and in their personal lives, and be it further

RESOLVED, that the California Optometric Association urge Doctors of Optometry to actively educate their patients, and where feasible employers, relating to the important role of eye and vision care to minimize the symptoms and enhance the visual performance and overall efficiency of individuals working at a computer, and be it further

RESOLVED, that a copy of the position paper entitled, “The Relationship of Computer Vision Syndrome to Musculoskeletal Disorders,” published by the American Optometric Association, be suitably archived for review in conjunction with this policy resolution.

December 2011 Status: Completed. PR archived and posted onto the COA website.
2015 Recommendation: COA continues to educate the public about vision and disorders through its social media public relations activities and several informational pieces posted to its Eye Help page. As the topic remains a continuous goal of COA, it is recommended to retain the resolution in the COA Standing Policies record as standing policy.

2007 PR#3 Originally Deleted 2012 Eyecare Services in Nursing Facilities

RESOLVED, that the California Optometric Association affirm its support for regular vision and eye care, and an increased access to such care by those (often elderly) individuals residing in long term care facilities by Doctors of Optometry, and be it further

RESOLVED, that the Board of Trustees of the California Optometric Association investigate the feasibility of sponsoring legislation to modify the statutes, regulations, or rules that directly or indirectly restrict or encumber access to eye care services within nursing facilities; and be it further

RESOLVED, that a copy of the position statement entitled, “Position Statement on Eye Care Services in Nursing Facilities,” or the most recent revision published by the American Optometric Association be suitably archived for review in conjunction with this policy resolution.

December 2011 Status: Completed. PR archived and posted onto the COA website.

2015 Recommendation: In 2010, Assembly Bill 2683, Hernandez, was enacted enabling doctors of optometry to provide services to residents in health facilities and residential care facilities. COA continues to educate the public about vision and disorders through its social media public relations activities and several informational pieces posted to its Eye Help page. As the topic remains a continuous goal of COA, it is recommended to retain the resolution in the COA Standing Policies record as standing policy.

2007 PR#6 Originally Deleted 2012 Regular Optometric Care

RESOLVED, that it is the policy of the California Optometric Association that at a minimum regular comprehensive eye examinations be administered by an eye care professional according to the following schedule:

<table>
<thead>
<tr>
<th>Patient Age</th>
<th>Examination Interval</th>
</tr>
</thead>
<tbody>
<tr>
<td>Birth to 24 Months</td>
<td>Asymptomatic/Risk Free: By 6 months of age, At Risk: By 6 months of age or as recommended</td>
</tr>
<tr>
<td>2 to 5 years</td>
<td>Asymptomatic/Risk Free: At 3 years of age, At Risk: At 3 years of age or as recommended</td>
</tr>
<tr>
<td>6 to 18 years</td>
<td>Asymptomatic/Risk Free: Before first grade and every two years thereafter, At Risk: Annually or as recommended</td>
</tr>
<tr>
<td>18 to 40 years</td>
<td>Asymptomatic/Risk Free: Every two to three years, At Risk: Every one to two years or as recommended</td>
</tr>
<tr>
<td>41 to 60 years</td>
<td>Asymptomatic/Risk Free: Every two years, At Risk: Every one to two years or as recommended</td>
</tr>
<tr>
<td>61 and older</td>
<td>Asymptomatic/Risk Free: Annually, At Risk: Annually or as recommended</td>
</tr>
</tbody>
</table>

RESOLVED, that a copy of the position statement entitled, “Recommendations for Regular Optometric Care,” published and revised by the American Optometric Association, be suitably archived for review in conjunction with this policy resolution.
December 2011 Status: Completed. PR archived and posted onto the COA website.

2015 Recommendation: Retain the resolution in the COA Standing Policies record as standing policy.

2007 PR#7  Originally Deleted 2012 Low Vision, Learning, and Dyslexia

RESOLVED, that it is the policy of the California Optometric Association that:

• People at risk for learning-related vision problems should receive a comprehensive optometric evaluation. This evaluation should be conducted as part of a multidisciplinary approach in which all appropriate areas of function are evaluated and managed.
• The role of the optometrist when evaluating patients for learning-related vision problems is to conduct a thorough assessment of eye health and visual functions and communicate the results and recommendations.
• The expected outcome of optometric intervention is an improvement in visual function for patients with learning-related vision problems by therapy which may include lenses, prisms, and vision therapy

And be it further

RESOLVED, that a copy of the position statement entitled, “Vision, Learning, and Dyslexia,” published and revised by the American Optometric Association be suitably archived for review in conjunction with this policy resolution.

December 2011 Status: Completed. PR archived and posted onto the COA website.

2015 Recommendation: The topic of this resolution remains COA policy and therefore it is recommended that it be retained in the COA Standing Policies record as standing policy.

Archived Policy Resolutions

1964 PR# A-7 Orinda Study

RESOLVED, That the California Optometric Association, in convention assembled, does hereby declare the technique as originated in the Orinda Study to be a recommended vision screening program for the school children of the State of California, and be it further

RESOLVED, That the COA recommends that a the American Optometric Association does declare the technique as originated in the Orinda Study to be a recommended vision screening program for the school children of the United States.

2015 Recommendation: The task force recommends the adoption of a new policy resolution addressing early detection of children’s eye and vision problems (see Recommendation 3, proposed policy resolution on “Mandatory Children’s Comprehensive Eye Exams.”) Therefore, it is recommended that this resolution be rescinded and placed in the COA Policy Resolution Archive.

1966 PR#A-24 Originally Deleted 2009 Public Vision League

RESOLVED, That all active members of the California Optometric Association shall forthwith be members of the Public Vision League; and be it further
RESOLVED, That the Secretary of the California Optometric Association be authorized to forthwith notify Public Vision League of the names and addresses of its members who are now such members of the Public Vision League; and be it further

RESOLVED, That all present and future active members of the California Optometric Association shall, as a condition of membership in the California Optometric Association, maintain membership in and abide by the rules, regulations, bylaws and Articles of Incorporation of Public Vision League.

December 2009 Status: The COA Board of Trustees is sponsoring (2009) Proposed Bylaws Amendment Number Three to the House of Delegates, which would amend COA's Bylaws to provide that all active members are required to be members of the Public Vision League and shall, as a condition of membership in the California Optometric Association, maintain membership in and abide by the rules, regulations, bylaws and Articles of Incorporation of Public Vision League. 2009 Bylaws Amendment #2 [adopted that year] clarifies this issue and makes the Policy Resolution unnecessary.

2015 Recommendation: As stated above, Article I, Section 13 (renumbered to Section 12 in 2013) of the COA bylaws was amended in 2009 to require membership in the Public Vision League (PVL) by all active COA members, e.g., active, partial practice, optometric, government service, postgraduate, distinguished, retire, life, special achievement and clinical practice member doctors of optometry. Additionally, in 2013, as a complement to COA bylaws, PVL amended its Article II, Section 2(b) of its bylaws to require all COA active members to belong to PVL. As the policy has been formally adopted in COA and PVL bylaws, it is recommended that the policy resolution be rescinded and placed in the COA Policy Resolution Archive.

1973 PR#7 School Screening Program

RESOLVED, That the California Optometric Association in convention assembled does hereby declare the following screening program be recommended for the school children of the State of California:

1) That the California Optometric Association recommends a comprehensive sight screening for all children.
2) That a minimum sight screening program would evaluate:
   a. Visual Activity
   b. Refractive Status
   c. Binocular Eye-Co-ordination
   d. Gross Eye Health
   e. Color Perception
3) That additional visually related services be recommended for underachieving children.
4) That additional visually related services can be best coordinated with other special educational services by an optometrist consultant to the school district so that the full scope of optometric knowledge may be utilized for the benefit of school children.

2015 Recommendation: The task force recommends the adoption of a new policy resolution addressing early detection of children’s eye and vision problems (see Recommendation 3, proposed policy resolution on “Mandatory Children’s Comprehensive Eye Exams.”) Therefore, it is recommended that this resolution be rescinded and placed in the COA Policy Resolution Archive.

1979 PR#A-6 Originally Deleted 2003 Quality of Education at ACOA Congress
RESOLVED, that the California Optometric Association continue to upgrade and enhance the level and scope of the annual Congress education.

December 2002 Status: Ongoing.

2015 Recommendation: Since this resolution applied to the educational program at Congress and since Congress no longer exists, the mandate was completed. Regardless, COA continuously endeavors to improve all of its educational programs. As the resolution was mistitled referring to “AOA” instead of “COA,” it is recommended that the title be corrected and that it be rescinded and placed in the COA Policy Resolution Archive.

1983 PR#A-6 Originally Deleted 2007 COA Dues for Litigative Purposes

RESOLVED, That the current maximum dues for litigative purposes be increased to $100.00 per year, per member.

December 2006 Status: Implemented. Funds continue to be collected for the Public Vision League, but the amount charged per member was recently reduced due to favorable allocation and investment results.

2015 Recommendation: The assessment of COA members for litigation purposes is set by the Public Vision League (PVL). As PVL establishes the assessment, it is recommended that it be rescinded and placed in the COA Policy Resolution Archive.

1984 PR#A-15 Ancillary Personnel

RESOLVED, That the COA Board establish a task force to study all aspects of the utilization of ancillary personnel; and the legalities of the practice modes of optometry, ophthalmology and opticianry; and be it

RESOLVED further, That the task force formulate recommendations to the COA Board to insure that the present and future vision care needs of the consumers are legally established an appropriately preserved.

2015 Recommendation: The objective of this resolution was met with the enactment of Business & Professions Section 2544 to allow technicians to perform certain tasks. It is therefore recommended that the policy resolution be rescinded and placed in the COA Policy Resolution Archive.

1984 PR#4 School Vision Screenings

RESOLVED, That the California Optometric Association take up the cause of children with undetected vision problems by working with appropriate state agencies that will promote the early detection of vision problems.

2015 Recommendation: The task force recommends the adoption of a new policy resolution addressing early detection of children’s eye and vision problems (see Recommendation 3, proposed policy resolution on “Mandatory Children’s Comprehensive Eye Exams.”) Therefore, it is recommended that this resolution be rescinded and placed in the COA Policy Resolution Archive.

1986 PR6 Retired Members

RESOLVED, that those members who are “retired” members as specified in the COA bylaws shall, after February 28, 1986, be charged 10 percent of full COA dues.
2015 Recommendation: COA HOD-adopted Policy Resolution 4 from 2013 sets forth the current dues schedule for all COA members. Additionally, this same resolution rendered any existing policy resolution related to the COA member dues null and void. Therefore, it is recommended that the resolution be rescinded and placed in the COA Policy Resolution Archive.

1987 PR#1 Retired Member Dues (previously 1986 res. 6)

RESOLVED, That those members who become “Retired Members” as specified in the COA Bylaws shall after February 28, 1987 be charged 10 percent of full dues.

2015 Recommendation: COA HOD-adopted Policy Resolution 4 from 2013 sets forth the current dues schedule for all COA members. Additionally, this same resolution rendered any existing policy resolution related to the COA member dues null and void. Therefore, it is recommended that the resolution be rescinded and placed in the COA Policy Resolution Archive.

1988 PR#4 Residency Dues

RESOLVED, That the California Optometric Association alter its dues policy for the optometric resident whose residency immediately follows his or her acquisition of the O.D. degree so that dues during residency are at the same level as a student and that the graduated scale of dues payment commences during the beginning of the next fiscal year following completion of the residency rather than the fiscal year following graduation from a school of college of optometry; and be it RESOLVED further, That the COA Board of Trustees encourage the AOA House of Delegates to consider a dues category for residency students to be the same as that of regular optometric students.

2015 Recommendation: COA HOD-adopted Policy Resolution 4 from 2013 sets forth the current dues schedule for all COA members. Additionally, this same resolution rendered any existing policy resolution related to the COA member dues null and void. Therefore, it is recommended that the resolution be rescinded and placed in the COA Policy Resolution Archive.

1988 PR#2 Pharmacological Education

RESOLVED, That the California Optometric Association Board of Trustees encourage the development of therapeutic pharmacological education for the members of our profession.

2015 Recommendation: Since the scope expansion in 2001 to include TPAs, and the requirement of a specified number of CE hours for TPA certification maintenance, COA has offered many courses on the subject of therapeutic pharmacology. As the objective of the resolution to develop this education has been achieved, it is recommended that the policy resolution be rescinded and placed in the COA Policy Resolution Archive.

1989 PR#5 Mandatory Continuing Education

RESOLVED, that the California Optometric Association take whatever actions are necessary to encourage and support the California State Board of Optometry in developing regulations for mandatory continuing education for California Optometrists.

2015 Recommendation: State Board of Optometry regulations governing mandatory continuing education for California-licensed doctors of optometry are in place. As the objective of the resolution has been achieved, it is recommended that the policy resolution be rescinded and placed in the COA Policy Resolution Archive.

1989 PR#A-9 Originally Deleted 2003 California Vision Project
RESOLVED, that the members of the 1989 House of Delegates fully support the implementation of the California Vision Project and pledge to encourage our optometric colleagues to offer their services to this worthwhile endeavor.

December 2002 Status: Ongoing. The California Vision Project is now a year-round program under the California Vision Foundation. This year-round program provides better access to patients and more evenly distributes the patient load to participating doctors.

2015 Recommendation: The COA HOD renewed its support of the California Vision Foundation and its California Vision Project by way of 2014 Policy Resolution 4. Therefore, it is recommended that the policy resolution be rescinded and placed in the COA Policy Resolution Archive.

1991 PR#A-1 Originally Deleted 2008 California Vision Project, Annual Program

RESOLVED, that the California Vision Project be continued as an ongoing annual program of the California Optometric Association; and be it
RESOLVED, further, that having a successful California Vision Project be given a very high priority by the California Optometric Board of Trustees.

December 2007 Status: Completed.

2015 Recommendation: The COA HOD renewed its support of the California Vision Foundation and its California Vision Project by way of 2014 Policy Resolution 4. Therefore, it is recommended that the policy resolution be rescinded and placed in the COA Policy Resolution Archive.

1991 PR#4 Nominating Committee Report

RESOLVED, that the Nominating Committee shall submit to the delegates to the Congress the Nominating Committee’s complete prospective slate of officers and trustees not less than forty-five (45) days prior to the date of the annual Congress.

2015 Recommendation: COA bylaws Article III, Section 1(c) has been amended to provide that the COA Nominating Committee report be distributed to all delegates of the COA HOD 60 days in advance of the meeting. As the objective of the resolution is embodied in the COA bylaws, it is recommended that the policy resolution be rescinded and placed in the COA Policy Resolution Archive.

1991 PR#6 American Public Health Association Recognition

RESOLVED, that the California Optometric Association at its 92nd annual Congress does hereby go on record as applauding the American Public Health Association (APHA) for its positive stance on endorsing the “Access to Treatment for Eye Care by Optometrists” resolution; and be it
RESOLVED, further, that the members of the California Optometric Association be encouraged to join the American Public Health Association and its Vision/Eye Care Section; and be it
RESOLVED, further, that the California Optometric Association strongly encourage the leadership at the individual society level to carry out a program of membership recruitment for the American Public Health Association.

2015 Recommendation: This resolution was combined into PR 6 in 2000 that was made part of the COA Policy Resolution Implementation Record by the COA HOD in 2013. Therefore, it is recommended that the policy resolution be rescinded and placed in the COA Policy Resolution Archive.
1991  PR#A-8  Originally Deleted 2007  Communication Network for Infants' and Children’s Eye Care

RESOLVED, that the Board of Trustees of the California Optometric Association initiate appropriate communications with appropriate associations, such as pediatric associations, the Association of School Nurses, and the general public, informing them of the crucial need for comprehensive eye health and vision examinations for children prior to the age of three; and be it RESOLVED, further, that the Board of Trustees make every effort to form a communications network with concerned organizations (such as pediatricians, nurses, etc.) regarding the importance of comprehensive eye and vision care for children and the scope of optometric practice today.


2015 Recommendation: The task force recommends the adoption of a new policy resolution addressing early detection of children's eye and vision problems (see Recommendation 3, proposed policy resolution on "Mandatory Children's Comprehensive Eye Exams.") Therefore, it is recommended that this resolution be rescinded and placed in the COA Policy Resolution Archive.

1991  PR#A -9  Originally Deleted 2009  COA Members Joining American Diabetes Association

RESOLVED, that the California Optometric Association support the formation of a vision care section within the American Diabetes Association; and be it

RESOLVED, further, that the California Optometric Association Board of Trustees encourage local society leadership to invite their members to join the American Diabetes Association.

December 2008 Status: This resolution was consolidated into (2000) PR #6 Review of Resolutions A-6 (1991) and A-9 (1991)

2015 Recommendation: As noted above, this resolution was combined into PR#6 in 2000 that was made part of the COA Policy Resolution Implementation Record by the COA HOD in 2013. Therefore, it is recommended that the policy resolution be rescinded and placed in the COA Policy Resolution Archive.

1993  PR#6  California Optometric Council

RESOLVED, that the California Optometric Association Board of Trustees appoint a committee to study the current role of the California Optometric Council relative to the goals and objectives of the California Optometric Association, related bylaws, the relationship of the California Optometric Council and the American Foundation for Vision Awareness, both operationally and financially and, if appropriate, present suitable recommendations and/or bylaws changes to the 1994 House of Delegates.

2015 Recommendation: This was a one-time directive of the COA HOD to the COA board. Therefore, it is recommended that the resolution be rescinded and placed in the COA Policy Resolution Archive.

1993  PR#8  Public Education on Harmful Ocular Effects of Ultraviolet Radiation

RESOLVED, that the California Optometric Association should immediately move to educate the optometric profession and disseminate information regarding the harmful ocular effects of ultraviolet radiation; and, be it further
RESOLVED, that the California Optometric Association board be instructed to urge the American Optometric Association board to move ahead with the resolution passed by the 1989 American Optometric Association Congress to educate the public on a national basis for the prevention of ocular pathologies resulting from ultraviolet exposure.

2015 Recommendation: While COA continues to alert and educate the public through social media and other means on the harmful effects of UV, this was a one-time directive to urge AOA to implement its own related resolution. Therefore, it is recommended that the resolution be rescinded and placed in the COA Policy Resolution Archive.

1994 PR#1 Dues Increase

RESOLVED, that for each of the five fiscal years beginning 1995 through 1999, the California Optometric Association membership dues may be increased up to a maximum of 7 percent per year, as may be determined necessary by the COA Board of Trustees, effective March 1, 1995.

2015 Recommendation: The effective period for this resolution ended in 1999. Therefore, it is recommended that the resolution be rescinded and placed in the COA Policy Resolution Archive.

1994 PR#2 Orange Belt Optometric Society

RESOLVED, that the Orange Belt Optometric Society be renamed the Inland Empire Optometric Society.

2015 Recommendation: The directive of this resolution was carried out with an amendment to the COA bylaws changing the name of the society. Therefore, it is recommended that the resolution be rescinded and placed in the COA Policy Resolution Archive.

1994 PR#A-3 Originally Deleted 2008 American Foundation for Vision Awareness

RESOLVED, that the California Optometric Association encourages all spouses to continue their support through voluntary participation in the activities of the American Foundation for Vision Awareness.

December 2007 Status: Completed.

2015 Recommendation: The American Foundation for Vision Awareness has gone out of business. Therefore, it is recommended that the resolution be rescinded and placed in the COA Policy Resolution Archive.

1994 PR#8 Retained Completed 2004 Family Leave Of Absence

RESOLVED, that the California Optometric Association Board of Trustees consider preparing a By-laws amendment to create a family leave membership category that would allow a 90% dues reduction for a period not to exceed six months; and be it further;

RESOLVED, that the California Optometric Association Board of Trustees consider presenting a resolution to the American Optometric Association House of Delegates that would provide for a similar category of membership and dues reduction.

July 2004 Status: Ongoing. Approved Minutes are posted in the Members Only section of the COA website. All actions taken by the Board of Trustees appear with the voting records.
**2015 Recommendation:** This membership classification does not exist for COA or AOA. Further, AOA and COA HODs adopted major revisions to their bylaws that addressed membership classifications in 2012 and 2013, respectively. However, COA and AOA provide for a 50 percent dues waiver for up to one year for members suffering from illnesses or who are pregnant. In addition, COA and AOA work together to offer members with severe illnesses, e.g., cancer, stroke, etc., to lower their dues to retired member classification. It is therefore recommended that the resolution be rescinded and placed in the COA Policy Resolution Archive.

**1995 PR#4 Independent Practitioner Associations**

RESOLVED, that the California Optometric Association discuss with the State Board of Optometry ways in which impediments to the formation of Optometric IPAs could be removed without changing the current branch office restrictions.

**2015 Recommendation:** Current law permits the formation of optometric IPAs without impacting the branch office law. Therefore, it is recommended the resolution be rescinded placed in the COA Policy Resolution Archive.

**1995 PR#9 Medi-Cal Fees**

RESOLVED, that this 1995 House of Delegates direct the California Optometric Association Board of Trustees to collect all available information and supporting data relevant to the equitability of Medi-Cal fees for optometrists; and be it further;

RESOLVED, that the California Optometric Association request the Public Vision League to initiate appropriate action to establish equitable optometric fees.

**2015 Recommendation:** The intent of this resolution, along with 1996 PR 15 on this same subject, has been combined into a new policy resolution addressing equitable Medi-Cal fees for doctors of optometry (see Recommendation 4, proposed policy resolution on “Optometric Medi-Cal Fees.”) Therefore, it is recommended that this resolution be rescinded and placed in the COA Policy Resolution Archive.

**1996 PR#5 Originally Deleted 2007 Format of House of Delegates**

RESOLVED, that the COA Board of Trustees implement a return to a two day House of Delegates which will allow us to focus our energies where they must be – on the challenges facing us legislatively, politically and in the battle to become the primary eyecare provider in the managed healthcare system of the future.

December 2006 Status: Implemented.

**2015 Recommendation:** Policy Resolution 7 adopted by the HOD in 2014 reaffirms that the COA HOD be a two day meeting, thus supplanting this resolution. Therefore, it is recommended the resolution be rescinded placed in the COA Policy Resolution Archive.

**1996 PR#6 COA Educational Offerings**

RESOLVED, that the Board of Trustees consider reducing the number of continuing education offerings for fiscal year 1996/97 and conduct a critical review in terms of a cost-benefit analysis of all educational offerings through the Association to determine whether to continue providing continuing education for future fiscal years to its members and the optometric community at large, and if so, in wheat form should it be offered.
2015 Recommendation: This was a one-time directive of the COA HOD for the 1996-97 year. Therefore it is recommended that the resolution be rescinded and placed in the COA Policy Resolution Archive.

