Image# 12954224483 PAGE 1 / 188

FEC FORM 3Y

REPORT OF RECEIPTS AND DISBURSEMENTS

1. NAME OF TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5	
BORDER HEALTH FEDERAL PAC	
ADDRESS (number and street) 612 W. Nolana Suite 340	
Check if different	
than previously reported. (ACC) McAllen TX 78504	
2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CO	DDE 🛦
C C00415752 3. IS THIS REPORT (N) OR X AMENDED (A)	
4. TYPE OF REPORT (Choose One) (b) Monthly Report Due On: May 20 (M5) Aug 20 (M8) Jun 20 (M6) Sep 20 (M9)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12)
(a) Quarterly Reports:	Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report (Q1) (a) 10 P (M4) Apr 20 (M4) Jul 20 (M7) Oct 20 (M10)	Jan 31 (YE)
X July 15 Ouarterly Report (Q2) (C) 12-Day Primary (12P) General (12G) PRE-Election	Runoff (12R)
Report for the: Convention (12C) Special (12S) October 15 Quarterly Report (Q3)	
January 31 Year-End Report (YE) Election on State of	of
July 31 Mid-Year Report (Non-election Year Only) (MY) (d) 30-Day POST-Election Report for the:	Special (30S)
Termination Report (TER) Election on Termination Report in the State of S	of
5. Covering Period 04 01 2012 through 06 30 2012	
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.	
Type or Print Name of Treasurer	
Signature of Treasurer Ernie Perez [Electronically Filed] Date Date	2012
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2	U.S.C. §437g.
Office Use Only FEC FOF Rev. 12/2	

OF I FEC Form 3X (Rev. 02/2003)	SUMMARY PAGE RECEIPTS AND DISBURSEMENTS	Page 2
Write or Type Committee Name		
BORDER HEALTH FEDERAL PAC		
Report Covering the Period: From: 04	/ D D / Y Y Y Y Y Y Y TO:	06 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2012		1006233.52
(b) Cash on Hand at Beginning of Reporting Period	929547.82	
(c) Total Receipts (from Line 19)	113583.59	230609.17
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1043131.41	1236842.69
7. Total Disbursements (from Line 31)	219330.20	413041.48
3. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	823801.21	823801.21
Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	1800.00	
This committee has qualified as a multicandid	date committee. (see FEC FORM 1M)	

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

BORDER HEALTH FEDERAL PAC

I. Receipts	I. Receipts COLUMN A Total This Period						
Contributions (other than loans) From:	1						
(a) Individuals/Persons Other							
Than Political Committees	405474.05	204655 22					
(i) Itemized (use Schedule A)	105174.25	201655.33					
(ii) Unitemized	8409.34	23953.84					
(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	113583.59	225609.17					
Lines II(a)(i) and (ii)	, 113303.39	, 220000.17					
(b) Political Party Committees	0.00	0.00					
(c) Other Political Committees							
(such as PACs)	0.00	0.00					
(d) Total Contributions (add Lines	,						
11(a)(iii), (b), and (c)) (Carry							
Totals to Line 33, page 5)	113583.59	225609.17					
Transfers From Affiliated/Other							
Party Committees	0.00	0.00					
	0.00						
All Loans Received	0.00	0.00					
Loan Repayments Received	0.00	0.00					
Offsets To Operating Expenditures		·					
(Refunds, Rebates, etc.)	0.00						
(Carry Totals to Line 37, page 5)	0.00	0.00					
Refunds of Contributions Made							
to Federal Candidates and Other	0.00	5000.00					
Political Committees	0.00	5000.00					
Other Federal Receipts	0.00	0.00					
(Dividends, Interest, etc.)	0.00	0.00					
(a) Non-Federal Account							
(from Schedule H3)	0.00	0.00					
(non ochedule rio)	0.00	0.00					
(h) Levin Funda (fram Cahadula 115)	0.00	0.00					
(b) Levin Funds (from Schedule H5)	7	0.00					
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00					
(4) (53.8 (13.8 (43.8 (43.8 (43.4 (43.8 (43							
Total Receipts (add Lines 11(d),							
12, 13, 14, 15, 16, 17, and 18(c))▶	113583.59	230609.17					
Total Federal Receipts							