1996 PR#14 Vision USA

RESOLVED, that the California Vision Project Board research offering optometric services during the month of December.

2015 Recommendation: This was a one-time directive of the COA HOD for December 1996. Therefore, it is recommended that the resolution be rescinded and placed in the COA Policy Resolution Archive.

1996 PR#15 1995 COA House of Delegates Resolution Number Nine

RESOLVED, that this 1996 House of Delegates reaffirm its support of Resolution Number Nine directing the COA Board of Trustees to collect all available information and supporting data relevant to the equitable Medi-Cal fees for Optometrists; and be it further

RESOLVED, that this 1996 House of Delegates direct the California Optometric Association Board of Trustees to consider implementation of the 1995 House of Delegates Resolution Number Nine as a top priority item; and be it further

RESOLVED, that the COA Board of Trustees report the status of 1995 House of Delegates Resolution Number Nine to the local societies on a quarterly basis.

2015 Recommendation: The intent of this resolution, along with 1995 PR 9 on this same subject, have been combined into a new policy resolution addressing equitable Medi-Cal fees for doctors of optometry (see Recommendation 4, proposed policy resolution on “Optometric Medi-Cal Fees.”) Therefore, it is recommended that this resolution be rescinded and placed in the COA Policy Resolution Archive.

1996 PR#18 “Critical Issues Forum”

RESOLVED, that the future House of Delegates agendas include a time specific for a Critical Issues Forum, directed by an appointed moderator, for the general House of Delegates to discuss issues and concerns, form opinions and consensus, and better represent their membership.

2015 Recommendation: The COA HOD adopted Policy Resolution 2 in 2012 that set forth the broad items to be placed on the HOD meeting agenda and provide that delegates be given sufficient time to discuss those matters. Therefore, as the 2012 resolution supersedes this resolution, it is recommended that it be rescinded and placed in the COA Policy Resolution Archive.

1996 PR#20 Non-discrimination

RESOLVED, that the California Optometric Association Board of Trustees research the feasibility of introducing ‘non-discrimination’ legislation which will mandate insurance companies and Health Maintenance Organizations to accept all certified providers who desire to be panel members and also prevent insurance companies from requiring prior authorization for a vision/eye examination from a primary care physician; be it further

RESOLVED, that the Board of Trustees report the result of their study to the membership prior to January 1, 1997.
2015 Recommendation: This was a one-time directive of the COA HOD calling for a report in 1997. Therefore, it is recommended that this resolution be rescinded and placed in the COA Policy Resolution Archive.

1996 PR#21 Originally Deleted 2007 Optometric Locator Service

RESOLVED, that the COA Board of Trustees study the necessary steps to promote optometry’s interest by way of establishing a public relations program, public service announcements and media advertisements.

December 2006 Status: COA is working towards updating the online features for the “Find An Eye Doc” online locator service, as well as updating the web site. The toll-free call center was implemented in 2002 but will be discontinued effective January 1, 2007.

2015 Recommendation: COA has implemented a number of services and programs to educate the public on optometry and its role in vision and eye health, including comprehensive public relations programs, social media initiatives and an online doctor locator. COA takes advantage of technology and other advances to improve these services on an ongoing basis. Furthermore, PR 21 adopted in 2007 and recommended to be retained as standing COA policy, effectively replaced this resolution by calling for a public relations program, public service announcements and media advertisements, all of which COA is engaged. Therefore, it is recommended that this resolution be rescinded and placed in the COA Policy Resolution Archive

1996 PR#22 “I’m In” Refund

RESOLVED, that the Board of Trustees urge each “I’m In” contributor, prior to returning any funds, to “roll over” their unspent contributions into a new fund for furthering amplification legislation.

2015 Recommendation: This resolution addresses a COA program that is no longer in existence. Therefore, it is recommended that this resolution be rescinded and placed in the COA Policy Resolution Archive.

1997 PR#2 Originally Deleted 2008 Conflict of Interest Policy

RESOLVED, that the COA Board of Trustees adopt a conflict of interest policy to be implemented by the 1997 Presidents’ Council.

December 2007 Status: Completed.

2015 Recommendation: Pursuant to 1995 Policy Resolution 5, COA adopted and has in place a conflict of interest policy, broad in scope, through which all officers, trustees, committee members and paid consultants are required to disclose any possible conflicts and acknowledge their understanding of the policy. Therefore, it is recommended that this resolution be rescinded and placed in the COA Policy Resolution Archive.

1997 PR#4 Originally Deleted 2007 Society Sponsored Trustee Candidates

RESOLVED, that a society may nominate an alternative trustee candidate at least 45 days prior to Congress and shall have his/her biography and the society’s board of directors’ written endorsement included in the House of Delegates binder.

December 2006 Status: Conflict of Bylaws.

2015 Recommendation: This policy resolution conflicts with Article III, Section 1(c) of the COA bylaws that provides that trustee nominees must be distributed to each society 60 days prior to the
COA HOD meeting. However, trustee nominations may be taken from the floor of the HOD during the first session. As this resolution conflicts with COA bylaws, which supersede policy resolutions, it is recommended that the policy resolution be rescinded and placed in the COA Policy Resolution Archive.

**1997 PR#12 Originally Deleted 2003 Expansion of COA Congress and Spring Optica**

**RESOLVED,** that COA Board of Trustees investigate and report to COA Congress in 1998, the feasibility of expanding the COA Congress and Spring Optica Education Program to feature national leaders in optometric education; and it be further

**RESOLVED,** that course offerings be increased to provide sufficient hours of continuing education, including CPR, to meet the current re-licensing requirements of our expanded scope of practice.

**December 2002 Status:** Completed.

**2015 Recommendation:** This was a one-time directive of the HOD for 1997-98 asking for specific considerations by a date certain. Since the adoption of this resolution, the COA Congress and Spring Optica Education Program have been reformatted and renamed. Therefore, it is recommended that this resolution be rescinded and placed in the COA Policy Resolution Archive.

**1998 PR#B-1 PARCA Support**

**RESOLVED,** that when signed into law, COA take appropriate action related to implementation of the “PARCA” of 1997 in California.

**2015 Recommendation:** This resolution referred to a bill introduced in Congress at that time, the Patient Access to Responsible Care Act of 1997, which would have added consumer protections and expanded liability for all employment-based health plans (ERISA). As this was a one-time directive toward specific legislation under consideration nearly 20 years ago, it is recommended that this resolution be rescinded and placed in the COA Policy Resolution Archive.

**1998 PR#B-7 Optometric Stamp**

**RESOLVED,** that the California Optometric Association actively support the efforts of the American Optometric Association to have a postage stamp issued recognizing the profession of optometry; and be it further

**RESOLVED,** that the California Optometric Association initiate a grass roots petition drive to collect one hundred thousand signatures supporting the issuing of a postage stamp honoring the profession of optometry; these petitions would be presented to the American Optometric Association at the 1998 American Optometric Association Congress; and be it further

**RESOLVED,** that the California Optometric Association encourage each state optometric association to develop a grass roots petition drive to support the American Optometric Association optometry postage stamp campaign.

**2015 Recommendation:** This resolution established a one-time, date certain directive nearly 20 years ago. Therefore, recommend that it be rescinded and placed in the COA Policy Resolution Archive.

**1998 PR#B-9 Change in Examination Date for Annual Licensing Examination**
RESOLVED, that the House of Delegates requests COA to strongly encourage the California State Board of Examiners to advance their examination for 1999 and subsequent years to as early a date as possible; and be it further

RESOLVED, that COA encourage the State Board provide the greatest advance notice (at least nine months) for examination dates in future years.

2015 Recommendation: The SBO optometric licensure exam is offered every six months beginning in March of each year and the exam scheduled is posted online two years in advance. As the objectives of this resolution were achieved, it is recommended that it be rescinded and placed in the COA Policy Resolution Archive.

1998 PR#C-1 Recognition of the University of California, Berkeley, School of Optometry

RESOLVED, that the California Optometric Association recognizes the many achievements and extends its sincerest congratulations to the University of California, Berkeley, School of Optometry; and be it further

RESOLVED, that the COA pauses during its 99th Annual Congress to express best wishes to UCBSO upon the occasion of this special anniversary and offer its best wishes for continued success.

2015 Recommendation: This resolution was introduced to celebrate and congratulate UCB School of Optometry on their 75th Anniversary - a one-time event. Therefore, it is recommended that it be rescinded and placed in the COA Policy Resolution Archive.

1999 PR#2 Originally Deleted 2004 Dues Amnesty

RESOLVED, that the California Optometric Association adopt a sixty-day, one-time only amnesty policy for all past dues for full-dues paying members who have been a non-member for at least one preceding year.


2015 Recommendation: As this policy resolution was a one-time request that has been completed, it is recommended that it be rescinded and placed in the COA Policy Resolution Archive.

1999 PR#17 Originally Deleted 2006 Occupational Vision Services

RESOLVED, all California optometrists including all COA members be encouraged to forward business leads to Occupational Vision Services, Inc. headquarters.

December 2005 Status: OVS operations were discontinued in 2005, and the corporation was dissolved by authorization of the OVS and COA Boards due to loss of contract with its principal customer and lack of new business.

2015 Recommendation: As subject organization of this policy resolution has been discontinued, it is recommended that it be rescinded and placed in the COA Policy Resolution Archive.

1999 PR#19 American Board of Optometric Practice

RESOLVED, the California Optometric Association supports board certification through the AOA’s efforts to establish the “American Board of Optometric Practice”.

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2015 Recommendation: This resolution was introduced when AOA first proposed board certification. It was replaced by 2000 PR 21. Therefore, it is recommended that it be rescinded and placed in the COA Policy Resolution Archive.

1999 PR#20 Establishing a COA Financial Advisory Task Force

RESOLVED, that the 1999 House of Delegates appoint a task force consisting of Dr. Tony Carnevali, Dr. Richard Hopping (Chair), Dr. Rick Iwai, Dr. Joseph Mallinger and Dr. Larry Thal to study the financial policies and procedures of the COA and its related entities and develop the necessary recommendations to ameliorate any current fiscal problems; further be it

RESOLVED, that a preliminary report be given to the 1999 President’s Council and a full report be given by the task force to the House of Delegates at the next COA Congress.

2015 Recommendation: As this was a one-time directive of the HOD for 1999, it is recommended that it be rescinded and placed in the COA Policy Resolution Archive.

2000 PR#4 Originally Deleted 2006 Dues Increase

RESOLVED, that in order to develop and submit a balanced annual budget to the House of Delegates, the COA Board of Trustees is authorized, but only if deemed absolutely necessary and properly justified, to increase dues up to a maximum of 7% per year for each of the five fiscal years beginning on January 1, 2000 and ending on December 31, 2004; and be it

AND BE IT FURTHER RESOLVED that any such dues increase is to become effective only after the annual budget is approved by the House of Delegates.

December 2005 Status: Implemented and effective January 2000. There has been no general dues increase since 1994.

2015 Recommendation: As this was a one-time directive of the HOD affecting the years 2000-2004, it is recommended that it be rescinded and placed in the COA Policy Resolution Archive.


RESOLVED, that the California Optometric Association, House of Delegates, recommends that all school children receive adequate eye and vision screening to determine if further referral is necessary, and, be it further

RESOLVED, that the California Optometric Association take up the cause of children with undetected vision and eye problems by working with appropriate state agencies that will promote early detection in school screenings.


2015 Recommendation: The task force recommends the adoption of a new policy resolution addressing early detection of children’s eye and vision problems (see Recommendation 3, proposed policy resolution on “Mandatory Children’s Comprehensive Eye Exams.”) Therefore, it is recommended that this resolution be rescinded and placed in the COA Policy Resolution Archive.

2000 PR#8 Originally Deleted 2007 Dues Schedule for Associate Membership Categories
RESOLVED, that the dues for the Associate Substantial Interest Corporate Members be assigned at fifty percent (50%) of full member dues, therefore be it further

RESOLVED, that the dues for the Associate (non-OD) Educator Member be assigned at forty percent (40%) of full member dues, therefore be it further

RESOLVED, that the dues for the Associate Substantial Interest Members be assigned at forty percent (40%) of full member dues, and be it further

RESOLVED, that the dues for the Associate non-US Resident and Associate non–CA Resident Members be assigned at forty percent (40%) of full member dues.


2015 Recommendation: COA HOD-adopted Policy Resolution Number 4 from 2013 sets forth the current dues schedule for all COA members. Additionally, this same resolution rendered any existing policy resolution related to the COA member dues, null and void. Therefore, it is recommended that the resolution be rescinded and placed in the COA Policy Resolution Archive.

2000 PR#9 Originally Deleted 2007 Dues Schedule for Partial Practice Membership Categories

RESOLVED, that Partial Practice Member dues will be assigned at fifty percent (50%) of full member dues.


2015 Recommendation: COA HOD-adopted Policy Resolution Number 4 from 2013 sets forth the current dues schedule for all COA members. Additionally, this same resolution rendered any existing policy resolution related to the COA member dues, null and void. Therefore, it is recommended that the resolution be rescinded and placed in the COA Policy Resolution Archive.

2000 PR#10 Originally Deleted 2007 Dues Schedule for Federal Service Membership Categories

RESOLVED, that Federal Service members be assigned dues at fifty percent (50%) of full member dues.


2015 Recommendation: COA HOD-adopted Policy Resolution Number 4 from 2013 sets forth the current dues schedule for all COA members. Additionally, this same resolution rendered any existing policy resolution related to the COA member dues, null and void. Therefore, it is recommended that the resolution be rescinded and placed in the COA Policy Resolution Archive.

2000 PR#11 Originally Deleted 2007 Dues Schedule for Special Achievement Members

RESOLVED, that the Special Achievement Membership category be assigned zero percent (0%) of full member dues.


2015 Recommendation: COA HOD-adopted Policy Resolution Number 4 from 2013 sets forth the current dues schedule for all COA members. Additionally, this same resolution rendered any
existing policy resolution related to the COA member dues, null and void. Therefore, it is recommended that the resolution be rescinded and placed in the COA Policy Resolution Archive.

2000 PR#12 Originally Deleted 2007 Dues Schedule for Life Members

RESOLVED, that the remaining Life Members pay ten percent (10%) of full dues consistent with Retired Members.

December 2005 Status: Rescinded by 2002-PR#1 regarding life membership.
2015 Recommendation: COA HOD-adopted Policy Resolution Number 4 from 2013 sets forth the current dues schedule for all COA members. Additionally, this same resolution rendered any existing policy resolution related to the COA member dues, null and void. Therefore, it is recommended that the resolution be rescinded and placed in the COA Policy Resolution Archive.

2000 PR#14 Originally Deleted 2007 Dues Schedule for Newly Licensed Optometrists

RESOLVED, that newly licensed members pay dues on a graduated basis, beginning with zero (0) dues the balance of the calendar year after the initial licensure, zero (0) dues for the first full calendar year of licensure, then twenty percent (20%), the second full calendar year, then forty percent (40%) the third calendar year, then sixty percent (60%) the fourth calendar year, then eighty percent (80%) in the fifth calendar year, then full dues the sixth year of licensure and thereafter.


2015 Recommendation: COA HOD-adopted Policy Resolution Number 4 from 2013 sets forth the current dues schedule for all COA members. Additionally, this same resolution rendered any existing policy resolution related to the COA member dues, null and void. Therefore, it is recommended that the resolution be rescinded and placed in the COA Policy Resolution Archive.

2000 PR#17 Originally Deleted 2006 House of Delegates Financial Task Force Extension

RESOLVED, that the California Optometric Association House of Delegates extends the charge to the 1999 House of Delegates Financial Task Force through June 30, 2000; and it be further RESOLVED, that upon completion the Financial Advisory Task Force’s charge will render a report to the California Optometric Association Board of Trustees.

December 2005 Status: Completed. No additional action necessary.

2015 Recommendation: As this policy resolution was a one-time action request that has been completed, it is recommended that it be rescinded and placed in the COA Policy Resolution Archive.

2000 PR#19 Review of 5-year Resolutions

RESOLVED, active policy resolutions adopted by the House of Delegates of the California Optometric Association that are 5 or more years old shall be presented to the current House of Delegates for review; and be it further RESOLVED, that after review by the House of Delegates the resolutions may be retained in their entirety or deleted as no longer applicable.
2012 Status: Policy resolutions enacted in the previous 5 or more years are regularly reviewed by the COA House of Delegates as a standing agenda item. The COA Board of Trustees will propose a policy resolution to the 2013 COA House of Delegates to replace this resolution to more create a more efficient resolution review process by the COA House of Delegates.

2015 Recommendation: In 2013, the HOD enacted Policy Resolution 6 which set forth a new process for HOD review of past resolutions. In addition, that resolution rendered any existing policy resolution related to the COA HOD review of policy resolutions null and void. Therefore, it is recommended that this resolution be rescinded and placed in the COA Policy Resolution Archive.

2015 Recommendation: This resolution replaced 1999 PR 19. Board certification has been adopted by the AOA HOD. Therefore, it is recommended that it be rescinded and placed in the COA Policy Resolution Archive.

2000 PR#21 American Board of Optometric Practice

RESOLVED, that the House of Delegates ask the California Optometric Association Board of Trustees to express concern to the American Optometric Association House of Delegates regarding the present structure and implementation of the Board certification process;

RESOLVED, that the California Optometric Association Board of Trustees encourage the American Optometric Association to collaborate with organizations involved in the future of the Optometric Profession such as National Board of Examiners in Optometry, Association of Regulatory Boards of Optometry, Association of Schools and Colleges of Optometry, American Academy of Optometry to conduct an impact study regarding optometric credentialing prior to implementation.

2015 Recommendation: This resolution replaced 1999 PR 19. Board certification has been adopted by the AOA HOD. Therefore, it is recommended that it be rescinded and placed in the COA Policy Resolution Archive.

2001 PR#2 Originally Deleted 2008 Legislative Fund

RESOLVED, that the COA House of Delegates enact a special dues assessment applied to all COA members excluding retired, life, and honorary members, through March 2005 in an amount not to exceed $14.00 per month per member; and be it further

RESOLVED, that all non-OD Educator members pay the assessment in the same percentage as they pay dues; and be it further

RESOLVED, that the COA House of Delegates direct the COA Board of Trustees to make every effort to secure financial support for these legislative activities from non-COA members, corporations, local societies and any other feasible source in order to mitigate the amount and/or the duration of any additional special dues assessment; and be it further

RESOLVED, that the funds received from the special dues assessment and non-COA sources be maintained in a separate financial account the balance of which will not be published at the COA annual Congress and be utilized for activities supporting enactment of the next optometric scope amplification law either through the legislative or the initiative process, or for other legislative contingencies; and be it further

RESOLVED, that if the funds are to be used for any other legislative activity or purpose other than optometric scope amplification law purposes, expenditures must be approved by the House of Delegates, and be it further

RESOLVED, that the COA Board of Trustees report at the 2005 House of Delegates on the status of funds raised, the potential for achieving amplification through legislative and/or initiative action, and the need for additional funds to achieve legislative goals.
**December 2007 Status:** Please refer to PR#2 to the 2008 House of Delegates.

**2015 Recommendation:** 2013 COA HOD-adopted Policy Resolution 2 replaced this resolution and set a new assessment amount for the COA Legislative Fund. Therefore, it is recommended that this resolution be rescinded and placed in the COA Policy Resolution Archive.

**2001 PR#5 Originally Deleted 2007 Standardization of Medication Labeling**

RESOLVED, that the California Optometric Association encourage pharmaceutical companies to enlarge the print on prescription labels and recommend the Food and Drug Administration develop a minimum standard for print on prescription labels.

**December 2006 Status:** No federal or state law or regulation currently requires enlarged print for low-vision clients and bills that have been introduced in California to achieve this result have failed over the years. The argument that has prevailed is that enlarging print on prescription labels is impractical due to the amount of information that is already required by law to appear on each label. Target stores are experimenting with reducing the size of the company’s logo and non-prescription information to enable them to enlarge or clarify information most likely to be vague or misleading. Staff recommends a collaborative effort with the California Pharmacists Association and pharmaceutical manufacturers to implement the intent of this resolution.

**2015 Recommendation:** COA HOD-approved 2002 Policy Resolution 8 that effectively replaced this resolution. Additionally, the goals of the policy were accomplished legislatively in 2007 (see 2002 Policy Resolution Number 8, below). Therefore, it is recommended that this resolution be rescinded and placed in the COA Policy Resolution Archive.

**2001 PR#7 Originally Deleted 2009 Mandated Comprehensive Eye Examinations for Students Prior to 1st Grade**

RESOLVED, that the California Optometric Association study the feasibility of mandatory comprehensive vision examinations for all students prior to entering first grade, and encourage appropriate legislation regarding this issue.

**December 2008 Status:** (2003) PR#10 having been deleted by resolution by the House of Delegates, (2001) PR#7 now serves no practical purpose.

**2015 Recommendation:** The task force recommends the adoption of a new policy resolution addressing early detection of children's eye and vision problems (see Recommendation 3, proposed policy resolution on “Mandatory Children’s Comprehensive Eye Exams.”) Therefore, it is recommended that this resolution be rescinded and placed in the COA Policy Resolution Archive.

**2001 PR#9 Originally Deleted 2009 Pediatric and Child Vision Examinations**

RESOLVED, the California Optometric Association Board of Trustees direct the appropriate committees to research the efficacy of Kentucky’s mandated exam legislation (of such mandates), the possible funding sources for California school children to receive such exams and possible partners for COA’s efforts and make recommendations for future legislative activity at 2001 President’s Council; and be it further

RESOLVED, the California Optometric Association Board of Trustees consider adopting a legislative strategy to achieve mandated comprehensive vision exams for all California school children.
**December 2008 Status:** Pursuant to (2003) PR #10, the Legislation and Regulation Committee has adopted the spirit of this Resolution as part of its Approved Legislative Policies the past two sessions and plans to do so again. The Committee continues to evaluate opportunities to sponsor, support, and enact legislation to require a comprehensive eye examination before a child may be enrolled in a California school. Accordingly, (2001) PR #9 has been superseded by (2003) PR #10 and serves no continuing purpose.

**2015 Recommendation:** The task force recommends the adoption of a new policy resolution addressing early detection of children’s eye and vision problems (see Recommendation 3, proposed policy resolution on “Mandatory Children’s Comprehensive Eye Exams.”) Therefore, it is recommended that this resolution be rescinded and placed in the COA Policy Resolution Archive.

**2001 PR#10** Originally Deleted 2008 DMV Policy for Dealing with the Licensure of Visually Handicapped Applicants for a Drivers License

RESOLVED, that the California Optometric Association attempt to convene a meeting of those parties involved with the licensing process, including, but not limited to eye doctors, low vision specialists, Dept. of Motor Vehicles staff, concerned consumer groups, researchers in the field of driver safety, etc., to discuss appropriate legislation, regulation and/or DMV policy for dealing with the licensure of visually handicapped applicants for a drivers license, and be it

RESOLVED, further, that the COA urge the AOA to meet with appropriate federal agencies to discuss the requirements of driving with a visual impairment, and be it

RESOLVED, further, that the California Optometric Association Board of Trustees, formally requests that the University of California, Berkeley, School of Optometry and the Southern California College of Optometry present the issue of visually impaired drivers to their faculties as a potential area of research and investigation.

**December 2007 Status:** Completed.

**2015 Recommendation:** As this resolution is nearly 15 years old, was declared completed by the HOD seven years ago and was a one-time directive of the HOD, it is recommended that it be rescinded and placed in the COA Policy Resolution Archive.

**2002 PR#1** Originally Deleted 2008 Life Membership

RESOLVED, that dues for life members in the California Optometric Association be set as zero, retroactive to January 1, 2001.

**December 2007 Status:** Completed.

**2015 Recommendation:** COA HOD-adopted Policy Resolution 4 from 2013 sets forth the current dues schedule for all COA members; life members remain at zero dues. Additionally, this same resolution rendered any existing policy resolution related to the COA member dues, null and void. Therefore, it is recommended that the resolution be rescinded and placed in the COA Policy Resolution Archive.

**2002 PR#7** Originally Deleted 2008 Rescind Policy Resolution Number Eleven to the 1997 COA House of Delegates

RESOLVED, that the 2002 House of Delegates rescind Resolution Number Eleven to the 1997 House of Delegates to allow overlapping continuing education with the House of Delegates, effective in 2003.
December 2007 Status: Completed.

2015 Recommendation: The action directed by this COA HOD-adopted policy resolution was done and it no longer has any practical effect. Therefore, it is recommended that the resolution be rescinded and placed in the COA Policy Resolution Archive.

2002 PR#8 Originally Deleted 2011 Promotion of Prescription Inserts

RESOLVED, that the California Optometric Association should promote legislation or other means to ensure that prescription drug inserts be printed in an adequately large type font size to ensure that they are readable by the general public.

December 2010 Status: SB472 was signed into law in 2007 to require the Board of Pharmacy to establish parameters that will standardize prescription container labels into a patient-centered format. The regulations require at least a 10-point sans serif typeface or, if requested by the consumer, at least a 12-point typeface.

2015 Recommendation: As noted above, the subject of this resolution was accomplished. As the resolution called for an action that has been accomplished, it is recommended that it be rescinded and placed in the COA Policy Resolution Archive.

2002 PR#14 Originally Deleted 2008 Legislative Fund Assessments

RESOLVED, that the 2002 House of Delegates confirms the decision of the Board of Trustees to exempt student and postgraduate members of this Association from the Legislative Fund assessment.

December 2007 Status: Please refer to PR#2 to the 2008 House of Delegates.

2015 Recommendation: In 2013, the COA HOD adopted Policy Resolution Number 2 to govern the assessment policy and amount of the Legislative Fund assessment and continued the exemptions for student and post-graduate members. As this resolution has been replaced by 2013 PR 2, it is recommended it be rescinded and placed in the COA Policy Resolution Archive.

2002 PR#16 Originally Deleted 2008 Independent House of Delegates

RESOLVED, that the Board of Trustees investigate separating the House of Delegates from the annual California Optometric Association OptoWest meeting and report back to the 2003 House of Delegates; and be it further

RESOLVED, that the California Optometric Association consider convening a two-day meeting of the House of Delegates on a weekend and date suitable for this function.

December 2007 Status: Completed.

2015 Recommendation: This resolution called for a one-time report relative to separating the COA HOD meeting from OptoWest that was completed in 2003. Further, the resolution called for a two-day HOD meeting. In 2014, Policy Resolution 7 renewed the HOD directive that the COA HOD meeting be held over two days. Therefore, it is recommended that as this resolution no longer has any practical affect that it be rescinded and placed in the COA Policy Resolution Archive.

2003 PR#1 Originally Deleted 2009 Scope Fund
**RESOLVED**, that the 2003 House of Delegates confirm the actions of the Board of Trustees in not refunding excess SCOPE Fund assets; and be it further

**RESOLVED**, that any amounts still remaining in the SCOPE Fund be used solely for continuing implementation of SB 929.

**December 2008 Status**: In 2008, all funds remaining in the SCOPE Fund were expended therefore, retention of (2003) PR#1 is no longer required.

**2015 Recommendation**: This resolution directed that excess Scope Fund assessments collected from members be used to implement SB 929. As indicated above, COA did just that. Therefore, it is recommended that as this resolution no longer has any practical affect that it be rescinded and placed in the COA Policy Resolution Archive.

**2003 PR#8 Originally Deleted 2008**  **Separation of the House of Delegates from Optowest**

**RESOLVED**, that the California Optometric Association House of Delegates favorably endorse the Board of Trustees decision to separate the House of Delegates from OptoWest in 2004.

**December 2007 Status**: Completed.

**2015 Recommendation**: OptoWest no longer exists as a separate multi-day statewide conference. The COA HOD is a standalone meeting of the association. However, the COA Board of Trustees may at its discretion schedule educational meetings events at same location and time date(s) as the COA HOD so long as those programs do not conflict with delegates’ attendance at the COA HOD meeting. Therefore it is recommended that it be rescinded and placed in the Policy Resolution Archive.

**2003 PR#10 Originally Deleted 2009**  **Children’s Vision**

**RESOLVED**, that the California Optometric Association study state legislation, following the pattern of successful Kentucky legislation, that requires infant and children vision examinations be completed before entering elementary school; and be it further

**RESOLVED**, that such comprehensive eye examinations be provided by an eye care practitioner.

**December 2008 Status**: The Legislation and Regulation Committee has adopted the spirit of this Resolution as part of its Approved Legislative Policies the past two sessions and plans to do so again. The Committee continues to evaluate opportunities to sponsor, support, and enact legislation to require a comprehensive eye examination before a child may be enrolled in a California school.

**2015 Recommendation**: The task force recommends the adoption of a new policy resolution addressing early detection of children’s eye and vision problems (see Recommendation 3, proposed policy resolution on “Mandatory Children’s Comprehensive Eye Exams.”) Therefore, it is recommended that this resolution be rescinded and placed in the COA Policy Resolution Archive.

**2003 PR#11 Originally Deleted 2008**  **State Board of Optometry**

**RESOLVED**, that the California Optometric Association Board of Trustees utilize all available resources such as the Keyperson Program and grassroots optometry to urge policymakers to facilitate appointments to the Board of Optometry; and be it further
RESOLVED, that the issue of appointments to the reconstituted California State Board of Optometry be placed at the California Optometric Association’s highest level of priority and the California Optometric Association should utilize all available resources to facilitate the full reconstitution of the California State Board of Optometry.

December 2007 Status: Completed.

2015 Recommendation: In 2004, Policy Resolution Number 7 was adopted by the COA HOD to delete this resolution as its objective was met. Therefore, it is recommended to rescind and place this resolution in the COA Policy Resolution Archive.

2004 PR#2 Originally Deleted 2009 Legislative Fund

RESOLVED, that the 2004 House of Delegates approves extending the special monthly dues assessment applied to all COA members through calendar year 2008, excluding student, retired, life, honorary, distinguished, special achievement, and dues level one members, in an amount not to exceed Fourteen Dollars ($14.00) per member per month, with these funds to be used solely for future scope of practice expansion, amplification, enhancement, and protection.

December 2008 Status: (2008) PR#2 extended and superseded (2004) PR #2; therefore, this resolution is no longer necessary.

2015 Recommendation: In 2013, the COA HOD replaced this resolution with Policy Resolution 2 to govern the assessment policy and amount of the Legislative Fund Assessment. As this resolution is no longer applicable, it is recommended to rescind and place it in the COA Policy Resolution Archive.

2004 PR#3 Originally Deleted 2009 Public Awareness

RESOLVED, that the California Optometric Association continue to seek sources to support and enhance a public awareness/education campaign; and be it further

RESOLVED, that the California Optometric Association’s House of Delegates authorizes a two-year special assessment of dues up to the maximum monthly amount of Twenty Dollars ($20.00) to be used solely for the purposes of conducting a public awareness/education campaign contingent and commensurate with corporate sponsorship providing matching funds for the program; and be it further

RESOLVED, that such assessment is to be calculated in the same proportion as the percentage of California Optometric Association dues currently paid by that member.

December 2008 Status: Major corporate sponsorship requests were submitted but denied for funding. The communications committee has been working with a public relations firm since then to leverage public awareness through media efforts.

2015 Recommendation: The two-year special assessment of members for a public education campaign was never carried out. As mentioned above, COA has since been using general operations resources to contract with a public relations firm to conduct public education and awareness activities, in addition to work done in-house at COA and by AOA. Further, invoking a two-year special assessment more than 10 years after this resolution was adopted is not timely. Therefore, it is recommended to rescind and place it in the COA Policy Resolution Archive.

2004 PR#5 Originally Deleted 2009 House of Delegates Scheduling
RESOLVED, that the 2004 House of Delegates agrees with the recommendation of the Board of Trustees and Presidents’ Council with regard to the next House of Delegates being held in January, February or March of 2006, and be it further

RESOLVED, that the 2004 House of Delegates agrees with the recommendation of the Board of Trustees and Presidents’ Council that there not be a House of Delegates in calendar year 2005.

December 2008 Status: Implemented.

2015 Recommendation: As noted above, the subject of this resolution addressed a one-time situation and was accomplished. Therefore, it is recommended to rescind and place the resolution in the COA Policy Resolution Archive.

2004 PR#7 Originally Deleted 2009 State Board of Optometry

RESOLVED, that 2003 Policy Resolution Number Eleven related to the reconstitution of the California State Board of Optometry be deleted, as the objective of said resolution has been met.


2015 Recommendation: As the direction of this resolution has been carried out and addressed a one-time situation, it is recommended that it be rescinded and placed in the COA Policy Resolution Archive.

2004 PR#15 Originally Deleted 2011 Nominating Committee

RESOLVED that the 2004 California Optometric Association House of Delegates establish the following structure and composition of the Nominating Committee:
1. COA second Past-President as chair (one year term non-voting member)
2. COA Immediate Past-President (one year term voting member)
3. Additionally six voting members consisting of either the current President or a Past-President of societies chosen at random at each annual House of Delegates serving staggered two year terms. Each chosen society shall select their current president or a past-president and forward their name to the COA Presidents for appointment within 30 days of the close of the House of Delegates.
4. At the 2004 House of Delegates three societies shall be chosen at random to serve one year terms and three societies shall be chosen at random to serve two year terms. Three other societies shall be chosen as alternates at each succeeding House of Delegates three societies and additionally three alternates be chosen at random.
5. A society may not be selected again until that society’s member has completed their term.
6. A society may not put forth the name of an individual who has served on the COA Board of Trustees within the last five years.

December 2010 Status: Completed.

2015 Recommendation: In 2013, the COA HOD adopted Policy Resolution 3 which set forth the operating procedures for the COA Nominating Committee and rendered any previous resolution on this topic null and void. In addition, in the same year, the HOD approved Bylaws Amendment 3 that established the composition and terms of the committee. Therefore, it is recommended that the resolution be rescinded and placed in the COA Policy Resolution Archive.

2006 PR#2 Originally Deleted 2011 Nominating Committee Composition
**RESOLVED**, that the COA Nominating Committee consist of the third Past President serving as non-voting chairman and the second Past President serving as a voting member leaving all other Recommendations of PR Fifteen 2004 intact.

**December 2010 Status**: Completed.

**2015 Recommendation**: In 2013, the COA HOD adopted Bylaws Amendment 3 that established the composition and terms of the committee. As this resolution has been superseded by the bylaws and no longer has any practical effect, it is recommended that it be rescinded and placed in the COA Policy Resolution Archive.

**2007 PR#8 Originally Deleted 2012** **Low Vision Rehabilitation Committee**

**RESOLVED**, that the House of Delegates requests the California Optometric Association Board of Trustees establish a Low Vision Committee. This committee would represent COA at the American Optometric Association Low Vision Rehabilitation Section.

**December 2011 Status**: COA has established Low Vision and Rehabilitation Section through a bylaws amendment for COA members who are interested in low vision. Recently, this section has been working with COA’s HCDS Committee to address low vision reimbursement problems with VSP. The low vision section also has published fact sheets for COA members that list the low vision contacts at the DMV.

**2015 Recommendation**: In 2009, the COA HOD created through Bylaws Amendment 3 the COA Low Vision Rehabilitation Section “to improve the quality of low vision rehabilitation services provided to the public and to promote the professional development of COA member optometrists.” As this resolution has been accomplished, it is recommended that it be rescinded and placed in the COA Policy Resolution Archive.

**2008 PR#2 Originally Deleted 2013** **Legislative Fund Assessment**

**RESOLVED**, that the 2008 House of Delegates approves extending the special monthly dues assessment applied to all COA members through calendar year 2010, excluding student, retired, life, honorary, distinguished, special achievement, and dues level one members, in an amount not to exceed Fourteen Dollars ($14.00) per member per month, with these funds to be used solely for future scope of practice enhancement and protection.

**2012 Status**: The leg fund has been used to fund scope of practice activities including town hall meetings, opinion research, legislatively related media outreach and PAC administrative expenses. We have also used the money to develop stronger relationships with targeted lawmakers through vision fairs and other public awareness activities.

**Recommendation**: The COA Board of Trustees will propose a similar policy resolution to the 2013 COA House of Delegates to replace (2008) PR#2 in order to continue the Legislative Fund Assessment past the 2010 expiration date.

**2015 Recommendation**: Policy Resolution 6, adopted by the HOD in 2013, changed the amount of the assessment and rendered this resolution null and void. It is recommended that the resolution be placed in the COA Policy Resolution Archive.

**2008 PR#3 Originally Deleted 2013** **Dues Increase 2009-2011**
RESOLVED, that COA may increase the full member dues rate up to a maximum of $60.00 per year for the three-year period of 2009-2011, and be it further

RESOLVED, that these dues increases will be used for the sole purpose of balancing the Association’s general operating budget.

2012 Status: No dues increase for 2012 or proposed for 2013.
Recommendation: Delete. The effective dates of this policy resolution have expired.

2015 Recommendation: This resolution addressed a time-certain period, i.e., 2009-11. In 2013, the COA HOD adopted Policy Resolution 4 (amended by 2014 Policy Resolution 1) that set forth the entire COA dues schedule and declared any other existing policy resolution related to COA member dues null and void. Therefore, as this resolution no longer has any practical effect, it is recommended that it be rescinded and placed in the COA Policy Resolution Archive.

2010 PR#5 Deleted 2013 and replaced in 2013 by PR#4 Dues Reorganization

RESOLVED, that effective fiscal year 2011 newly licensed members pay dues based on the following ascending dues scale and that existing members be reassigned accordingly:
• zero (0) dues for the balance of the calendar year of initial licensure in California;
• ten percent (10%) for the first year following initial licensure in California;
• twenty percent (20%) for the second year following initial licensure in California;
• fifty percent (50%) for the third year following initial licensure in California;
• seventy-five percent (75%) for the fourth year following initial licensure in California;
• one hundred percent (100%) for the fifth year following initial licensure in California and thereafter; and be it further

RESOLVED, that the Clinic member category be closed immediately to new members, and be it further

RESOLVED, that the reduced dues applied to new solo practice and new partnership practice member types be closed to new applicants, and requests for dues reductions be considered through the dues waiver process on a case-by-case basis.

February 2013 Status: In 2013, the HOD adopted PR#4 to revise dues and consolidate the entire COA dues schedule into one policy resolution, PR#4.

2015 Recommendation: In 2013, the COA HOD adopted Policy Resolution 4 (amended by 2014 Policy Resolution 1) that set forth the entire COA dues schedule and declared any other existing policy resolution related to COA member dues null and void. Therefore, as this resolution no longer has any practical effect, it is recommended that it be rescinded and placed in the COA Policy Resolution Archive.

2010 PR#12 Deleted 2013 Extension of the Legislative Fund Assessment

RESOLVED, that the 2010 House of Delegates approves extending the special monthly dues assessment applied to all COA members through calendar year 2012, excluding student, retired, life, honorary, distinguished, special achievement, and dues level one members, in an amount not to exceed Fourteen Dollars ($14.00) per member per month, with these funds to be used solely for future scope of practice enhancement and protection.

December 2010 Status: Implemented.
2015 Recommendation: In 2013, the COA HOD replaced this resolution with Policy Resolution 2 to govern the assessment policy and amount of the Legislative Fund Assessment. As this resolution is no longer applicable, it is recommended to rescind and place it in the COA Policy Resolution Archive.

Attachment B

Proposed Policy Resolution Number One
to the 2016 House of Delegates

COA Policy Resolutions: Definitions and Retention

Proposed by the COA Board of Trustees

WHEREAS, in the course of its century-plus history, the governing body currently called the California Optometric Association (COA) House of Delegates (HOD) has been exclusively empowered and is responsible for establishing COA’s official views and positions on all issues deemed important to the California optometric profession, as well as to set membership dues and assessments, along with assigning specific directions to the COA Board of Trustees and COA committees, through the use of policy resolutions; and,

WHEREAS, of the hundreds of policy resolutions adopted over the years by the COA HOD, many have a direct impact on the day-to-day operations of COA, including, but not limited to, budgets; legislative and regulatory activity; third-party payer engagement; education programs; and, communications, public relations and public affairs activity; and,

WHEREAS, in exercising its authority and responsibility, the COA HOD does not have in place formal policy resolution definitions, be they designated to be actively implemented or pursued, ongoing policy or rescinded; and,

WHEREAS, since the COA HOD voted to eliminate the COA Codified Policy Manual wherein policy resolutions adopted by the COA HOD were documented, there currently is not in place a cohesive, formal mechanism to document and store in an organized manner policy resolutions adopted by the COA HOD, be they actively pursued, ongoing policy or rescinded; and,

WHEREAS, it is in the interest for the effective and efficient operations of COA at all levels that the rich history of COA governance through policy resolutions adopted by the COA HOD be defined and maintained in an organized manner that is transparent and accessible to all COA members and other stakeholders as deemed appropriate; now, therefore be it

RESOLVED, that the COA House of Delegates (HOD), in an effort to clearly set forth the designation of policy resolutions adopted so as to better guide the governance and operation of COA, and to maintain those policy resolutions in an organized manner that is transparent to all members and other stakeholders as deemed appropriate, enacts the following definitions of policy resolutions and the mechanisms for their documentation and storage:

4. **Active:** A policy resolution that represents the policy of COA as adopted by the COA HOD and in which its intent or mandate is being actively implemented or pursued by COA. These resolutions shall be kept in a record called "COA Active Policy Resolutions."

5. **Standing Policy:** An active policy resolution that has been implemented, completed or achieved, and has been determined to reflect an ongoing matter, which the COA HOD determines continues to be policy of COA. These resolutions shall be kept in a record
called "COA Standing Policies," which shall replace the “COA HOD Resolution Implementation Record” created by Policy Resolution 6 in 2013.

6. **Archived:** An active or standing policy resolution that has been implemented, completed, achieved or replaced that the COA HOD determines is no longer applicable or representative of COA policy. These resolutions shall be kept in a record called the "COA Policy Resolution Archive."

And, be it further

RESOLVED, that active, standing policy and archived resolutions be subject to review as COA societies and the COA Board of Trustees deem necessary in accordance with the procedures set forth in 2013 Policy Resolution 6, relating to review of policy resolutions titled “Review of Policy Resolutions”; and be it further

RESOLVED, that active, standing policy and archived resolutions be made accessible to COA members and other stakeholders as determined appropriate by electronically or otherwise by 1) chronologically listed and attached to the COA bylaws, and 2) as separate documents by classification.

Resolution adopted as amended.

**Attachment C**

**Proposed Policy Resolution Number Two**

**To the 2016 House of Delegates**

**Mandatory Children’s Comprehensive Eye Exams**

Proposed by the COA House of Delegates Board of Trustees

WHEREAS, countless California children enter school with undetected eye and vision problems that result in preventable academic, behavioral and social problems; and,

WHEREAS, these resulting struggles extract virtually incalculable financial costs from the affected children, their families, taxpayers, society and the general economy, as well as negatively impair the self-esteem of the child; and,

WHEREAS, genuinely concerned by the needless hardships imposed on these children, the California Optometric Association has long been an active leader in advocating for an effective, sensible solution for alleviating the suffering caused by undetected eye and vision problems; and,

WHEREAS, in exerting its leadership, the COA House of Delegates has adopted numerous policy resolutions over the years seeking to enact public policy and other strategies for the early detection of ocular impairments in children; and,

WHEREAS, COA wishes to combine and update these policy resolutions to succinctly state its commitment to enact public policy mandating comprehensive eye exams for children entering school, as well as to influence organizations comprised of health care professionals and other stakeholders to undertake initiatives to promote the importance of comprehensive eye exams for these children; now, therefore be it
RESOLVED, that the California Optometric Association take up the cause of children with undetected vision problems by working with appropriate state agencies that will promote the early detection of vision and eye health problems; and, be it further

RESOLVED, that the COA Board of Trustees make every effort to communicate with concerned organizations, such as those representing pediatricians, nurses, etc., regarding the importance of comprehensive eye and vision care for children; and, be it further

RESOLVED, that given the fact that vision screenings are not an adequate substitute for the detection of many vision or eye problems in children, that the COA Board of Trustees make every effort to introduce and/or support legislation requiring all California children to have a comprehensive eye exam before being admitted to school; and, be it further


POTENTIAL FISCAL IMPACT: The COA Strategic Plan calls for the enactment of legislation mandating comprehensive eye exams for children before they enter school. The plan estimates a $35,000 cost for a targeted public relations campaign over time, along with staff, legislative advocate and key person outreach costs, to sponsor a bill, that have been included. Funding to pursue implementation of this resolution has been included in the proposed 2016 and 2017 COA budgets.