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1. (Operating Expenditures: (a) Allocated Federal/Non-Federal	Total Tillo I Ollow	Calcinal Teal-to-Date
	Activity (from Schedule H4) (i) Federal Share	0.00	0.00
	(i) I ederal Share		
	(ii) Non-Federal Share	0.00	0.00
((b) Other Federal Operating		
	Expenditures	69330.20	158041.48
((c) Total Operating Expenditures		
_	(add 21(a)(i), (a)(ii), and (b))▶	69330.20	158041.48
	Transfers to Affiliated/Other Party	0.00	0.00
(Committees Contributions to	0.00	0.00
6	Federal Candidates/Committees and Other Political Committees	145000.00	205000.00
	ndependent Expenditures	0.00	0.00
((use Schedule E) Coordinated Party Expenditures	0.00	0.00
((2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
(use scriedule r)	7 7	0.00
1	Loan Repayments Made	0.00	0.00
	oun rispujinens muusimminimminim		
	Loans Made	0.00	0.00
	Refunds of Contributions To: (a) Individuals/Persons Other		
(Than Political Committees	0.00	0.00
	Ī		
((b) Political Party Committees	0.00	0.00
((c) Other Political Committees	0.00	0.00
	(such as PACs)	0.00	0.00
((d) Total Contribution Refunds		
((add Lines 28(a), (b), and (c))▶	0.00	0.00
	(add 2mos 25(a), (b), and (0),		
(Other Disbursements	5000.00	50000.00
	L		
F	Federal Election Activity (2 U.S.C. §431(20))		
((a) Allocated Federal Election Activity		
	(from Schedule H6)	0.00	0.00
	(i) Federal Share	0.00	0.00
	(ii) III aviali Obasa	0.00	0.00
,	(ii) "Levin" Share(b) Federal Election Activity Paid Entirely	0.00	
((b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
((c) Total Federal Election Activity (add		7 7
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
٦	Total Disbursements (add Lines 21(c), 22,		
2	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	219330.20	413041.48
	L		
	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)	2/2222	440044 40
f	from Line 31)	219330.20	413041.48

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	113583.59	225609.17
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	113583.59	225609.17
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	69330.20	158041.48
. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
Net Operating Expenditures (subtract Line 37 from Line 36)	69330.20	158041.48

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: 97 'A = G7 9 @ 65 B9 CI G'H9 LH F9 @ 5 H98 'HC' 5 'F9 DC FHŽ G7 < 98 I @ 9 'C F' + H9 A = N 5 H + C B

Form/Schedule: F3XA
Transaction ID:

On schedule B supporting line 21 (b) of report, there were several itemized disbursements for which purpose/description was not reflected. This report has been amended to reflect purpose/description.

On schedule B supporting line 23 --- amendment to charitable donation entity is reflected on schedule B Line 29

instead on Line 23 (Basilica of Our Lady - \$5K)

submitted second amended report to reflect updated beginning and ending ytd cash on hand balances. on 09.27.2012 Input name error on contribution reflecting Demoncratic Senate Congressional Committee; should have reflected Dewhurst for Texas. the individual/organization eent are nest to each other by line item on BHFPAC listing. Input error on name.

Form/Schedule: Transaction ID:

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

TOTT EITHE TOMBETT.						PAGE	=	7	OF		188
(c	(check only one)										
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or for commercial purposes, other than using the	he name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	PAC	
Full Name (Last, First, Middle Initial) Dr. Ziad Abdeen Mailing Address 809-A Savannah #3		Date of Receipt
City McAllen FEC ID number of contributing	State Zip Code TX 78504	Transaction ID : SA11AI.18009 Amount of Each Receipt this Period 250.00
federal political committee. Name of Employer selfemployed Receipt For:	Occupation private investor Aggregate Year-to-Date ▼	contribution
Primary General Other (specify) ▼ Full Name (Last First Middle Initial)	250.00	
Full Name (Last, First, Middle Initial) Charity Abreu Mailing Address 1619 hertiage lane		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City mission FEC ID number of contributing federal political committee.	State Zip Code TX 78572	Transaction ID : SA11AI.17503 Amount of Each Receipt this Period 250.00
Name of Employer self-employee	Occupation physician	contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Charity Abreu Mailing Address 1619 hertiage lane		Date of Receipt
City mission	State Zip Code TX 78572	05 30 2012 Transaction ID : SA11AI.17714 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer	Occupation	250.00 contribution
self-employee Receipt For: Primary General Other (specify) ▼	physician Aggregate Year-to-Date ▼ 1250.00	
SUBTOTAL of Receipts This Page (optional)		750.00
TOTAL This Period (last page this line number	er only)	