Resolution adopted as amended.

Attachment D

Proposed Policy Resolution Number Three
To the 2016 House of Delegates
Optometric Medi-Cal Fees

Proposed by the COA Board of Trustees

WHEREAS, a record number of Californians are enrolled in California’s Medi-Cal system for eye and vision care; and,

WHEREAS, these millions of California adults and children deserve access to quality eye and vision care from doctors of optometry; and,

WHEREAS, access to doctors of optometry by these Californians can be limited at times by poor and inequitable reimbursement of these doctors; and,

WHEREAS, the COA House of Delegates has adopted policy resolutions over the years seeking reimbursement equity for doctors of optometry under the Medi-Cal system for professional services rendered; and
WHEREAS, the COA HOD wishes to combine and update these policy resolutions to succinctly state COA’s policy that the services of doctors of optometry be equitably reimbursed under the California Medi-Cal system; now, therefore be it

RESOLVED, that it is the policy of the California Optometric Association that doctors of optometry be reimbursed equitably under the California Medi-Cal system; and, be it further

RESOLVED, that the California Optometric Association pursue all options to achieve Medi-Cal reimbursement equality, including, but not limited to, requesting the Public Vision League to initiate appropriate action; and, be it further

RESOLVED, that the California Optometric Association keep its membership informed of its actions in this regard; and, be it further


POTENTIAL FISCAL IMPACT: The COA Strategic Plan calls for greater access to and equitable reimbursement public sector insurance programs, including Medi-Cal. Funding to implement this resolution, which includes staff, legislative advocacy and key person outreach to sponsor a bill or regulatory action, has been included in the proposed 2016 and 2017 COA budgets.

Resolution adopted as amended.
WHEREAS, Policy Resolution Number Six adopted by the 2013 COA House of Delegates resolved that those active policy resolutions adopted by the COA House of Delegates that are five or more years old which are recommended for change or deletion by the COA Board of Trustees or any COA society be presented to the current COA House of Delegates for review; now, therefore be it

RESOLVED, that the recommendation noted on the COA HOD policy resolutions listed below be adopted.

(2011) PR#1 Collaborative Health Care Task Force

RESOLVED, that the COA Board of Trustees encourage the Healthcare Delivery Systems Committee make as a priority collaborations with other health care organizations and agencies.

2015 Status: COA regularly and actively engages, forms and joins coalitions with other health care organizations and agencies relative to health care delivery systems as issues warrant. For example, in 2015, COA reached out to and worked with 1) California School Nurses Organization, the State Board of Optometry, the Pan Ethnic Health Network, the California Primary Care Association, First 5, Parent Teachers Association and the California Teachers’ Association on mandating comprehensive eye exams for children prior to entering school; and, 2) the California office of the Centers for Medicare & Medicare, California Department of Health Care Services, Medi-Cal, Department of Managed Health Care and AOA to gain OD access to Medicare Advantage and Medi-Cal managed care plans, in addition to other access issues.

Recommendation: As the COA Health Care Delivery Systems Committee regularly engages with other organizations and agencies in carrying out its work, it is recommended that the resolution be retained in the COA HOD Implementation Record Standing Policies record as standing policy.

(2011) PR#2 Medical Insurance Panels

RESOLVED, that the Board of Trustees of the California Optometric Association explore the legal, fiscal and administrative feasibility of establishing a service within COA that assists member doctors in the process of credentialing, billing and participation on medical insurance panels and report to the 2011 President’s Council.
2015 Status: As directed, the COA Health Care Delivery Systems Committee investigated this matter and determined that other organizations were already filling this need; PEN has this as a service for a fee. Additionally, and more importantly, the committee determined that this type of service would not solve the access problem. These findings were discussed at the 2011 COA Presidents' Council meeting.

Recommendation: As both the COA HCDS Committee, representing COA’s experts in third-party access issues, and the COA Presidents’ Council found that this service was offered by other organizations and, more importantly, would not effectively solve the access problem, it is recommended that the resolution be rescinded and placed in the COA Policy Resolution Archive.

(2011) PR#5 NBEO Clinical Skills Exam

RESOLVED, that the COA introduce at AOA House of Delegates a resolution urging the postponement of this new policy establishing a single site for administering part three of the NBEO clinical skills exam until all interested parties (i.e. AOA, AOSA, COA, UCBSO, UCOSA, SCCO Student Association, Western University Student Association) have ample opportunity to provide input; and be it further

RESOLVED, that the COA introduce at the AOA House of Delegates a resolution calling for a second testing site on the west coast prior to any further implementation of a policy consolidating CSE testing sites; and be it further

RESOLVED, that the COA immediately express its concern and disappointment to the NBEO, as well as AOSA, state boards of optometry, and schools of optometry, regarding the NBEO’s decision to offer its part III exam in a single location; and be it further

RESOLVED, that should there be no other resolution of this unfair and burdensome requirement for west coast applicants to travel to the east coast for testing that the COA petition the California State Board of Optometry to explore the possibility of allowing California schools of optometry to develop an equivalent California State Practical Examination which could be conducted cooperatively by the California schools.

2015 Status: COA sponsored a resolution at the 2011 AOA House of Delegates meeting calling for a West Coast testing site for part three of the NBEO exam. The resolution met with wide and intense opposition, including from optometric students, and as a result did not come up for a vote.

Recommendation: The COA HOD continues to support a West Coast testing site for part three of the NBEO exam, but backing of this by others, particularly students, appears to still be lacking. COA will explore the issue further with the recently formed COA Student Section. In the meantime, it is recommended that this resolution be retained in the COA HOD Implementation Record Standing Policies record as standing policy.

(2010) PR#1 Updating State and Federal Medicaid Laws
RESOLVED, that the COA supports the federal Social Security Act to provide full parity, consistent with scope of practice, for optometrists in the Medicaid program, in the same manner as now provided for Medicare; and be it further

RESOLVED, that the House of Delegates urges every COA member to ask his or her U.S. Senator and Representative to co-sponsor and support H.R. 2697, the “Optometric Equity in Medicaid Act of 2009,” and retention of the Schakowsky amendment concerning federal legislation granting Medicaid parity for doctors of optometry in the same manner as Medicare federal health care reform legislation.

2015 Status: COA continues to support and work with AOA in enacting legislation granting doctors of optometry full parity consistent with their scope of practice in Medicaid (Medi-Cal in California). Various pieces of federal legislation have been introduced over the years to achieve this objective, including the referenced bill.

Recommendation: It is recommended that the second resolved be amended to remove the specific bill reference and, as parity in Medicaid has not been achieved, to retain the resolution as active.

(2010) PR#2 Political Contributions

RESOLVED, that is the sense of the 2010 House of Delegates that all volunteer decision makers called upon to commit COA resources for any reason fully consider the sensitivity of the issue or issues for which those resources may be used.

2015 Status: This resolution was adopted as a result of Cal-OPAC at the time making a contribution to the campaign against Proposition 8, the initiative to prevent same sex marriage. At the time, the PAC was responding to a request from leadership of the Legislature.

Recommendation: It is recommended that this resolution be retained in the COA HOD Implementation Record Standing Policies record as standing policy.

(2010) PR#3 Optometric Services in Hospitals

RESOLVED, that the California Optometric Association affirm its support for the affiliation of Doctors of Optometry with hospitals and other multidisciplinary health care settings and optometrists’ independent access to diagnostic testing procedures and equal access to hospital privileges, and be it further

RESOLVED, that a copy of the position statement entitled, “Position Statement on Optometric Services in Hospitals,” or the most recent revision published by the American Optometric Association be suitably archived for review in conjunction with this policy resolution.

2015 Status: The directive of this policy resolution was carried out.
**Recommendation:** As this resolution has been implemented, it is recommended that it be retained in the COA HOD Implementation Record Standing Policies record as standing policy.

(2010) PR#6 Proportional Voting by California Delegates to AOA House of Delegates

RESOLVED, that each delegate of this Association to the annual Congress of the American Optometric Association House of Delegates shall be free to cast his or her vote(s) independently, and bloc voting shall not be required.

**2015 Status:** Since the passage of this resolution, the “Guidelines for COA Delegates to the AOA House of Delegates” have incorporated the voting procedure mandated and votes are conducted in the manner directed.

**Recommendation:** As this resolution has been implemented, it is recommended that it be retained in the COA HOD Implementation Record Standing Policies record as standing policy.

(2009) PR#5 Distinguished Membership Status for SCCO President and Past AOA President Dr. Kevin Alexander

RESOLVED, that Dr. Kevin Alexander be elected to California Optometric Association membership as a distinguished member.

**2015 Status:** This is a commendation resolution that should stay in COA records.

**Recommendation:** Retain the resolution in the COA HOD Implementation Record Standing Policies record as standing policy.

(2009) PR#4 Legislative Fund Assessment

RESOLVED, that it is the sense of the 2009 House of Delegates that, for purposes of expenditures from the Legislative Fund, the phrase “to be used solely for future scope of practice enhancement and protection” may include ongoing efforts recommended by the Legislation-Regulation Committee and approved by the Board of Trustees that build and strengthen the organization’s ability to advocate, communicate, and influence both legislative and electoral outcomes in support of optometry’s agenda.

**2015 Status:** The COA Board of Trustees continues to follow the interpretation on the use of the COA Legislative Fund as expressed by this resolution.

**Recommendation:** Retain the resolution in the COA HOD Implementation Record Standing Policies record as standing policy.

(2009) PR#1 Adoption of the Low Vision Rehabilitation Section
RESOLVED, that each member of the Section shall pay to the California Optometric Association annual dues of $50.00 except for student members who shall pay annual dues of $25.00; and be it further

RESOLVED, that the 2009 COA House of Delegates ratify the proposed Low Vision Rehabilitation Section Bylaws.

2015 Status: The COA Low Vision Rehabilitation Section continues to operate and this resolution provides the authority for charging dues. However, in 2013, the COA House of Delegates adopted PR#1 which removed the dues requirements for students.

Recommendation: Retain the resolution as amended to remove reference to student dues for the section in the COA HOD Implementation Record Standing Policies record as standing policy.

Motion passed.
2017-2018
PROPOSED BUDGETS
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<td>($11,690.00)</td>
<td>$0.00</td>
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<tr>
<td>5</td>
<td>Dues Revenue</td>
<td>$1,550,670.68</td>
<td>$1,038,323.39</td>
<td>$1,622,250.00</td>
<td>$1,594,300.00</td>
<td>$1,597,750.00</td>
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<tr>
<td>6</td>
<td>Monthly Processing Surcharge</td>
<td>$33,521.33</td>
<td>$15,169.55</td>
<td>$35,000.00</td>
<td>$40,000.00</td>
<td>$15,000.00</td>
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<tr>
<td>7</td>
<td>Total Dues Revenue</td>
<td>$1,558,134.05</td>
<td>$1,053,164.51</td>
<td>$1,645,560.00</td>
<td>$1,634,300.00</td>
<td>$1,612,750.00</td>
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<tr>
<td>8</td>
<td>Event Revenue</td>
<td></td>
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<tr>
<td>9</td>
<td>Attendee Registration</td>
<td>$326,059.18</td>
<td>$64,895.00</td>
<td>$324,815.00</td>
<td>$321,955.00</td>
<td>$331,575.00</td>
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<td>10</td>
<td>Event Advertising - Display</td>
<td>$7,275.00</td>
<td>$0.00</td>
<td>$7,500.00</td>
<td>$5,750.00</td>
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<tr>
<td>11</td>
<td>Exhibitor Fees</td>
<td>$144,405.00</td>
<td>$0.00</td>
<td>$159,675.00</td>
<td>$163,450.00</td>
<td>$158,500.00</td>
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<td>12</td>
<td>Sponsorships</td>
<td>$244,651.33</td>
<td>$127,552.36</td>
<td>$177,589.00</td>
<td>$203,039.00</td>
<td>$329,385.00</td>
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<td>13</td>
<td>Total Event Revenue</td>
<td>$722,390.51</td>
<td>$192,447.36</td>
<td>$669,579.00</td>
<td>$694,194.00</td>
<td>$829,260.00</td>
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**Notes:**
- **OptoWest S**: Registration for 75 COA member ODs at $175. 50 non-member ODs at $250. Total - $25,625. **OptoWest N**: Registration fees for 165 COA member ODs at $175. 50 non-member ODs at $250 (registration capped at 215 due to space restrictions). Total - $41,375. **Online CE: New for 2017** - 75 participants at $17 per user; total - $1,275. (See COA Strategic Plan, Goal 3, Strategy 1, and Strategy 3, Action Item 1.) **Monterey Symposium**: 125 COA member ODs at option 1 ($500) = $60,000, 135 COA member ODs at average option 2 rate ($300) = $40,500; 125 non-member ODs at option 1 ($650) = $81,250, 125 non-member ODs at average option 2 rate ($400) = $50,000; $231,750 total. **Presidents Council**: 30 attendees at $225 per attendee, 12 attendees at $150; $8,550 total. **OptoWest Sac**: Registration fees for 60 COA member ODs at $175. 50 non-member ODs at $250; $23,000 total. **Membership Recruitment and Retention**: Revenue from Vision West-sponsored membership recruitment campaign at $813 each for three winners - $2,439. **California LVRS**: Sponsorship of LVRS annual meeting - $1,000. **Student Recruitment**: Includes $4,500 total for sponsorship of 4th-year luncheons at the three CA optometric colleges and $3,000 total in sponsorships sold for student section events. **House of Delegates**: VSP sponsorship - $5,000. **Monterey Symposium**: Sponsorship revenue that includes: 1) 10 Food for Thought programs at $9,350 each = $93,500; 2) event bags and badges = $5,000; 3) one champion sponsor = $50,000, 4. two gold sponsors = $20,000; $168,500 total.
<table>
<thead>
<tr>
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<tr>
<td>Communications</td>
<td></td>
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<tr>
<td>Advertising - Classified</td>
<td>$2,166.63</td>
<td>$2,093.37</td>
<td>$2,000.00</td>
<td>$2,000.00</td>
<td>$2,000.00</td>
<td>California Optometry Magazine: Revenue from sales of classified ads in California Optometry magazine - based on 2016 actual, $2,000.</td>
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<td>Advertising - Display</td>
<td>$26,939.00</td>
<td>$19,661.00</td>
<td>$20,000.00</td>
<td>$25,000.00</td>
<td>$30,000.00</td>
<td>California Optometry Magazine: Digital magazine display ad sales based on 2016 projected actual - $30,000.</td>
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<td>Advertising - Electronic</td>
<td>$1,700.04</td>
<td>$3,166.66</td>
<td>$9,000.00</td>
<td>$5,500.00</td>
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<td>Communications: Sales of e-news advertising and COA website banner ad sales, based on 2016 actuals - $5,500.</td>
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<td>CE Home Course</td>
<td>$2,010.00</td>
<td>$360.00</td>
<td>$2,000.00</td>
<td>$1,200.00</td>
<td>$0.00</td>
<td>Given the low revenue, nominal cost for online CE articles will be discontinued and promoted as a free member benefit.</td>
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<td>Total Communications</td>
<td>$32,815.67</td>
<td>$25,281.03</td>
<td>$24,000.00</td>
<td>$37,200.00</td>
<td>$37,500.00</td>
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<tr>
<td>Other Revenues</td>
<td></td>
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<tr>
<td>Dues Rebate AOA</td>
<td>$21,489.16</td>
<td>$13,336.68</td>
<td>$24,000.00</td>
<td>$21,000.00</td>
<td>$21,000.00</td>
<td>Membership: 1.5 percent rebate from AOA based on $1.4 million in annual dues paid.</td>
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<td>Miscellaneous Revenue</td>
<td>$3,300.00</td>
<td>$2,700.00</td>
<td>$3,600.00</td>
<td>$3,600.00</td>
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<td>Finance: Annual COA parking lot rent revenue from neighboring Chicago Fire restaurant.</td>
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<td>Production Services</td>
<td>$3,264.60</td>
<td>$459.50</td>
<td>$2,700.00</td>
<td>$2,300.00</td>
<td>$0.00</td>
<td>Employment poster sales discontinued</td>
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<td>Reimbursement from PVL</td>
<td>$31,500.00</td>
<td>$21,000.00</td>
<td>$33,500.00</td>
<td>$31,500.00</td>
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<td>Finance: Anticipated expense reimbursement for administering PVL.</td>
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<td>Reimbursement from CVF</td>
<td>$39,999.96</td>
<td>$26,666.64</td>
<td>$40,000.00</td>
<td>$40,000.00</td>
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<td>Finance: Reimbursement of COA expenses to administer CVF and the California Vision Project based on agreement reached with CVF in 2015.</td>
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<td>Royalty - COIS</td>
<td>$234,749.07</td>
<td>$129,299.72</td>
<td>$285,000.00</td>
<td>$270,000.00</td>
<td>$204,000.00</td>
<td>Resale Products: Based on 2016 actual average of $12,000-plus/mo. royalty received from Mercer insurance programs, plus 2016 actual of $60,000 royalty received annually from workers' compensation program.</td>
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<tr>
<td>Royalty - GWCO</td>
<td>$6,401.24</td>
<td>$20.21</td>
<td>$8,000.00</td>
<td>$9,000.00</td>
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<td>Resale Products: Anticipated rebate from GWCO for attendance by California ODs at annual GWCO conference.</td>
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<td>Royalty - Other</td>
<td>$2,974.94</td>
<td>$3,614.21</td>
<td>$17,300.00</td>
<td>$5,100.00</td>
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<td>Resale Products: Anticipated royalties from Heartland Payment Solutions for the sale of card and payroll processing services at $5,000 and IC. Debt Systems for debt collection services at $100.</td>
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<td>VVI Direct Support</td>
<td>$155,000.00</td>
<td>$140,625.00</td>
<td>$155,000.00</td>
<td>$187,500.00</td>
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<td>Finance: Annual revenue from Vision West per contractual agreement.</td>
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<td>Total Other Revenues</td>
<td>$498,678.97</td>
<td>$337,721.96</td>
<td>$569,100.00</td>
<td>$570,000.00</td>
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<tr>
<td>Investment Revenue</td>
<td></td>
<td></td>
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<tr>
<td>Non designated Funds</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Non designated funds Broker Fees</td>
<td>$(4,078.43)</td>
<td>$(3,090.69)</td>
<td>$(4,000.00)</td>
<td>$(4,500.00)</td>
<td>$(5,000.00)</td>
<td>Finance: Anticipated broker fees for handling non-designated cash CD investments.</td>
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<tr>
<td>Non designated funds interest and dividends</td>
<td>$31,641.11</td>
<td>$20,679.97</td>
<td>$25,000.00</td>
<td>$26,500.00</td>
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<td>Finance: Anticipated interest/ dividend received from CD holding non-designated cash based on brokerage projections, $20,000 interest $6000 dividends, $500 interest Legislative Fund.</td>
</tr>
<tr>
<td>Non designated funds Realized Gain or Loss</td>
<td>$0.00</td>
<td>$25.00</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$0.00</td>
<td>Realized Gain or Loss from investing activity</td>
</tr>
<tr>
<td>Non designated funds Unrealized Gain or Loss</td>
<td>$(18,832.45)</td>
<td>$(11,834.93)</td>
<td>$0.00</td>
<td>$0.00</td>
<td></td>
<td>Unrealized Gain or Loss from investing activity</td>
</tr>
<tr>
<td>Designated Funds</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Designated funds Broker Fees</td>
<td>$(30,467.36)</td>
<td>$(23,343.59)</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$0.00</td>
<td>Not budgeted for are the fees associated with the Reserve or Endowment funds. These fees however, are included in the 2015-2016 actual totals.</td>
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<tr>
<td>Endowment/Reserve earnings</td>
<td>$210,960.33</td>
<td>$138,399.50</td>
<td>$200,000.00</td>
<td>$200,000.00</td>
<td>$246,774.00</td>
<td>$246,774 from the Endowment Trust.</td>
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<td>Endowment/Reserve Realized Gain or Loss</td>
<td>$168,438.94</td>
<td>$(53,658.54)</td>
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<td>Realized Gain or Loss from investing activity</td>
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<td>Endowment/Reserve Unrealized Gain or Loss</td>
<td>$(426,926.64)</td>
<td>$242,472.95</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$0.00</td>
<td>Unrealized Gain or Loss from investing activity</td>
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<tr>
<td>Total Investment Revenues</td>
<td>$(69,264.50)</td>
<td>$333,319.53</td>
<td>$221,000.00</td>
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<td>Total Revenues</td>
<td>$2,742,754.70</td>
<td>$1,941,934.39</td>
<td>$3,129,239.00</td>
<td>$3,157,694.00</td>
<td>$3,246,484.00</td>
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</tr>
<tr>
<td>44 Payroll &amp; Benefits</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>45 Payroll &amp; Benefits</td>
<td>$1,547,190.45</td>
<td>$1,030,400.78</td>
<td>$1,757,846.00</td>
<td>$1,711,509.00</td>
<td>$1,643,318.00</td>
<td>Despite increases in some health benefit premiums, this line, which includes salaries and wages, taxes, benefits and skill development for staff, is more than $68,000 below the 2016 budget. It also includes a cost of living and discretionary performance-based adjustments.</td>
</tr>
<tr>
<td>46 Payroll &amp; Benefits</td>
<td>$1,547,190.45</td>
<td>$1,030,400.78</td>
<td>$1,757,846.00</td>
<td>$1,711,509.00</td>
<td>$1,643,318.00</td>
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<tr>
<td>47 Operating Expenses</td>
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<tr>
<td>48 Advertising/Exhibiting</td>
<td>$0.00</td>
<td>$1,450.00</td>
<td>$350.00</td>
<td>$600.00</td>
<td>Monterey Symposium: Social media advertising</td>
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<tr>
<td>49 Audio Visual</td>
<td>$48,115.34</td>
<td>$31,095.71</td>
<td>$44,000.00</td>
<td>$49,145.00</td>
<td>$67,800.00</td>
<td>Presidents Council: A/V - microphone, projection, screen, sound - $1,400. OptoWest S: A/V at $1,900 each x 2 rooms (OD classroom, FFT) - $3,800. Monterey Symposium: A/V for classrooms, exhibit hall, registration area. Food for Thought programs &amp; anticipated labor increase - $19,250. OptoWest N: A/V at $1,650 each x 2 rooms (OD classroom, FFT) - $3,300. House of Delegates: General session A/V staging &amp; labor - 37,650. OptoWest Sac: A/V at $1200 each x 2 rooms (OD classroom, FFT) - $2,400.</td>
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<tr>
<td>50 Auditor</td>
<td>$15,000.00</td>
<td>$8,874.00</td>
<td>$15,000.00</td>
<td>$16,000.00</td>
<td>$18,250.00</td>
<td>Keyperson Development: Key person pins, recognition awards at leg days. $2,000. Legislative Fund: Legislators of the year award - $400. House of Delegates: Award plaques for winners of COA recognition awards - $1,700.</td>
</tr>
<tr>
<td>51 Awards &amp; Gifts</td>
<td>$1,000.00</td>
<td>$2,276.97</td>
<td>$2,500.00</td>
<td>$2,050.00</td>
<td>$2,000.00</td>
<td>Membership: Anticipated dues write-offs for 2017 based on 2016 actuals - $3,000. Legislative Fund: Anticipated dues write-offs for 2017 based on 2016 actuals - $1,000.</td>
</tr>
<tr>
<td>52 Bad Debt Expense</td>
<td>$2,276.97</td>
<td>$2,500.00</td>
<td>$2,050.00</td>
<td>$2,000.00</td>
<td>$600.00</td>
<td>Monterey Symposium: Social media advertising</td>
</tr>
<tr>
<td>54 Bank Charges</td>
<td>($162.53)</td>
<td>$0.00</td>
<td>$50.00</td>
<td>$40.00</td>
<td>$25.00</td>
<td>General: Miscellaneous bank charges.</td>
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<td>55 Burglar Alarm Service</td>
<td>$6,837.23</td>
<td>$4,726.78</td>
<td>$6,540.00</td>
<td>$6,900.00</td>
<td>$6,900.00</td>
<td>General: $575/mo. - $6,900.</td>
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<td>56 Cal-Opac Administrative Support</td>
<td>$5,620.00</td>
<td>$4,707.00</td>
<td>$6,120.00</td>
<td>$6,620.00</td>
<td>$6,620.00</td>
<td>Legislative Fund: Administrative support for Cal-OPAC - $6,620.</td>
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<tr>
<td>57 Computer Hardware Maintenance</td>
<td>$1,169.32</td>
<td>$2,276.97</td>
<td>$2,500.00</td>
<td>$2,050.00</td>
<td>$2,000.00</td>
<td>General: Replacement parts for computer equipment.</td>
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<tr>
<td>58 Conference Calls</td>
<td>$223.01</td>
<td>$66.36</td>
<td>$100.00</td>
<td>$570.00</td>
<td>$645.00</td>
<td>House of Delegates: Conference calls to review proposed policy resolutions and bylaw amendments - $150. Membership: Six conference call meetings each for COA Memberships Committee and Student Section at $35 each - $420. Communications: Conference call meetings of COA Communications Committee and California Optometry Editorial Board - $75.00.</td>
</tr>
<tr>
<td>59 Conference Registrations Staff Meetings/Events</td>
<td>$9,716.72</td>
<td>$5,643.33</td>
<td>$17,975.00</td>
<td>$18,350.00</td>
<td>$5,265.00</td>
<td>Health Care Delivery Systems: Meeting expense include: 1) One HCDS Committee in-person core group meeting - $500; 2) Travel, booth space and paid advertising to health plan decision-makers to gain greater access for ODs - $2,500; $3,000 total. General: Employee staff meetings and events - $1,000. Governance: Registration for: 1) GWCO Presidents’ Council meeting - $130; 2) IAOE - $275. Board Meetings-Regular: 1) Registration for two BOT officers at AOA Presidents council meeting- $600; 2) for 2 at GWCO Presidents council meeting- $260; $860 total.</td>
</tr>
<tr>
<td>60 Consultants</td>
<td>$135,204.84</td>
<td>$168,259.85</td>
<td>$130,100.00</td>
<td>$125,500.00</td>
<td>$163,700.00</td>
<td>Development of e-forms, registration, etc., $900. OptoWest N: $300. OptoWest S: $300. Consultant to program changes to COA’s accounting system, $10,000.</td>
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<tr>
<td>61 Consultants - Computer</td>
<td>$1,960.00</td>
<td>$959.00</td>
<td>$6,675.00</td>
<td>$4,330.00</td>
<td>$10,900.00</td>
<td>Legislative Fund: Annual agreement with public affairs consultants at $200,000; paid advertising promoting legislative issues at $100,000.</td>
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<td>62 Consultants and Other</td>
<td>$78,000.00</td>
<td>$42,824.04</td>
<td>$377,000.00</td>
<td>$172,000.00</td>
<td>$300,000.00</td>
<td>Monterey Symposium: Social media advertising</td>
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<tr>
<td>63 Cost of Goods Sold</td>
<td>$3,132.77</td>
<td>$474.89</td>
<td>$2,100.00</td>
<td>$2,150.00</td>
<td>$0.00</td>
<td>Re-sale of employment law posters to be discontinued.</td>
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<tr>
<td>64 Delivery Service</td>
<td>$800.00</td>
<td>$0.00</td>
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<tr>
<td>65 Depreciation</td>
<td>$36,636.83</td>
<td>$24,123.04</td>
<td>$36,000</td>
<td>$76,095.00</td>
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<td>66 Donations &amp; Grants</td>
<td>($2,800.00)</td>
<td>$4,905.75</td>
<td>$23,500.00</td>
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<td>67 Education Fees - ABO/NCLE</td>
<td>$1,293.00</td>
<td>$350.00</td>
<td>$1,750.00</td>
<td>$2,075.00</td>
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<td>68 Education Fees - COPE</td>
<td>$1,030.00</td>
<td>$160.00</td>
<td>$1,770.00</td>
<td>$2,250.00</td>
<td>$1,800.00</td>
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<td>69 Equipment Rental &amp; Maintenance</td>
<td>$11,301.31</td>
<td>$7,747.46</td>
<td>$12,100.00</td>
<td>$13,000.00</td>
<td>$9,624.00</td>
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<td>70 Exhibit Hall Decorator</td>
<td>$2,832.82</td>
<td>$0.00</td>
<td>$2,732.00</td>
<td>$3,750.00</td>
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<td>71 Exhibit Hall Rental</td>
<td>$10,508.00</td>
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<td>$9,425.00</td>
<td>$10,500.00</td>
<td>$10,920.00</td>
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<tr>
<td>72 Exterior/Landscaping Maintenance</td>
<td>$5,364.61</td>
<td>$1,756.95</td>
<td>$1,500.00</td>
<td>$1,500.00</td>
<td>$1,500.00</td>
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<tr>
<td>73 Food &amp; Beverage</td>
<td>$111,537.39</td>
<td>$69,198.98</td>
<td>$89,433.00</td>
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<td>$159,825.00</td>
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<td>74 Give Aways</td>
<td>$7,403.83</td>
<td>$2,833.60</td>
<td>$7,450.00</td>
<td>$9,350.00</td>
<td>$10,800.00</td>
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<tr>
<td>75 Graphics Design</td>
<td>$13,294.00</td>
<td>$7,821.00</td>
<td>$24,300.00</td>
<td>$8,400.00</td>
<td>$17,150.00</td>
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</tbody>
</table>

**Notes:***
- General: COA Bldg. remodel, $12,675, COA Bldg., $11,820, Equipment, $52,068 includes new database and website.
- AOA Meetings: A one time expenditure to support a donation to AOA for student attendance at a new AOA+ combined advocacy conference and Optometry's Meeting - $12,500.
- Legislative Fund: 1) The holding of two vision fairs at $7,700 each - $15,400; 2) attendance at American Diabetes Assn dinner - $2,500, 3) Emerge CA - $2,500; 20,400 total. **Student Recruitment:**
  - 1) Sponsorship of 4th year luncheons at three California optometric colleges - $4,000;
  - 2) sponsorship of reception at WRC at $1,500;
  - 3) expenses relating to hold on student section events at each of three California optometric schools - $4000; $9,500 total.
- **Health Care Delivery System:**
  - A one-time expenditure to support COA diabetes coalition members that will help us gain access to medical panels as recommended by the HCDS consultants - $10,000.
- **AOA Building Fund:** A one time donation to AOA building fund $15,000 for the remodeling of AOA headquarters with recognition given by AOA for the donation.
- Fees for COPE CE approval. COPE is currently in restructuring process. Many unknowns,
- General: Rental and maintenance contracts for office water cooler($29.95/mo.), postage machine($180/qtr.), copier maintenance($200/mo.), copier lease($512/mo.-includes $456 lease plus insurance and sales tax) - $9,624.
- Monterey Symposium: GES - draping, carpet etc.
- Monterey Symposium: Rental of exhibit hall space for two days - $10,920.
- Based on 2016 fees at $125/mo. - $1,500.
- OptoWest Sac: Continental breakfast, break, lunch (attendees, 20 exhibitors & 3 BOT) and Food for Thought breakfast (for 35), $10,000. Monterey Symposium: Welcome Reception ($17k), 8 FFT programs and lunch vouchers, $49,000.
  - **Board Meetings-Regular:**
    - 1) Lunch/coffee service for three BOT meetings (pre- and post-HOD, Monterey Symposium) = $4,000;
    - 2) president’s appreciation dinner - $4,000;
    - 3) light continental/lunch at two BOT meetings at COA office - $1,500;
    - Monterey Symposium: GES - draping, carpet etc.
  - **General:**
    - Based on 2016 fees at $125/mo. - $1,500.
  - Monterey Symposium: Bags and badge holders - $600.
  - Monterey Symposium: Continental breakfast and lunch for 50 attendees - $4,500.
  - FFF programs and lunch vouchers, $45,000.
  - **Board Meetings-Regular:**
    - 1) Lunch/coffee service for three BOT meetings (pre- and post-HOD, Monterey Symposium) = $4,000;
    - 2) president’s appreciation dinner - $4,000;
    - 3) light continental/lunch at two BOT meetings at COA office - $1,500;
    - Friday & Saturday AM coffee and tea only - $6,050;
    - Monterey Symposium: GES - draping, carpet etc.
  - **General:**
    - Based on 2016 fees at $125/mo. - $1,500.
  - Monterey Symposium: Bags and badge holders - $600.
  - Monterey Symposium: Continental breakfast and lunch for 50 attendees - $4,500.
  - **OptoWest S:** Continental breakfast, break, lunch (attendees, 20 exhibitors & 3 BOT) and Food for Thought breakfast (for 35), $10,000. **Monterey Symposium:** Morning coffee, lunch (attendees, 3 BOT and 20 exhibitor lunches) and Food for Thought breakfast for 35 - $21,495.
  - **Presidents’ Council:** lunch for 50 attendees - $4,500. **OptoWest S:** Continental breakfast, break, lunch (attendees, 20 exhibitors & 3 BOT) and Food for Thought breakfast (for 35) - $20,600. California LVRS: LVRS annual meeting for 20 people - $2,150. **Finance Committee:** Continental breakfast and lunch for one meeting - $320.
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<tbody>
<tr>
<td>76 Hotel/Conf Ctr</td>
<td>$2,215.00</td>
<td>$0.00</td>
<td>$4,339.00</td>
<td>$1,900.00</td>
<td>$6,200.00</td>
<td>Monterey Symposium: AV for Steinbeck Forum, electrical, and internet/Wi-Fi at Monterey Marriott and Monterey Conference Center</td>
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<tr>
<td>77 LE PAC Administrative Support</td>
<td>$5,610.00</td>
<td>$4,480.00</td>
<td>$6,120.00</td>
<td>$6,620.00</td>
<td>$0.00</td>
<td>Discontinued</td>
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<tr>
<td>78 Insurance - Business</td>
<td>$28,967.47</td>
<td>$14,033.28</td>
<td>$29,780.00</td>
<td>$18,000.00</td>
<td>$19,500.00</td>
<td>General: COA coverage for cyber liability, crime, directors &amp; officers/employment practices liability, travel and accident.</td>
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<tr>
<td>79 Interest Paid to PVL - Mortgage</td>
<td>$3,157.83</td>
<td>$35.92</td>
<td>$3,200.00</td>
<td>$36.00</td>
<td>$0.00</td>
<td>Bldg. paid, no interest for 2017</td>
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<tr>
<td>80 Interior Maintenance</td>
<td>$6,610.60</td>
<td>$0.00</td>
<td>$1,000.00</td>
<td>$1,000.00</td>
<td>$0.00</td>
<td>General: Carpet cleaning - last done 8/2015.</td>
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<tr>
<td>81 Internet Access Service</td>
<td>$2,791.50</td>
<td>$1,515.36</td>
<td>$2,530.00</td>
<td>$2,640.00</td>
<td>$2,640.00</td>
<td>General: Service costs at $220/month $2,640.</td>
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<tr>
<td>82 Janitorial Service</td>
<td>$5,485.00</td>
<td>$2,800.00</td>
<td>$4,200.00</td>
<td>$4,200.00</td>
<td>$4,200.00</td>
<td>General: $350/mo. - $4,200.</td>
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<tr>
<td>83 Legal Fees</td>
<td>$63,687.47</td>
<td>$14,033.28</td>
<td>$29,780.00</td>
<td>$18,000.00</td>
<td>$19,500.00</td>
<td>Legislative Fund: Annual retainer for Aaron Reed &amp; Associates - $108,000, Annual retainer for Governmental Advocates - $108,000, Annual retainer for Nielson Merksamer - $78,000; this firm brings unique capabilities relative to enacting scope of practice enhancement legislation. (See COA Strategic Plan, Goal 2, Strategy 1.)</td>
</tr>
<tr>
<td>84 Lobbyists</td>
<td>282398.12</td>
<td>196101.95</td>
<td>324000</td>
<td>$294,000.00</td>
<td>$294,000.00</td>
<td>Legislative Fund: Administrative support for LSCOA PAC - $6,620</td>
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<tr>
<td>85 LSCOA-Pac Administrative Support</td>
<td>$5,620.00</td>
<td>$4,676.36</td>
<td>$6,120.00</td>
<td>$6,620.00</td>
<td>$6,620.00</td>
<td>Legislative Fund: Membership administrative support for LSCOA PAC - $6,620</td>
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<tr>
<td>86 Marketing Expense</td>
<td>$4,024.00</td>
<td>$66,000.00</td>
<td>$54,000.00</td>
<td>$12,000.00</td>
<td>$12,000.00</td>
<td>Membership: Member legal resource service offered by Wilke Fluiery - $54,000 annually See COA Strategic Plan, Goal 1, Strategy 2, Action Item 1; Goal 2, Strategy 5, Action Item 3; Strategy 6, Action Item 3.</td>
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<tr>
<td>87 Mechanical System Maintenance</td>
<td>$2,362.71</td>
<td>$1,839.11</td>
<td>$1,000.00</td>
<td>$2,000.00</td>
<td>$2,000.00</td>
<td>General: Air conditioning unit anticipated repairs</td>
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<tr>
<td>88 Meeting Expense-Events</td>
<td>$1,669.37</td>
<td>$8,596.94</td>
<td>$3,200.00</td>
<td>$1,750.00</td>
<td>$750.00</td>
<td>Keyperson Development: Sponsorship of student legislative days/lunches held at each of the three California optometric schools at $250 each - $750.</td>
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<tr>
<td>89 Meeting Room Expense</td>
<td>$11,817.42</td>
<td>$2,325.00</td>
<td>$26,330.00</td>
<td>$17,071.00</td>
<td>$16,520.00</td>
<td>Keyperson Development: Potentially 8 leg day events at $500 each - $4,000. Monterey Symposium: Monterey Conference Center room rental with an anticipated 2 percent increase, $12,520.</td>
</tr>
<tr>
<td>90 Memberships &amp; Subscriptions</td>
<td>$18,588.61</td>
<td>$12,202.37</td>
<td>$27,620.00</td>
<td>$23,427.00</td>
<td>$20,799.00</td>
<td>Based on 2016 actual, along with an anticipated increase in the use of credit cards for payment - Membership - $49,000, OptoWest Sac - $500, California Optometry Magazine - $600, Legislative Fund - $11,500, OptoWest N - $1,800, Monterey Symposium - $12,000, Student Recruitment - $150, Presidents’ Council - $250, OptoWest S - $900.</td>
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<tr>
<td>91 Merchant Discounts</td>
<td>$74,404.45</td>
<td>$47,637.24</td>
<td>$66,375.00</td>
<td>$61,650.00</td>
<td>$76,700.00</td>
<td>Membership: Development manager membership with AAFP - $2,95 and CalSAR - $140; $435 total. Governance: ASAE membership for ED - $325. Meeting Planning: Event department personnel membership with Meeting Planners International - $285. GED: Various membership, newsletter and software subscriptions relating to government affairs: Capitol Morning Report - $1,250; Target Book - $2,200; Capitol Network - $400, News subscriptions - $1,000, PiktoChart (infographic creator) - $40; Capital Track bill tracking program - $5,280 - $10,170 total. Legislative Fund: Voter Voice annual renewal - grassroots letter writing software subscription - $3,000. Communications: WuFu $30/mo - $360.00. General: Subscriptions to services relating to member communications, meetings and e-data storage: GoToMeetings webinar service $109/mo.; cloud storage $125/mo.; ssl certificate $500; Microsoft Office 365 $128/mo., Constant Contact $115.00 - $6,224 total.</td>
</tr>
<tr>
<td>92 Miscellaneous</td>
<td>$525.87</td>
<td>$19.10</td>
<td>$200.00</td>
<td>$100.00</td>
<td>$100.00</td>
<td>Governance: Miscellaneous for lobbying firms.</td>
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<td>93 Payroll processing</td>
<td>$3,687.15</td>
<td>$2,385.33</td>
<td>$3,600.00</td>
<td>$3,600.00</td>
<td>$3,600.00</td>
<td>General: COA payroll processing fee at $300/month.</td>
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<td>94 Pest Control</td>
<td>$698.50</td>
<td>$571.50</td>
<td>$780.00</td>
<td>$780.00</td>
<td>$780.00</td>
<td>General: $65/mo. - $780.</td>
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<td>95 Photography</td>
<td>$45.00</td>
<td>$48.00</td>
<td>$500.00</td>
<td>$500.00</td>
<td>$500.00</td>
<td>Board Meetings-Regular: BOT photo - $500.</td>
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<tr>
<td>Postage, Shipping &amp; Mailings</td>
<td>$17,798.46</td>
<td>$11,338.99</td>
<td>$14,360.00</td>
<td>$20,180.00</td>
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<td>Printing - Miscellaneous</td>
<td>$247.30</td>
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<tr>
<td>Printing - On-site Directory</td>
<td>$2,983.75</td>
<td>$0.00</td>
<td>$2,810.00</td>
<td>$3,300.00</td>
<td>$2,650.00</td>
<td>Monterey Symposium: Printing of 900 event on-site guides</td>
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<tr>
<td>Printing - Signs/Posters/Banners</td>
<td>$2,925.75</td>
<td>$0.00</td>
<td>$2,649.00</td>
<td>$3,515.00</td>
<td>$2,400.00</td>
<td>Monterey Symposium: Signage</td>
</tr>
<tr>
<td>Printing &amp; Production</td>
<td>$9,874.04</td>
<td>$7,523.45</td>
<td>$6,600.00</td>
<td>$7,500.00</td>
<td>$9,000.00</td>
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<tr>
<td>Printing/Mailing - Marketing Direct Mail</td>
<td>$4,320.18</td>
<td>$2,343.00</td>
<td>$4,345.00</td>
<td>$4,840.00</td>
<td>$5,400.00</td>
<td>Printing of event promotion postcards: OptoWest SAC, 3,000 pieces - $1,200, Opto West N, 3,000 pieces - $1,200, OptoWest S, 3,000 pieces - $1,200; $3,600 total. Monterey Symposium, 8,000 pieces - $1,800.</td>
</tr>
<tr>
<td>Printing/Mailing - Registration Brochure</td>
<td>$3,275.00</td>
<td>($500.00)</td>
<td>$2,946.00</td>
<td>$3,500.00</td>
<td>$3,500.00</td>
<td>Monterey Symposium: Printing of 5,000 registration brochures</td>
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<td>Publications</td>
<td>$186.35</td>
<td>$1,418.00</td>
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<td>Real Estate Tax</td>
<td>$14,499.21</td>
<td>$7,324.97</td>
<td>$15,000.00</td>
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<td>$15,000.00</td>
<td>General: Personal property and COA building property taxes payable based on 2016 taxes.</td>
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<tr>
<td>Rent</td>
<td>$1,530.00</td>
<td>$1,040.00</td>
<td>$1,500.00</td>
<td>$1,550.00</td>
<td>$1,620.00</td>
<td>General: Expo self storage-$135.00/mo. - $1,620.</td>
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<tr>
<td>Security</td>
<td>$2,700.00</td>
<td>$0.00</td>
<td>$1,391.00</td>
<td>$1,500.00</td>
<td>$1,500.00</td>
<td>Monterey Symposium: One exhibit hall security guard</td>
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<tr>
<td>Shipping Service (Truck)</td>
<td>$3,002.06</td>
<td>$0.00</td>
<td>$2,525.00</td>
<td>$1,800.00</td>
<td>$1,900.00</td>
<td>Monterey Symposium: Shipping of supplies</td>
</tr>
<tr>
<td>Software Maintenance</td>
<td>$3,155.69</td>
<td>$8,713.88</td>
<td>$54,000.00</td>
<td>$35,852.00</td>
<td>$46,000.00</td>
<td>General: Database maintenance $3,500/mo. - $42,000; annual maintenance agreement for COA’s accounting software - $4,000.</td>
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<tr>
<td>Speakers - Honoraria</td>
<td>$26,875.00</td>
<td>$5,700.00</td>
<td>$33,350.00</td>
<td>$31,150.00</td>
<td>$22,300.00</td>
<td>OptoWest N: six hours of OD education at $350/hr. - $2,100. Monterey Symposium: 40 hours of OD education at $16,000. OptoWest Sac: Six hours of OD education at $350/hr. - $2,100. OptoWest S: Six hours of OD education at $350/hr. - $2,100. Presidents Council: 180 (hotel, travel, incidentals) - $750. Monterey Symposium: Hotel, travel and incidentals for approximately 7 speakers x $1,100 per speaker - $7,700. OptoWest S: Hotel, travel and incidentals for 2 speakers = $650 x 2 - $1,300. OptoWest Sac: Hotel, travel and incidentals for 2 speakers = $650 x 2 - $1,300. OptoWest N: Hotel, travel and incidentals for 2 speakers = $750 x 2 - $1,500.</td>
</tr>
<tr>
<td>Speakers - Travel</td>
<td>$11,598.14</td>
<td>$4,717.82</td>
<td>$18,898.00</td>
<td>$18,545.00</td>
<td>$12,550.00</td>
<td>Presidents Council: 180 (hotel, travel, incidentals) - $750. Monterey Symposium: Hotel, travel and incidentals for approximately 7 speakers x $1,100 per speaker - $7,700. OptoWest S: Hotel, travel and incidentals for 2 speakers = $650 x 2 - $1,300. OptoWest Sac: Hotel, travel and incidentals for 2 speakers = $650 x 2 - $1,300. OptoWest N: Hotel, travel and incidentals for 2 speakers = $750 x 2 - $1,500.</td>
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</tr>
<tr>
<td>111 Staff - Travel</td>
<td>$36,878.68</td>
<td>$21,624.67</td>
<td>$67,355.00</td>
<td>$49,512.75</td>
<td>$44,630.00</td>
<td>Monterey Symposium: Hotel, travel, incidentals for 5.5 staff x $1,100 per staff - $6,050. <strong>Health Care Delivery Systems</strong>: 1) AOA Third Party Conference at $1,470, 2) 4 meetings with third-party payers at $300 each - $1,200; 3) CAHP Conference -$800; 4) diabetes coalition-related travel - $300; $3,770 total. <strong>Keyperson Development</strong>: 1) Student legislative days at the 3 California optometric colleges - $750. 2) 8 leg day events - $4,000; $4,750 total. <strong>House of Delegates</strong>: Hotel ($500), travel ($100) and meals/incidentals ($150) for 5 staff = $950 x 5 = $3,750. <strong>OptoWest N</strong>: Hotel, travel and incidentals = $250 x 2 staff (split with Presidents' Council) - $500. <strong>Presidents Council</strong>: Hotel, travel and incidentals = $250 x 2 staff (cost split with OW SF) - $500. <strong>Membership Recruitment and Retention</strong>: 10 societies/town hall meetings - $2,500. <strong>OptoWest S</strong>: Hotel, travel, incidentals for 2 staff = $650 x 2 - $1,300. <strong>OptoWest Sac</strong>: Mileage - $100. <strong>Governance</strong>: 1) Monterey Symposium/BOT/COA Presidents' Council meetings - $1,650; 2) COA HOD - $3,000; 3) GWCO Presidents' Council meeting - $1,250; 4) COA Town Hall meetings - $3,000; 5) SBO meetings - $700; 6) IAOE - $1,150; $10,750 total. See COA Strategic Plan, Goal 5, Strategy 1, Action Item 1. <strong>GEAD</strong>: 1) two at 2 SBO meetings in S. CA at $250 each - $1,000; 2) one to HOD meeting in N. CA at $550; 3) parking/Uber for meetings in downtown Sacramento - $300; 4) at 8 town hall meetings to present legislative, key person, HCDS program updates at $1,630; $3,480 total. <strong>Student Recruitment</strong>: 1) Travel to three 4-year student luncheons - $1,250; 2) student section events at each California optometry college - $1,250; 3) Optometric Western Regional Conference at $300; $2,800 total. <strong>AOA Meetings</strong>: 1) AOA Presidents' Council for one: registration - $350, airfare - $500, hotel - $500, meals - $175 - $1,525; 2) AOA House of Delegates and Congressional Advocacy Conference meetings (held at same time) for one: registration - $130, airfare - $500, hotel - $1,800, Meals - $425 - $2,855; $4,380 total. <strong>Board Meetings-Regular</strong>: $2,400 per month, $28,800 total. <strong>Legislative Fund</strong>: $500 per month, $3,000 each for five additional meetings - $7,500 total. <strong>House of Delegates</strong>: 1) Hotel, travel, incidentals - ($1,100 per So. Cal student/$925 per No. Cal student) a. six student delegates = $6,250 (four So.Cal, two No. Cal), b. three section delegates = $3,125 (two So. Cal, one No. Cal), 2) Bus &amp; Sat. lunch ($20 per student) for 15 students from UCBSO = $1,500, 3) Hotel, travel, incidentals - Three George I. Deane Award winners ($750 per So. Cal student/$525 per No. Cal student) - $2,025 (two So. Cal, one No. Cal); $12,900 total. <strong>Keyperson Development</strong>: Three students travel to AOA Advocacy Conference at $750 each - $2,250 total.</td>
</tr>
<tr>
<td>112 Stipend - President</td>
<td>$21,000.00</td>
<td>$15,400.00</td>
<td>$22,400.00</td>
<td>$21,900.00</td>
<td>$21,900.00</td>
<td><strong>Board Meetings-Regular</strong>: $1,200 per month $14,400 total. <strong>Legislative Fund</strong>: $500 per month, $3,000 each for five additional meetings - $7,500 total. <strong>House of Delegates</strong>: 1) Hotel, travel, incidentals - ($1,100 per So. Cal student/$925 per No. Cal student) a. six student delegates = $6,250 (four So.Cal, two No. Cal), b. three section delegates = $3,125 (two So. Cal, one No. Cal), 2) Bus &amp; Sat. lunch ($20 per student) for 15 students from UCBSO = $1,500, 3) Hotel, travel, incidentals - Three George I. Deane Award winners ($750 per So. Cal student/$525 per No. Cal student) - $2,025 (two So. Cal, one No. Cal); $12,900 total. <strong>Keyperson Development</strong>: Three students travel to AOA Advocacy Conference at $750 each - $2,250 total.</td>
</tr>
<tr>
<td>113 Student - Travel</td>
<td>$15,150.00</td>
<td>$15,150.00</td>
<td>$15,150.00</td>
<td>$15,150.00</td>
<td>$15,150.00</td>
<td><strong>GEAD</strong>: $500. Monterey Symposium: Miscellaneous supplies - $900. <strong>House of Delegates</strong>: Flag poles for society flag ceremony - $1,100; misc. supplies - $250; $1,350 total. <strong>Presidents Council</strong>: Flip-charts and other supplies - $200. <strong>General</strong>: General office supplies-paper, copier toner, file folders, etc.; based on 2016 usage - $5,000. <strong>Membership</strong>: 1) Miscellaneous department supplies: $500; 2) SBO list -$250; $750 total. <strong>Board Meetings-Regular</strong>: President’s gift - $1,000. Registration envelopes: OptoWest N - $100, OptoWest S - $100, OptoWest Sac - $100. Monterey Symposium: printing of 900 Passport Program cards &amp; registration envelopes, -$1,000.</td>
</tr>
<tr>
<td>114 Supplies</td>
<td>$10,099.46</td>
<td>$6,276.10</td>
<td>$15,450.00</td>
<td>$8,400.00</td>
<td>$11,000.00</td>
<td><strong>GEAD</strong>: $500. Monterey Symposium: Miscellaneous supplies - $900. <strong>House of Delegates</strong>: Flag poles for society flag ceremony - $1,100; misc. supplies - $250; $1,350 total. <strong>Presidents Council</strong>: Flip-charts and other supplies - $200. <strong>General</strong>: General office supplies-paper, copier toner, file folders, etc.; based on 2016 usage - $5,000. <strong>Membership</strong>: 1) Miscellaneous department supplies: $500; 2) SBO list -$250; $750 total. <strong>Board Meetings-Regular</strong>: President’s gift - $1,000. Registration envelopes: OptoWest N - $100, OptoWest S - $100, OptoWest Sac - $100. Monterey Symposium: printing of 900 Passport Program cards &amp; registration envelopes, -$1,000.</td>
</tr>
<tr>
<td>115 Supplies - Computer</td>
<td>$2,714.45</td>
<td>$314.39</td>
<td>$1,000.00</td>
<td>$500.00</td>
<td>$4,000.00</td>
<td><strong>General</strong>: New laptop system for general use - $750. <strong>Governance</strong>: New desktop system for 1 staff - $650. <strong>Administration-Finance</strong>: New desktop systems for 2 staff - $1,300. <strong>Meeting Planning</strong>: New desktop system for 1 staff - $650. <strong>Membership</strong>: New desktop system for 1 staff - $650.</td>
</tr>
<tr>
<td>116 Supplies - Janitorial</td>
<td>$115.07</td>
<td>$5.41</td>
<td>$0.00</td>
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<td>$500.00</td>
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<td><strong>General</strong>: Annual 990 filing fees; $0100 filing fee.</td>
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<td>Overhead allocation events</td>
<td>$38,659.46</td>
<td>$11,553.84</td>
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<td>Total Net Revenue(Loss)</td>
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**Communications**: Cell phone reimbursement for communications and social media manager - $600. **Finance**: Cell phone reimbursement for IT staff - 180. **Meeting Planning**: Cell phone reimbursement for education and events manager - $720. **General**: 1) XO Communications server hosting infrastructure at $1,650/mo. - $19,800; 2) $240 annually for toll free number, fax line at $100/mo. - $1,200; $21,300 total. **Membership**: Cell phone reimbursement for development manager - $720. **Governance**: Cell phone reimbursement for executive director - $1,025. **GEAD**: Cell phone reimbursement for government affairs staff - $2,160.

**Board Meetings-Regular**: Volunteer travel: 1) two to attend GWCO Presidents' Council meeting at $2,760 2) 10 to attend BOT and Monterey Symposium - $12,540, 3) 10 to attend 2 BOT meetings at COA HOD - $13,820, 4) 10 to attend 2 BOT meetings in Sacramento - $5,420; 5) COA president attendance at 3 California optometric school graduations - $1,655; 6) attendance by trustees at 10 society meetings - $3,750; $39,945 total. **Monterey Symposium**: Hotel, travel, incidentals for 7 COA Education and Clinical Practice Committee members x $1,100 per committee member - $7,700.

**GEAL**: Voluntary travel to 8 leg day events at $400 ea. - $3,200. **House of Delegates**: Hotel ($700), travel ($250), incidental ($150) - HOD speaker - $1,100.

**Legislative Fund**: Travel to lobbying/strategy meetings in Sacramento - 1) 7 meetings attended by two persons at $550 each - $3,700; 2) 4 trips by subject expert(s) from out-of-state to testify/lobby issues at $750 each - $3,000; 3) COA Legislation-Regulation Committee chair travel to COA Legislative Day events - $300; $11,000 total. **Nominating Committee**: Vol. travel to committee meeting - 1) Airfare/ mileage for 8 at $250 each - $2,000, 2) hotel for one night for 8 at $250/night - $2,000, 3) lunch for 8 at $45 each - $360, 4) other meals for 8 at $51 each - $408, $4,600 total. **Health Care Delivery Systems**: 1) AOA Third Party Conference for one - $1,470; 2) 4 meetings with third-party payers at $300 each - $1,200; 3) Diabetes coalition-related travel - $600; $3,270 total.

**GEAD**: One in-person COA Legislation-Regulation Committee meeting - $1,500. **AOA Meetings**: 1) 2 attending AOA Presidents' Council meeting - $2,350; 2) 10 attending AOA HOD/Congressional Advocacy Conference (held at same time) at $2,525 per person - $25,250; $27,600 total. **Student Recruitment**: Travel by two ODs to the three 4th year student school luncheons; and, three ODs to each of the three student section events. To date, no reimbursements have been requested. $1,500 total. **Finance Committee**: Six to attend in-person meeting $1,500.

**Student Recruitment**: For the creation of student/new graduate membership videos - $500 total. **Media Relations & Web Site**: Single sign on services provided by i4a $400/mo., $4,800. **Legislative Fund**: Producing and editing videos on legislative issues, $3,000. **New website development for 2017 is capitalized and depreciated over 3 years.**
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<td></td>
</tr>
<tr>
<td>Volunteer - Travel</td>
<td>$7,486.06</td>
<td>$9,325.00</td>
<td>$1,100.00</td>
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</tr>
<tr>
<td><strong>Total Operating Expenses</strong></td>
<td>$71,568.42</td>
<td>$66,291.00</td>
<td>$98,510.00</td>
<td></td>
</tr>
<tr>
<td><strong>Overhead Expense</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Overhead allocation events</td>
<td>$5,931.60</td>
<td>$6,137.00</td>
<td>$5,885.00</td>
<td></td>
</tr>
<tr>
<td><strong>Total Overhead Allocation</strong></td>
<td>$5,931.60</td>
<td>$6,137.00</td>
<td>$5,885.00</td>
<td></td>
</tr>
<tr>
<td><strong>Total Expenses</strong></td>
<td>$77,500.02</td>
<td>$72,428.00</td>
<td>$104,395.00</td>
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</tr>
<tr>
<td><strong>Total Net Revenue(Loss)</strong></td>
<td>$96,962.22</td>
<td>$97,066.00</td>
<td>$127,532.00</td>
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</tr>
</tbody>
</table>
2017 NOMINEES

The California Optometric Association Nominating Committee was comprised of:

Fred Dubick, OD, MBA, FAAO, Chair
John Rosten, OD, Vice Chair
Amanda Powers, OD, Member – South Bay Optometric Society
Marina Rocchi, OD, Member – Golden Empire Optometric Society
Suma Tiriveedhi, OD, Member – San Fernando Valley Optometric Society
Bruce Abramson, OD, Member – Redwood Empire Optometric Society
Dawn Miller, OD, FAAO, Member – Orange County Optometric Society
Matt Wong, OD, Member – San Mateo Optometric Society

The COA Nominating Committee presents the following nominees for the 2017 COA Board of Trustees to the 2017 House of Delegates. The committee is particularly pleased at the level of interest in serving COA in a trustee capacity and as a result there are four candidates for three trustee positions.

President
President-elect
Trustee (2 yr term, 2017-2019)
Trustee (2 yr term, 2017-2019)
Trustee (2 yr term, 2017-2019)
Trustee (2 yr term, 2017-2019)
Immediate Past President*
Speaker of the House 2018
Vice Speaker of the House 2018
*Non-elective

Completing the second year of their terms (not up for election):
Secretary-Treasurer
Trustee
Trustee
Trustee

The committee contacted many potential applicants for consideration of trustee positions over a period of three months. We were pleased with the considerable interest expressed and positive dialogue received. The ability to dedicate the amount of time to trustee position was a major consideration in potential applicant participation. The committee has compiled a list of potential applicants that will be presented to next year’s committee. It is the hope of this committee that this investment of time and experience, along with exposure to the positive impacts of governance decision-making, will encourage qualified candidates to consider COA leadership.
Curriculum Vitae
Ranjeet Singh Bajwa, OD, FAAO
Diplomate, American Board of Optometry
CA License #134921LG
Email: RSBajwaOD@gmail.com

- **Academic Degrees**
  Optometric Doctor Southern California College of Optometry
  2575 Yorba Linda Blvd,
  Fullerton, CA 92831
  May 2008

  Bachelor of Arts University of California, Davis
  One Shields Ave.
  Davis, CA 95616
  June 2002

- **Licenses and Certifications**
  2013 Fellow, American Academy of Optometry
  2013 Diplomate, American Board of Optometry

- **Professional Affiliations**
  California Optometric Association 2011- Present
  Trustee, California Optometric Association Board, January 2013- Present
  American Optometric Association 2011- Present
  American Academy of Optometry 2008- Present
  American Board of Optometry 2013- Present
  President, Kern County Optometric Association January 2011-January 2013
  California Optometric Association Communications Committee Member 2012-2013
  Asian American Optometric Society 2004- Present
  Participant, Volunteer Optometric Services for Humanity

- **Relevant Professional Experience**
  Optometrist, Buena Vista Optometry
  1889 Knoll Drive
  Ventura, CA 95003
  May 7, 2014- Present
  Managing optometrist providing primary optometric care, treatment of ocular diseases
  including glaucoma diagnosis and management, minor ocular surgery and co-
  management of cataract and retinal surgery.

  Optometrist, Empire Eye and Lascr Center
  4101 Empire Drive, Ste. 120
  Bakersfield, CA 93309
  December 1, 2010- Present
Curriculum Vitae:
Ranjot Singh Bajwa, OD, FAAO
Diplomate, American Board of Optometry
CAL License #13492T1G
Email: RSBajwaOD@gmail.com

Staff optometrist providing primary optometric care, general ophthalmology, treatment of ocular disease and pre- and post-surgical care of refractive surgery patients.

Optometrist, Advanced Center for Eyecare
1721 Westwind Drive, Suite B
Bakersfield, CA 93301
May 7, 2014-February 25, 2015
Staff optometrist providing primary optometric care, treatment of ocular disease and co-management of refractive surgery patients.

Optometrist, Stockdale Optometry
3869 Stockdale Highway
Bakersfield, CA 93309
July 21, 2010-July 31, 2014
Staff optometrist providing primary optometric care and treatment of ocular disease.

Optometrist, Glaucoma specialist, Chapa-De Indian Health Program, Inc.
1350 East Main St.
Grass Valley, CA 95945
September 21, 2009- April 30, 2010
Optometrist in charge of management and operations of Eye Clinic at the Grass Valley clinic. Primary care optometrist at Grass Valley Clinic. Glaucoma specialist for Auburn, Woodland and Grass Valley Clinics.

Optometry Resident, Primary Care Optometry
Crownpoint Healthcare Facility-Eye Clinic
P.O. Box 358
Crownpoint, NM 87313
August 1, 2008- July 31, 2009
Advanced optometric clinical training and exposure for expansive ocular conditions in a multidisciplinary health care setting. Supervision and education of 4th year clinicalintern’s patient care encounters. Primary eye specialist on call for Emergency Room and after hours urgent care examinations. Administration of Eye Clinic technicians and staff when necessary.

- Lectures, Presentations and Media Outreach
US News and World Report with Laura McMullen, Health Reporter
“4 Eye health myths” - March 12, 2013
“13 Foods that do your eyes good” - March 12, 2013
Curriculum Vitae
Ranjeet Singh Bajwa, OD, FAAO
Diplomate, American Board of Optometry
CA License #13492TT.G
Email: RSBajwaOD@gmail.com

89.3 KPCC National Public Radio- Los Angeles with Elizabeth Aguilera, Featured Guest
“The need for glasses is great, but many kids go without” - April 7, 2014

Guest contributor for the California Optometric Association blog

KBAK/KBFX CBS 29 Health Matters Television Show, Guest Contributor
“New Years Resolution: Schedule an eye exam for your child” - January 8, 2012
“Nutrition and the eye” - March 18, 2012
“Eye cancer” - May 5, 2012
“Ocular allergies” - May 12, 2012
“Computer vision syndrome in the classroom” - October 7, 2012
“Diabetes and your eyes” - November 18, 2012
“Seasonal eye allergies” - May 12, 2013
“UV protection” - May 19, 2013
“Back to school checklist: Comprehensive eye exams” - August 4, 2013
“Diabetes Awareness” - December 1, 2013

KERN News Talk 1180 AM California Radio with Jeff Lemucchi, Guest Contributor
“Kern Corner: Protecting your eyes from harmful UV rays” - June 19, 2012
“Kern Corner: Computer Vision Syndrome- what it is and how to avoid it” - September 20, 2012
“Kern Corner: American Diabetes Month – Protect your vision” - November 8, 2012
“Kern Corner: Diplopia and double vision” - February 6, 2013

SCCO Navajo Area IHS Optometry Continuing Education Conference: Juvenile Rheumatoid Arthritis: A Case Report, Lecturer Flagstaff, AZ - April 24, 2009

La Vida Mission Community Health Fair
Navajo Nation Special Diabetes Project
Ocular Complications of Diabetes, Presenter
Crownpoint, NM - March 24, 2009

Navajo Nation Special Diabetes Project Community Health Fair
Diabetes and the Eye, Presenter
Crownpoint, NM - January 29, 2009
Curriculum Vitae
Ranjit Singh Bajwa, OD, FAAO
Diplomate, American Board of Optometry
CA License #13492TLG
Email: RSBajwaOD@gmail.com

A Guide to Diabetic Retinopathy, Lecturer
Lecture to Crowpoint IHS Clinical Staff
Crowpoint, NM
November 19, 2008
Cataract Surgery: Preoperative and Postoperative Care and Complications; Lecturer
Lecture to Kaiser Permanent Optometrists
Baldwin Park, CA - May 2, 2008

- Awards and Scholarships
  Young Optometrist of the Year, 2013
  California Optometric Association

SCCO Dr. Joe W. Dobbs Endowed Scholarship
This endowment provides scholarships to fourth-year students who have shown interest and potential promise in the care of low vision patients. The selection of these recipients is made by the Chief of the Mary Ann Keeverline Walls Low Vision and Rehabilitation Center.

- Volunteer Experience
Special Olympics Trials, Lions Club Vision Screening, Volunteer
Farmington, NM
August 16, 2008

Recording for the Blind and Dyslexic- reader and editor
June 2007 - May 2008

Volunteers for Optometric Service to Humanity (VOSH) mission trip to El Salvador
November 18-25, 2006

- Teaching Experience
Preceptor, Western University of Health Sciences School of Optometry
October 2014-Prescnt

Instructional Assistant- Ophthalmic Optics 2, Southern California College of Optometry
Winter 2006 - 2007
Dr. Robert Lee, Dr. Shawn Bac

- Personal Interests
Volunteer work, Cooking, Photography, Golf, Cycling
Curriculum Vitae
Sanjeev Singh Bajwa, OD, FAAO
Diplomate, American Board of Optometry
CA License #I349271G
Email: RBajwaOD@gmail.com

* Professional References:
Bill Howe
Executive Director
California Optometric Association
2415 K Street
Sacramento, CA 95816
BillHowe@COAvision.org

Vin Dang, OD
Chief of Optometric Services
Empire Eye and Laser Center
4101 Empire Drive, Suite 120
Bakersfield, CA 93309
VinDang@empireeyeandlaser.com

Christopher C. Cordes, OD, FAAO
Chief of Acoma-Canoenito-Laguna Hospital Eye Clinic
80 Indian Service Route 130
Acoma Pueblo, NM 87034
Christopher.Cordes@lbs.gov

Robert K. Hartnett, OD, FAAO
Chief of Kaiser Permanente Medical Center Optometry Department
1011 Baldwin Park Blvd.
Baldwin Park, CA 91706
626-851-5048

Tina R. MacDonald, OD, FAAO
The Center for the Partially Sighted
6101 West Centinela Avenue
Culver City, CA 90230
TMacDonald@low-vision.org
Trevor K. Fogg, OD
217 Crossroads Blvd, Carmel, CA 93923
Cell: 831-236-5483 email: trevorfogg@gmail.com

EDUCATION
UC Berkeley, Doctor of Optometry May 2007
UC Berkeley, Bachelor of Arts December 2002
- Double Major in Economics & Integrative Biology

LICENSING
TLG licensed Optometrist in California
DEA licensed, Mid-Level Practitioner
Certified in Corneal Refractive Therapy by Paragon
CPR certified

PROFESSIONAL EXPERIENCE
Blink Optometry Carmel, Owner/Optometrist/CFO September 2013 - Present
- Providing comprehensive eye health and vision care with a boutique retail optical store

VA Palo Alto Health Care System, Optometry Consultant October 2010 - Present
- Comprehensive eye exams and emergency eye care with extensive ocular disease management. Education and training of Optometric Interns

Hollister Vision Center, Optometrist July 2008 - January 2015
- Full scope vision care including contact lens, spanish speaking and pediatric exams

Hattori Vision Optometry, Associate Optometrist August 2007 - February 2014
- Provided comprehensive vision care including multifocal, toric, gas permeable and CRT contact lens fitting as well as management of optical department and staff trainings

EYEXAM of CA/Lenscrafters, Optometrist September 2007 - October 2010
- Providing comprehensive eye care including multifocal and toric contact lens fitting

Pacific Eye Center, Optometrist October 2007 - February 2008
- Lone optometrist in private ophthalmology practice

RECOGNITION
Vistakon Excellence in Contact Lens Patient Care

PROFESSIONAL SERVICE
President, Monterey Bay Optometric Society 2015 - Present
LSCOA-PAC, COA Committee Member February 2016 - Present
Membership Chair, Monterey Bay Optometric Society 2010 - 2015
MBOS delegate to the COA House of delegates February 2010 - Present
President, Berkeley Optometry Class of 2007 2004 and 2007

PROFESSIONAL MEMBERSHIPS
American and California Optometric Associations 2003 - Present
Monterey Bay Optometric Society 2007 - Present
InfantSee provider, American Optometric Association 2007 - Present
Contact Lens and Cornea Section, AOA 2003 - 2012
Sports Vision Section, AOA 2005 - 2012
Curriculum Vitae

Dr. Steven Sage Hider, O.D.

Education: University of California at Berkeley — Doctor of Optometry, 1994
University of California at Berkeley — B.S. Physiological Optics, 1993
University of California at Irvine — B.S. Biological Sciences, 1990
Merced High School, Merced, CA — diploma, 1987

Internships: Atlanta Eye Surgery Group, Inc — October - December 1993
Ophthalmologic practice specializing in anterior segment disease, glaucoma, corneal and cataract surgery, and refractive surgery
Oak Knoll Naval Hospital — September - October 1993
Primary eyecare optometry with an emphasis on geriatrics
Western Blind Rehabilitation Center — August - September 1993
Live-in rehabilitation low vision center teaching legally blind veterans to use optical aids such as telescopes, magnifiers, and field modifiers to utilize intact retina in order to regain independence
Oakland Veterans Administration Outpatient Clinic — May - July 1993
Primary eyecare optometry with an emphasis on pathologies of diabetic retinopathy, hypertensive retinopathy, HIV/CMV retinopathy, and end stage glaucoma

Employment: Glaucoma certified doctor of optometry, Partner/Owner
Primary Eyecare Center, Atascadero, CA — November 1994 - Present

Community: American Optometric Association
California Optometric Association, Trustee 2011-2014, Sec/Tres 2015
Tri-County Optometric Association, President 2003, Treasurer 2005-present
Kiwanis Club of Atascadero, 1995-present, President 1999-2000
Rotary Club of San Luis Obispo 1999-2013
Atascadero Chamber of Commerce, Ambassador of the Year 1996
San Luis Obispo Chamber of Commerce
Boy Scouts of America – Life Scout
   Pack 155/51 past Den Leader, past Cubmaster
   Troop 155 Current Assistant Scoutmaster

Personal: Date of Birth: October 23, 1969
Family: Wife - Nicole, Sons - Joseph, Gregory
Key Points:
1. Post graduate doctoral study and research in mood, behavior cognitive function in the visually disabled.
2. 18 years as Low Vision Consultant, Permanente Medical Group’s Golden Gate Customer Service Area (CA); 2 years as low vision consultant US Army Europe
3. Clinical practice in an Interprofessional environment as Coordinator, Primary Care Optometry, San Mateo Medical Center and Staff Optometrist, Permanente Medical Group
4. Broad experience in retail optical, mobile vision and cultural awareness/sensitivity in health care
5. Graduate Education in both Business (Marketing) and in Public Administration (Program Management)
6. 7 years of experience in program management, program evaluation in tele ophthalmology
7. Proficient in Medical Spanish

PROFESSIONAL EXPERIENCE:

2014-Present  Graduate Student, Salus University, Elkins Park, PA
- Dissertation title: “Food Insecurity, Vision and Function in the Adult”
- Research Design and Biostatistics

2012-Present  National Optometric Director, Anthem, Inc.
- Eye Care policy advisor throughout Anthem, Inc.
- Legislative liaison for eye care legislation for WellPoint and the 14 state associations of CA, NV, CO, MO, IN, OH, WI, KY, GA, VA, NY, ME, NH, MA
- Eye care policy advisor for eye care for Medicare Advantage HMO plans for WellPoint
- Quality assurance, grievances and appeals for Blue View Vision.

2011-2012  Managing Optometrist, FirstSight Vision Services, Inc.
- Expanded clinical services to include chronic eye disease surveillance, children’s vision and geriatric care
- Profit/loss responsibility for the optometry office
- Companion optical vision center exceeded goal for the first time in two years within the first three months of my practice.

2009-2010  Graduate Student, San Francisco State University
- Teleophthalmology project to detect diabetic retinopathy using digital retinal photography by primary care physicians/providers
- Major course work in program evaluation and program management and quantitative methods
Richard Hom OD, MPA, PhD Candidate  
San Mateo, CA  
(650) 931-6027  
rchom@yahoo.com

- Awarded Masters in Public Administration

2002-2009 Coordinator, Primary Care Optometry, San Mateo Medical Center

- Clinical supervision of three optometrists. In this capacity, boosted productivity 100%.
- Expanded clinical care to north and south County areas by stationing optometrists in community clinics
- Senior care optometric consultant within the integrative service model with collaboration of geriatric care, nursing, and occupational therapy.
- Launched the tele ophthalmology project county-wide that included 87 primary care providers and 14,000 diabetics for their annual digital photographic evaluation of their retinas for rapid and early detection of diabetic retinopathy

1999-2002 Several marketing positions in high technology companies

- Profit and loss responsibility of six software products
- Extensive collaboration with cross functional teams from all areas of the companies to launch and support products.
- Managed $2 million budgets for marketing and engineering development

1985-1999 Staff Optometrist, Permanente Medical Group, San Francisco

- Contact lens and low vision expert for the Golden Gate Customer Service Area (San Rafael, San Francisco and South San Francisco Medical Centers)
- Created a contact lens service model that propelled the Service Center to have the highest contact lens sales ten years running
- IT Steering Committee member. Negotiated service levels with various clinic departments in order to provide Internet Service to remote clinic sites.

EDUCATION:

University of California, Berkeley O.D. Optometry  
Research: “Toxic Effects of Paraquat on the Rabbit Eye”

2010 San Francisco State University MPA Public Administration/Management  
Research: “Physician Attitudes Towards the use of Digital Retinal Photography in the Early Detection of Diabetic Retinopathy”

LICENSES AND CERTIFICATIONS

- Optometry License, State of California, Number
- Diagnostic Pharmaceutical License, State of California, Number 5879T
- 1999 Therapeutic Pharmaceutical License, State of California, Number 5879T
- 2001 Glaucoma 24- hour Pre-certification Course, SCCO
<table>
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<th>Year</th>
<th>Event</th>
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<tr>
<td>2008</td>
<td>DEA License Current MH0899661</td>
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<tr>
<td>2002</td>
<td>Current associate staff medical privileges at San Mateo Medical Center (one of the few in California to attain this privilege at a hospital)</td>
</tr>
<tr>
<td>1984</td>
<td>Fellow, American Academy of Optometry</td>
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<tr>
<td>2010</td>
<td>Member, International City/County Management Association (ICMA)</td>
</tr>
<tr>
<td>2011</td>
<td>Glaucoma Certification Grand Rounds UC Berkeley, 15/30 patients completed More than 20 eye and technology articles in trade publications and shows.</td>
</tr>
<tr>
<td>2013</td>
<td>Diplomate, American Board of Optometry</td>
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<tr>
<td>2013</td>
<td>License, California, Life, disability and health #0118299.</td>
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</table>
Tamami Candi Kimura
Knoll Family Optometry
19871 Yorba Linda Blvd, #101
Yorba Linda, CA, 92886
(714) 777-2004
tamamicandi@hotmail.com
drcandikimura.com

EDUCATION:
Illinois College of Optometry: Chicago, IL
Doctor of Optometry: May 2002.

University of California, Santa Barbara, CA
Bachelor of Science: June 1995.

OPTOMETRIC EXPERIENCE:

2005-present: Optometry Eyecare 20/20: 18204 S Western Ave., Gardena, CA, 90248. (310) 719-2020. Providing primary eye care mostly in Japanese where a large amount of progressive myopia was seen.

2005-2007: Nancy S. Wang, Ophthalmologist: 1807 Wilshire Blvd., Santa Monica, CA, 90403. (310) 829-0160. Worked in conjunction with ophthalmology as the contact lens specialist and provided primary and acute eye care in a metropolitan setting.

2004-2005: Focal Point Eye Centers: 201 S. Alvarado St., Los Angeles, CA, 90057. (213) 413-7300. Established the low vision service at this office. Worked in conjunction with a retinal/general ophthalmology associated with the St. Vincent's Hospital. Provided advanced eye care in an acute hospital setting where a large amount of retinal diseases, cataracts and glaucoma were seen. This practice was also affiliated with a cornea and refractive surgeon and an oculo-plastic surgeon specializing in aesthetic neurona.

2002-2005: Family Vision Care: 28089 Smyth Dr., Valencia, CA, 91355. (661) 775-1860. Established the student teaching program in affiliation with the Illinois College of Optometry for this practice. Provided comprehensive primary care to a diverse age group at a practice that emphasizes in developmental optometry for pediatrics and traumatic brain injury patients. Developed and implemented individualized vision therapy, which was the focal point of the practice. Comprehensive examination of infants in support of the Infantsee program were performed. This office also emphasized specialty contact lenses for medically indicated conditions such as keratoconus, corneal transplants, and aphakia, and orthokeratology was also performed.

2002-2005: Day Star Optometry: 5290 Long Beach Blvd., Long Beach, CA, 90805. (562)
728-4324. Providing Primary care to a diverse age group in a lower income metropolitan area where there may be a lack of primary care. A large amount of late stage diseases like diabetic retinopathy, cataracts and glaucoma were seen. This office also housed a commercial optical lab, where optical experience was gained.

**ACTIVITIES:**

**AOA Congressional Meeting:** Washington D.C. 2016. Meeting with legislators at the national level keeping optometry strong.

**Legislative Day:** Local and at Sacramento. 2011- current. Meeting with legislators to make sure that they understand the needs of our patients and optometrist’s ability to provide primary eye care by using our license to the fullest extent that we are trained.

**COA Membership Committee:** 2016. Striving to increase COA membership.

**Los Angeles Optometric Society President:** 2014. Was awarded the Society of the Year award by the COA.

**Feria de Salud Health Fair, Los Angeles. Health Fair/Vision screening:** 2014. Standard Elementary in conjunction with VOSH, Bakersfield. Providing vision services.

**COA President’s Council Planning Committee:** 2013, 2014. Planned the leadership conference for new Society Presidents and President-Elects.

**California Vision Foundation Board Member:** 2013-2015. Working on the sustainability of the charitable arm of the COA.

**Practice Management Panelist:** 2007 to present; participate in events at local schools for COA/SCCO/Western/UCI where students/young grads can Q and A with practicing O.D.s.

**Lacrimal duct dilation and irrigation certification:** March, 2008, SCCO.

**Los Angeles County Optometric Society board member:** Secretary, 2006 to present.

**Bausch and Lomb overnight orthokeratology Interactive Program:** Los Angeles, CA. July 2005.

**Insight Vision Center:** Completion of 100 hours or courses in Behavioral Vision Concepts. 2005

**Implemented the Low Vision Clinic:** Made low vision service available at Focal Point Eye Center/ St. Vincent’s Hospital in conjunction with ophthalmology. 2004


**Paragon CRT ground round:** Valencia and Los Angeles, CA. Feb. 2004. Learned fitting techniques for corneal refractive therapy.

**Jupiter Lens ground round:** Los Angeles, CA. April 2004. Learned fitting techniques for a specialty keratoconus seleral contact lens.

**Teaching clinical skills:** Set up Family Vision Care as an externship site for fourth year optometry students of Illinois College of Optometry. May 2004. Taught clinical skills to fourth year students from ICO.
PROFESSIONAL MEMBERSHIPS:

California Optometric Association. 2002-present.
Los Angeles County Optometric Society. 2002-present.
Infansee Program: 2004-present. A program reinforcing the importance of a complete eye exam for all children. Supports free eye exam on infants 6 month or younger.

LANGUAGE:

Japanese-fluent
Spanish-conversational
American Sign
PERSONAL OBJECTIVES

To utilize my knowledge and experience in the eye care field in assisting in the development of the next generation of eye care professionals. To provide quality and comprehensive eye care to a diverse population with the emphasis on pathology, contact lenses, refractive correction procedures, clinical teaching, evidence based medical practices and research.

WORK EXPERIENCE

September 2015 -- Present
University Eye Centers
Southern California College of Optometry
Marshall B. Ketchum University
Fullerton, California

Associate Dean for Clinics – Assistant Professor of clinical education. Chief Clinical Administrator of a large multi-disciplinary facility of Marshall B. Ketchum University. The chief administrator responsible for the daily operations, all faculty assignments, staff and interns at all of the clinics within the UEC System.

August 2011 – September 2015
University Eye Center at Los Angeles
Southern California College of Optometry
Marshall B. Ketchum University
Los Angeles, California

Clinical Director – Assistant Professor of an outreach clinical facility of the Southern California College of Optometry at Marshall B. Ketchum University. The chief administrator and educator who is responsible for managing interns, faculty and staff in a socio-economically diverse environment. Administration responsibilities include budget, daily operations, scheduling, staffing and communication with SCCO and other healthcare providers.

January 2005 – October 2016
Mark Nakano Optometric Corporation
Torrance, California

Founding Director and President of an optometric corporation that provides comprehensive vision care to a diverse population--emphasis in pathology, contact lenses, co-management of ophthalmic surgical procedures, clinical research and preventive eye care.
December 1987--December 2004
Sumida & Nakano Optometry
Gardena, California

Managing partner in an optometric group practice that provides comprehensive vision care to a diverse population--emphasis in pathology, contact lenses, co-management of ophthalmic surgical procedures, clinical research and preventive vision care.

June 2000—June 2011
Harbor-UCLA Eye Clinic
Torrance, California

Provide primary eye care in a multidisciplinary and educational health care facility. Responsible for diagnosis, treatment and management of vision and ocular disorders.

March 2000—April 2002
Signature Vision Plan, General Electric Financial Assurance
Woodland Hills, California

Quality assurance auditor for a Regional Vision Plan. Responsible for auditing optometry and ophthalmology practices for compliance.

June 1994 - March 2000
Arthur J. Edelstein, M.D., Inc.
Downey, California

Provider of optometric care in an ophthalmologic private practice. Responsible for treating and triaging pathology cases, comprehensive eye care and contact lenses.

November 1993 - December 1993 (Per Diem)
Kaiser Permanente Medical Group
Harbor City, California

Provided primary vision care within a multi-disciplinary medical group. Responsible for refractions, pathological detection and triaging within the medical group.

EDUCATION

Pacific University College of Optometry
Forest Grove, Oregon; 1986
Degree: Doctor of Optometry

Pacific University
Forest Grove, Oregon; 1983
Degree: Baccalaureate Vision Science
California State University
Dominguez Hills, California; 1982
Degree: Baccalaureate Chemistry

CLINICAL EDUCATION

**BIMO Part 1a—Good Clinical Practice 101: An Introduction**
Certification: June 2012

**BIMO Part 2b—The Clinical Investigator: Responsibilities in Medical Device Trials**
Certification: June 2012

**BIMO Part 5b—Strategies for Clinical Investigators to Build Quality into Device Research**
Certification: June 2012

**Punctal Dilation / Irrigation Certification**
California State Board of Optometry
Gardena, California; 2003

Lacrimal Dilation and Irrigation Certification

**Southern California College of Optometry**
Fullerton, California; February 2001
Treatment & Management of Glaucoma Certification

**Southern California College of Optometry**
Fullerton, California; June 1996 - July 1996
Treatment and Management of Ocular Diseases.

**Portland Optometric Clinic**
Portland, Oregon; September 1985 -- December 1985
Provided primary care optometry, low vision, vision training, and special diagnostic procedures.

**Seattle Indian Health Board**
Seattle, Washington; June 1985 -- August 1985
Responsible for primary care optometric care with a strong emphasis on ocular health and systemic health. Also observed and assisted in ophthalmologic surgical procedures.

**Forest Grove Optometric Clinic**
Forest Grove, Oregon; September 1984 -- May 1985
Introduction to optometric care in a clinical environment with an emphasis on analytical and diagnostic procedures, and patient communication.
HONORS/AWARDS

Glaucoma Certification; 2004
Punctal Dilation and Irrigation Certification; 2002
Therapeutic Pharmaceutical Agent License; 1996
Who’s Who of California; 1986
Outstanding Young Men of America; 1985 & 1986
Beta Sigma Kappa Honorary Optometric Society; 1986
Dean’s Academic List; 1982

LEADERSHIP

President, Torrance American Baseball; 2002 - 2004
President, PVPHS Diamond Club; 2011 - 2013
Board of Directors, Lions Club; 2011- 2016
President, South Bay Optometric Society; 2015- 2016
Consultant, Accreditation Council on Optometric Educatioin; 2014-
Board of Directors, Care Harbor; 2015-
Member, California Optometric Association President’s Council; 2015 - 2017
Moderator, California Optometric Association President’s Council; 2015
Member, COA Council on Clinical Education; 2016 -

LECTURES

Evidence Bas Case Management
Southern California College of Optometry at MBarchall B. Ketchum University
Fullerton, California: May 2016

Ocular Disease & Your Practice
Tri-County Optometric Society
Ventura, California: January 2016

Pathology Series - Case Presentations
Southern California College of Optometry at Marshall B. Ketchum University
Fullerton, California: July 2015

Evidence Based Management: Glaucoma
South Bay Optometric Society
Torrance, California: February 2015

Elementary Glaucoma
Lions Club Board Installation
Alhambra, California: October 2012

Economics of Optometry
Quarterly Lecture on Optometric opportunities and expectations for the newly graduated optometrist.
Los Angeles, California: 2011 - Present

Wesley-Jessen Insight ’91 Faculty
Speaker, 1991; "Managing The Astigmatic Patient for The Vision of Tomorrow"
**RESEARCH**

**Coopervision Study - Protocol FC150625**
Coopervision Companies
Irvine, California; 2016

**Coopervision Study - Protocol FC231202**
Coopervision Companies
Irvine, California; 2016

**Coopervision Study - Protocol FC131202**
Coopervision Companies
Irvine, California; 2015

**Bausch & Lomb FDA Clinical Studies**
Bausch & Lomb Pharmaceuticals
Rochester, New York; 1994 - 2012

**Study 690 - Daily Contact Lens Evaluation (Asian)**
Bausch & Lomb Pharmaceuticals
Rochester, New York; 2011

**Study 642 - Daily Contact Lens Evaluation**
Bausch & Lomb Pharmaceuticals
Rochester, New York; 2011

**Protocol C10-003 - Hydrogen Peroxide Solution Evaluation**
Alcon Laboratories
Fort Worth, Texas; 2010

**Study 4557 - Double Blind Study of MPS**
Foresight Regulatory Corporation
Fresno, California; 2010

**Study 636 - Compatibility of MPS with Group 4 Lenses**
Bausch & Lomb Pharmaceuticals
Rochester, New York; 2009

**Study 598 - Evaluation of a Multi-purpose Solution**
Bausch & Lomb Pharmaceuticals
Rochester, New York; 2008

**Neophyte Adaptation - Daily Contact Lens Acceptability**
Ciba Vision Contact Lenses
Atlanta, Georgia; 2008
Evaluation of Fit and Performance of Cypress Toric - An Asian Study
Vistakon Contact Lenses
Jacksonville, Florida; 2007

FDA Study of VISA Material
Coopervision Companies
Irvine, California; 2007

Comparison of Acuvue Advance versus Oasys
Foresight Regulatory Corporation
Fresno, California; 2006

Renu MPS Formulation Variation: Japan
Bausch & Lomb
Rochester, New York; 2004

Renu Multiplus: Japan
Bausch & Lomb
Rochester, New York; 2002

Methafilcon-A versus Benz-G Material (Hioxifilcon-A)
Coopervision Companies
Huntington Beach, California; 1999

Preference Contact Lenses: Lathe Cut versus Cast Molded
Coopervision Companies
Huntington Beach, California; 1999

Low DK versus High DK Rigid Gas Permeable
Menicon Contact Lenses
Clovis, California; 1999

Frequency 55 Toric: Cast Molded versus Lathe Cut
Coopervision Companies
Irvine, California; 1998

Comparative Study of Two Disposable Contact Lenses
Coopervision Companies
Irvine, California; 1998

Encore 2 Study of Acceptability of Soft Contact Lens
Coopervision Companies
Irvine, California; 1997

Encore 1 Comparative Study of Soft Contact Lens
Coopervision Companies
Irvine, California; 1997
**Premarket Study of Opti-Soak**  
Alcon Laboratories  
Fort Worth, Texas; 1995

**Selectivity of Contact Lenses Solutions: ReNu versus OPTI-FREE**  
Bausch & Lomb  
Rochester, New York; 1994

**Patient Preference: AO SEPT versus OPTI-FREE**  
Ciba Vision  
Atlanta, Georgia; 1991

**Comparative Study of The Alpha-D Progressive Addition Lens Versus Traditional Bifocals.**  
Multi-Optics  
Foster City, California; 1986

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**PROFESSIONAL AFFILIATIONS**

**American Academy of Optometry**  
Candidate for Fellowship, December 2014 - Present

**Southern California College of Optometry Faculty**  
Assistant Professor, 2011 - Present

**American Optometric Association**  
Member, 1982 -- Present

**California Optometric Association**  
Member, 1982 -- Present

**South Bay Optometric Society**  
Member, 1986 -- Present

**Asian American Optometric Society**  
Member, 1986 -- 1999

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**PERSONAL INTERESTS**

Enjoy Music, Baseball, Surfing and Coaching Sports. Spending quality time with my family.

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**REFERENCES**

Available On Request
August 8, 2016

COA Nominating Committee

I am writing in response to your request for information in regard to a matter that appears on my license from the Board of Optometry.

In 1988, I worked in a side by side office, which was owned by an optician and was to be converted into two separate office spaces. At the time the status of the Eyeglass II issue was still in debate and the State Board President at that time Dr. Lawrence Thal, made a statement in an industry journal publication that the law should pass and opticians and optometrists could share offices. That was my understanding at that time and I accepted to work under that assumption. I did so for approximately five to six months and then terminated my working relationship due to realization that the law did not change or pass as such.

After terminating my working relationship with the opticians, an anonymous optometrist filed a grievance with the State Board of Optometry accusing me of violating Professional Code Sections 3103. In 1990, I met with a State Investigator and admitted to the working relationship, and explained my premature anticipation of the law change.

In 1991, an Assistant Attorney General called me about a disciplinary hearing and inquired about my last three years of employment or work. I explained that I had been in private practice in Gardena, California. The Attorney stated that I had rehabilitated myself by working in a professional environment and that I would be placed on one year probation without further action against me.

I know that the aforementioned matter is a black mark against myself, but be assured that I have always practiced in a professional and caring manner. I hold myself to the highest standards of clinical care and have learned a tremendous amount from this unfortunate incident. I hope this brings clarity to this unfortunate matter.

If you should have any questions or concerns, please feel free to contact me at your earliest convenience.

Best regards,

Mark E. Nakano, O.D.
2017
PROPOSED POLICY RESOLUTIONS
2017 Proposed Policy Resolutions
Reference Committee Review

The COA House of Delegates (HOD) Standing Rules provide that policy resolutions and bylaw amendments submitted by the published deadline are to be submitted to a reference committee prior to the COA House of Delegates meeting. The role of the reference committee is to review the proposed resolutions and bylaw amendments for:

- Factual content
- Determine if they conflict with existing COA policies, bylaws, or state or federal rules
- Work with the author(s) in making language changes if necessary to clarify the meaning or intent of the proposal

Notwithstanding the foregoing, the committee may not change opinions or perceptions expressed, or the intent, of the proposal. The intent of this review is to promote COA HOD consideration and debate of the merits of a proposal rather than on “technical” issues.

The proposed policy resolutions before the COA HOD have been reviewed with the authors as provided above. Thus, some of the proposals have changed since first distributed with the COA HOD 60-day notice to achieve the above. Those revisions are noted in strikeout (for one resolution, note in double strikeout) and underscore (for one resolution, noted in double underscore).
Proposed Policy Resolution Number One

to the 2017 House of Delegates

Review of 2012 and Earlier Resolutions

Proposed by the COA Board of Trustees

WHEREAS, Policy Resolution Number Six adopted by the 2013 COA House of Delegates, and amended by 2016 Policy Resolution One, resolved that those active, standing and archived policy resolutions adopted by the COA House of Delegates that are five or more years old which are recommended for change or deletion by the COA Board of Trustees or any COA society be presented to the current COA House of Delegates for review; now, therefore be it

RESOLVED, that the recommendation noted on the COA HOD policy resolutions listed below be adopted.

Active

2012  PR#2  House of Delegates Procedures and Agenda

RESOLVED, the California Optometric Association reaffirm that it will hold an annual House of Delegates and that the organization of that meeting be so constructed that it primarily and most efficiently has on the House of Delegates agenda matters of major concern to the association and its members, which would include Policy Resolutions; By-Laws amendments; Budget and Financial oversight; Legislation; Board Member Elections, and any other matters of major significance to Optometry in California, and be it further

RESOLVED, that the organization of the House of Delegates give precedence and sufficient time to those matters that require discussion, delegate input, and consideration by the delegates and optometric societies, and be it further

RESOLVED, that the California Optometric Association have House of Delegates changes in place for the 2013 annual meeting.

2016 Recommendation: Following adoption of this policy resolution, a task force was convened that worked with the 2013 COA HOD speaker to fashion the COA HOD agenda in compliance with its directives. Since that time, all COA HOD agendas have followed the format outlined and appear to have worked as intended by the COA HOD. Therefore, it is recommended that the resolution be retained in the COA HOD Standing Policy Resolutions record as standing policy.

2012  PR# 4  Stand-Alone Vision Plan Inclusion in the California State Healthcare Benefit Exchange
RESOLVED, that The California Optometric Association strongly supports, on behalf of the citizens and families of California, the inclusion of stand-alone vision plans in the California Health Benefit Exchange.

2016 Recommendation: In February 2016, Covered California, the official name of the California Health Benefit Exchange, launched a direct link to certain vision plans from its website. The coverage, intended particularly for adults who are not covered by the Accountable Care Act, can be purchased through these portals any time of the year. As the objective of this resolution has been achieved, it is recommended that it be retained in the COA HOD Standing Policy Resolutions record as standing policy.

Standing

1998 PR#B-8 New Member Acknowledgement

RESOLVED, that new members will not receive their first dues bill until after verbal communication that they have received their welcome and information packet; and be it further

RESOLVED, that this verbal confirmation come from the COA Membership Chair.

2016 Recommendation: In adopting in 2016 the Speaker’s Task Force on COA Past Policy Resolution Review, the COA HOD accepted the recommendation that this policy resolution be reviewed and by the COA Membership Committee and brought back to the COA HOD for further consideration. The committee reviewed the resolution and, in addition to noting it had been originally “deleted” by the COA HOD in 2008, recommends that it be placed in the COA HOD Policy Resolution Archive as it is does not represent the practice of COA in welcoming new members. Further, the committee believes the manner in which new members are welcome is extraordinarily important and that process continues to be timely refined by the committee as the situation warrants and new and better methods become available.
Proposed Policy Resolution Number Two  
to the 2017 House of Delegates  

COA Nominating Committee: Report of Nominees

Proposed by the COA Board of Trustees

WHEREAS, a critical function performed annually by the COA House of Delegates (HOD) is the election of COA officers and trustees, which has a direct impact on the implementation of COA HOD-approved policies and directions, along with day-to-day oversight of the association; and,

WHEREAS, as COA is best served by interested, qualified and able doctors of optometry volunteering their service to the association, the COA HOD encourages and welcomes these doctors desire to volunteer their expertise and knowledge for the betterment of COA and its individual members; and,

WHEREAS, the COA HOD finds that the association and its members are best served with the widest possible number of candidates for COA trustee and officer positions for whom to vote; and,

WHEREAS, in 2013, the COA House of Delegates adopted Policy Resolution Five to revised the COA Nominating Committee applicant consideration process to, in pertinent part, provide that all qualified applicants be presented to the COA HOD regardless of the number of positions to be filled; and,

WHEREAS, the COA HOD desires to amend 2013 Policy Resolution Five to clarify that the COA Nominating Committee provide for its consideration the widest possible number of qualified candidates for COA officer and trustee positions; now, therefore be it

RESOLVED, that sub-paragraph 9 of 2013 Policy Resolution Five be amended to clarify that all qualified candidates are to be presented by the COA Nominating Committee to the COA HOD for election consideration and that the COA Nominating Committee be empowered to recommend to the COA HOD, at its sole discretion, a slate from those candidates it believes best meet the qualifications of the applicable position:

1. The operating policies and procedures of the COA Nominating Committee (Committee) shall provide for the professional, fair and lawful consideration of applicants.
2. A majority of the Committee shall constitute a quorum for any official action of the Committee.
3. The Committee shall, on its own initiative, make a dedicated effort to identify and recruit qualified individuals for office. The committee may seek assistance from, and work with, COA societies, committees and the board of trustees, and may use COA communications mediums to identify and recruit officer, trustee, speaker and vice speaker applicants.
4. In carrying out its duty to identify and recruit qualified candidates, the Committee shall give consideration to broad representation of the COA membership with regards to such factors as, but not limited to, geographical location and modes of practice.
5. The Committee shall schedule and conduct in-person applicant interviews. A telephone interview of an applicant may be conducted subject only to an emergency as determined by a majority vote of the Committee. The Committee’s meetings and deliberations shall be held in executive session. Notwithstanding the foregoing, the COA executive director may be present at any applicant interview or committee recommendation deliberation.
6. The Committee shall be prohibited from asking applicants questions or addressing subject areas or otherwise make inferences deemed by the COA House of Delegates or applicable state or federal statute or rules to be inappropriate or unlawful. Such prohibited questions and subject areas shall include, but not be limited to, those that relate to race, color, religion, national origin, age, medical condition, disability, marital status, sex (including sexual harassment), sexual orientation; or could be considered slanderous or otherwise discriminatory of the applicant’s legally sanctioned practice style or employment.

7. The Committee shall interview and evaluate applicants relative to who are best qualified in terms of leadership qualities and abilities for the position they are seeking. The interviews may also be based on the information contained in the applicant’s application, resume or curriculum vitae and, the qualifications and duties of officers and delegates as set forth in the COA bylaws. The Committee shall not make nominations based on whether the applicant’s views coincide with those of individual committee members.

8. The Committee shall be permitted to conduct “exit” or other interviews of currently serving officers, trustees, speaker and vice speaker for the sole purpose of assisting in determining the qualifications of officer, trustee, speaker and vice speaker applicants.

9. The Committee shall submit a written report to the COA secretary-treasurer at least 45 (forty-five) calendar days prior to the first session of that year’s COA House of Delegates meeting containing a slate list of officer, trustee, speaker and vice speaker nominees it determines best meet the minimum qualifications and ability to fulfill the responsibilities for the applicable position without regard to the number of positions open. Additionally from within this list, the committee may, at its sole discretion, include in its report a slate of recommended candidates it determines best meets the minimum qualifications and ability to fulfill the responsibilities for the applicable officer and trustee positions that is drawn from the qualified applicants.

10. The Committee members shall, during the entire term of their appointment, communicate and discuss, in writing or orally, only amongst themselves the consideration or potential consideration of any applicant or potential applicant except as otherwise provided for in these bylaws or COA House of Delegates resolution.

POTENTIAL FISCAL IMPACT: Potential insignificant, absorbable increased costs for a longer meeting of the COA Nominating Committee should the number of COA officer and trustee applicants increase.
Proposed Policy Resolution Number Three

to the 2017 House of Delegates

California Optometric Association Presidents’ Council

Proposed by Orange County Optometric Society

WHEREAS, COA Presidents’ Council is an event of the society presidents and president-elects to develop leadership skills and foster communication, with the opportunity to propose by-laws amendments or policy resolutions to make recommendations to the COA Board of Trustees, and to consider ideas for potential COA House of Delegates COA bylaw amendments and policy resolutions to be proposed by societies; and,

WHEREAS, 2013 Policy Resolution #9 Presidents’ Council and Leadership Council Resumption provided that:

RESOLVED, that the COA BOT reinstate Presidents’ Council for the year 2013, to be attended by each society’s President and President-Elect.
RESOLVED, that the COA BOT explore the feasibility of conducting the event jointly with the Monterey Symposium.

WHEREAS, 2014 Policy Resolution #3 COA Presidents’ Council states (highlight added):

RESOLVED, that the 2014 COA House of Delegates (HOD) formally recognizes the annual COA Presidents’ Council meeting consisting of representatives from each COA society; and,

BE IT FURTHER RESOLVED, that the COA Presidents’ Council Planning Committee shall be comprised of two (2) COA trustees appointed by the COA president and confirmed by the COA Board of Trustees to serve as chair and vice chair of the committee; and, representatives from four (4) COA societies chosen at random by the COA societies. All societies will serve a two-year term except for the first year, two societies will be randomly selected to serve two-year terms and two societies will be randomly selected to serve one year terms. A society may not be represented on the committee again until each society has been selected for the committee.

WHEREAS, COA Presidents’ Council was has been budgeted for 2016 and was not held. The next COA Presidents’ Council meeting will be held in 2017 will occur following this meeting which does not allowing for dialog between the society leadership to propose any make recommendations to the COA Board of Trustees prior to the COA House of Delegates and consider ideas for potential COA bylaw amendments and policy resolutions to be proposed by societies bylaws amendments or policy resolutions for consideration; therefore be it

RESOLVED, that the California Optometric Association will hold the COA Presidents’ Council annually; and be it further

RESOLVED, that the COA Presidents’ Council be held xxx [days, weeks or months] following the adjournment of the year’s COA House of Delegates meeting and no less than 100 days in advance of the next scheduled COA House of Delegates meeting to allow ample time for submission of proposed Bylaw amendments or Policy Resolutions to make recommendations to the COA Board of Trustees prior to the COA House of Delegates meeting and consider ideas for potential COA bylaw amendments and policy resolutions to be proposed by societies.
Potential Fiscal Impact: As written, the COA President’s Council meeting could not be held in conjunction with the COA Monterey Symposium, e.g., this event is generally held less than 100 days prior to the COA House of Delegates meeting, thereby increasing costs. Depending on the length of the meeting and where it is held, based on the anticipated cost of the 2017 COA Presidents’ Council meeting, expenses would rise $5,000 to $10,000, totaling $25,000 to $30,000 for the meeting.
Proposed Policy Resolution Number Four to The 2017 COA House of Delegates

President's Council

Proposed by the following Societies as Co-Authors: Redwood Empire, Santa Clara County, Alameda-Contra-Costa Counties, San Francisco, San Mateo County, the U.C. Berkeley Student Section

WHEREAS, the COA President’s Council has been an open forum for the leaders of local societies to discuss and debate issues facing California optometry and strengthen their leadership skills; and,

WHEREAS, prior resolutions, #9 in 2013 and #3 in 2014, have expressed concern over the diminished role of the COA President’s Council in shaping COA policy and training new leaders; and,

WHEREAS, the COA President’s Council allows for the potential to bring forth recommendations to the COA Board of Trustees and consider ideas proposals for policy resolutions or bylaws amendments to potentially submit to the COA House of Delegates by societies; and,

WHEREAS, the holding of the 2016 President’s Council meeting in 2016 did not occur as omitted and the 2017 President’s Council has been shortened and over the years has been shortened from 12 hours to as little as 4 hours; and,

WHEREAS, the proposed agenda for the 2017 President’s Council has minimal time scheduled for open discussion and exchange of ideas; and,

WHEREAS, the COA President’s Council for 2017 is scheduled to take place directly after the 2017 COA House of Delegates with no time to submit recommendations consider ideas for policy resolutions or bylaws amendments for potential introduction; now, therefore, be it

RESOLVED, that the COA President’s Council of the COA be held annually at an easily accessible location that encourages membership participation and minimizes participant’s expenses; and, be it further be it

RESOLVED, that the COA President’s Council of the COA be held annually at least ninety days 30 (thirty) days prior to the deadline to submit a bylaw amendment to the COA House of Delegates so that ideas considered at the meeting for potential proposed policy resolutions or bylaws amendments may be submitted by societies in a timely manner; and, be it further be it

RESOLVED, that the COA President’s Council of the COA be held over at least one full day to allow for the dissemination and discussion of topical issues among the attendees.

Potential Financial Impact: The following represents a range from lowest to highest financial impact for a one-day COA Presidents’ Council meeting based on 40 paying attendees: 1) If the COA Presidents’ Council meeting was held on the same day and at the same location as a one-
day COA OptoWest seminar, food and beverage and travel-related costs would increase an estimated $6,000 total over current costs for a half-day program associated with the COA Monterey Symposium or a COA House of Delegates meeting; 2) If the COA Presidents’ Council meeting was held as a standalone meeting not associated with any COA event, food and beverage and travel-related costs would increase an estimated $8,500 total based on the same basis as above.
Proposed Policy Resolution Number Five
to the 2017 COA House of Delegates

Candidate for California State Legislative Interview Process

Proposal by the Alameda-Contra Costa Counties Optometric Society

Whereas, the COA has been actively involved in supporting candidates running for the California State Legislature for decades; and,

Whereas, the COA has previously conducted regional candidate interviews throughout the state that included and welcomed COA members/students to participate; and,

Whereas, the past interview process included interested members to meet prospective legislators, discuss current legislative concerns, establish potential relationships, and create a perception of transparency in the candidate selection process; and,

Whereas, new advances in technology can allow videoconferencing options and other technology for candidate interviews to take place with less prohibitive costs both for the COA and the participating doctors; now, therefore be it.

Resolved, that the 2017 House of Delegates directs the COA Board of Trustees to re-evaluate and re-instate the California State Legislature review and carry out a process to increase the number of COA members and COA student members participating at candidate interviews at the state and local levels process; and, be it further.

Resolved, that the COA establish an ongoing structure and process of endorsement for candidates that includes no more than 20 and no less than 5 candidates running in the 2018 and future contested elections.

Resolved, that the COA members and COA student members interviewers will submit a summary of the candidate interview support recommendations to the appropriate COA Key Person Coordinator and COA staff COA Board of Trustees following the interview process.

Potential Fiscal Impact: Costs depend on the manner in which expanded access to candidate interviews are carried out. If it is decided to conduct more local in-person interviews, costs per interview session would include travel by at least one COA staff member and one COA lobbyist at $100 to $250 each, travel by members to interview candidates at approximately $50 each; room rental of $500 to $1,000, equaling $950 to $1,750 based on five members at the interview. Preliminary estimates for videoconferencing can range from 1) no cost (Skype, Google Hangouts) that is limited to 10 users who have the necessary equipment, e.g., camera, etc., as well as limits on the length of time a “conference” can occur to 2) plans that range up to $55 a month (Adobe Concepts). None of the videoconferencing plans researched would allow more than 25 users at one time. Whether in-person or videoconference candidate interviews, establishment of this new program will result in significant COA Governmental Affairs Department staff time in arranging those meetings.
Proposed Policy Resolution Six

to the 2017 COA House of Delegates

Parental Leave Dues Adjustment

Proposed by the Alameda-Contra Costa Counties Optometric Society

WHEREAS, promoting COA membership to Doctors of Optometry in California continues to be an important priority; and,

WHEREAS, the decision to maintain COA membership while starting a family can be financially burdensome due to loss of work and increased financial demand; and,

WHEREAS, COA current policy already offers a 50% dues reduction for female members who take maternity leave, but does not acknowledge this existing dues reduction in the COA bylaws; and,

WHEREAS, many members are unaware of COA’s existing dues reductions for maternity leave as the information is difficult to locate on the COA website; and,

WHEREAS, the existing COA policy does not include paternity leave nor is it inclusive of all families for (examples: adoptive parents, non-birth parents, two-father or two-mother households, etc.); and,

WHEREAS, COA is likely to retain and gain more members who are concerned about the cost of dues when planning their families.;

now, therefore, be it

RESOLVED, that a member is eligible for a benefit “parental leave” reduction of a 50% discount of the COA and society dues amount then-paid by that member of either gender who takes time off work to deliver and/or bond with a new child or a child in connection with adoption or foster care placement; and, be it further

RESOLVED, that this 50% dues reduction applies within one year of the birth, adoption or start of foster care of a child, is limited to the time the member actually takes off work, and shall not exceed six (6) months maximum; and, be it further

RESOLVED, be available to doctors of either gender who take parental leave from work commensurate to the amount of time taken off (no less than 1 month, no more than 6 months). For example, if a member takes 2 months off, he or she would receive a 50% discount off 2 months worth of membership dues; and, that this dues reduction may be extended for an additional six (6) months, but not to exceed 12 (twelve) months of parental leave dues reduction eligibility in total, for a serious pregnancy-related medical condition or serious health condition of the new, adopted or foster child; and, be it further

RESOLVED, that the eligible member submit a written request to COA for the parental leave dues reduction or parental leave dues reduction extension; and, be it further

RESOLVED, that the COA include information about parental leave dues adjustment reduction on the membership category page of the COA website.
Potential Fiscal Impact: The expansion of eligibility for parental leave to include the other parent and the adoption or foster care placement of a child would result in the following:

- Dues revenue loss for COA and COA societies, per occurrence, for the initial six months of eligibility: $16.83 to $203.25 for COA and $.59 to $93.50 for COA societies, depending upon the COA member classification
- For an additional six months dues reduction, the dues revenue loss for COA and COA societies is double the above

However, this resolution would reduce the current dues reduction eligibility for female COA members giving birth from 12 months. As a result, the proposal would reduce the dues revenue loss under current policy by the following: $16.83 to $203.25 for COA and $.59 to $93.50 for COA societies, per occurrence and depending upon the COA member classification.
Proposed Policy Resolution Number Seven
to the 2017 COA House of Delegates

Children’s Vision Legislation

Proposed by the Alameda Contra Costa Counties Optometric Society and Redwood Empire Optometric Society

WHEREAS, the National Health Care Reform Act (HCRA) federal Affordable Care Act (ACA) has included a Children’s pediatric vision as one of the ACA’s essential benefits; and,

WHEREAS, we have a problem in California; One in four children and adolescents have vision problems that inhibit learning and socialization; and,

WHEREAS, Senate Bill 402 (Mitchell) was sponsored by the State Board of Optometry and supported by the COA; and,

WHEREAS, Senate Bill 402 clarifies a vision appraisal as required a comprehensive eye examination that is to be conducted during kindergarten and or upon first entry to an elementary school district; and,

WHEREAS, early detection and treatment provides the very best opportunities to correct vision problems; and,

WHEREAS, our profession needs to make sure ensure that every child has the best possible tools to learn successfully; now, be it

RESOLVED, that the 2017 House of Delegates directs the COA Board of Trustees to make the passage and adoption of Children’s Vision legislation one of their its primary goals for 2017.

Potential Fiscal Impact: As the passage of children’s vision legislation in the 2017-18 Legislative Session is a priority for COA as stated in the COA Strategic Plan, the financial resources for this objective have been placed in the proposed 2017 and 2018 COA budgets.