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

FOR LINE NUMBER:					PAGE		8	OF		188
(check only one)										
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or for commercial purposes, other than using the	e name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL I	PAC	
Full Name (Last, First, Middle Initial) Charity Abreu		Date of Receipt
Mailing Address 1619 hertiage lane		06 20 2012
City	State Zip Code	Transaction ID : SA11AI.17928
mission	TX 78572	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	contribution
self-employee	physician	
Receipt For:	Aggregate Year-to-Date ▼	-
Primary General	Aggregate rear-to-bate 🔻	
Other (specify) ▼	1500.00	
Full Name (Last, First, Middle Initial) Ricardo Abreu		Date of Receipt
Mailing Address 200		M = M / D = D / Y = Y = Y
E. Xenops	Otata 7'- O-1-	04 26 2012
City	State Zip Code	Transaction ID : SA11AI.17504
McAllen	TX 78504	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer	Occupation	contribution
Self employed	physician	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	600.00	
Full Name (Last, First, Middle Initial) C. Ricardo Abreu		Date of Receipt
Mailing Address 200 E. Xenops		05 30 2012
City	State Zip Code	Transaction ID : SA11AI.17715
McAllen	TX 78504	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer	Occupation	contribution
Self employed	physician	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General		
Other (specify) ▼	750.00	
SUBTOTAL of Receipts This Page (optional)		550.00
TOTAL This Period (last page this line number	only)	

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

FOR LINE NUMBER:					PAGE		9	OF		188
(check only one)										
X	11a		11b		11c		12	2		
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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL		
Full Name (Last, First, Middle Initial) A. Ricardo Abreu Mailing Address 200 E. Xenops City McAllen FEC ID number of contributing federal political committee. Name of Employer Self employed Receipt For: Primary Other (specify) Full Name (Last, First, Middle Initial)	State Zip Code TX 78504 C Occupation physician Aggregate Year-to-Date ▼ 900.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Ruben Abreu Mailing Address 104 augusta square City mcallen FEC ID number of contributing federal political committee. Name of Employer self-employee Receipt For: Primary General Other (specify) ▼	State Zip Code TX 78503 C Occupation physician Aggregate Year-to-Date ▼ 1000.00	Date of Receipt 04 26 2012 Transaction ID : SA11AI.17505 Amount of Each Receipt this Period 250.00 contribution
Full Name (Last, First, Middle Initial) Ruben Abreu Mailing Address 104 augusta square City mcallen FEC ID number of contributing federal political committee. Name of Employer self-employee Receipt For: Primary Other (specify)	State Zip Code TX 78503 C Occupation physician Aggregate Year-to-Date ▼ 1250.00	Date of Receipt M
SUBTOTAL of Receipts This Page (optional)		650.00
TOTAL This Period (last page this line number	r only)	

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

F	FOR LINE NUMBER:					PAGE	•	10	OF	188
(check only one)										
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		13		14		15		16	,	17

or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL I		
Full Name (Last, First, Middle Initial) A. Ruben Abreu Mailing Address 104 augusta square City mcallen FEC ID number of contributing federal political committee.	State Zip Code TX 78503	Date of Receipt 06 20 2012 Transaction ID: SA11AI.17930 Amount of Each Receipt this Period
Name of Employer self-employee Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1500.00	contribution
Full Name (Last, First, Middle Initial) Juan Aguilera Mailing Address 807 North Cage City	State 7in Code	Date of Receipt 04 26 2012
City Pharr FEC ID number of contributing federal political committee.	State Zip Code TX 78577	Transaction ID : SA11AI.17506 Amount of Each Receipt this Period 250.00
Name of Employer selfemployed Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1000.00	contribution
Full Name (Last, First, Middle Initial) Juan Aguilera Mailing Address 807 North Cage City	State Zip Code	Date of Receipt M = M
Pharr FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: Primary General	TX 78577 C Occupation physician Aggregate Year-to-Date ▼	Amount of Each Receipt this Period 250.00 contribution
Other (specify) ▼ SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number	•	750.00

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

FOR LINE NUMBER:					PAGE	 11	OF	188
(check only one)								
X	11a		11b		11c	12	2	
	13		14		15	16	3	17

	the name and address of any political committee to	
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	. PAC	
Full Name (Last, First, Middle Initial) Juan Aguilera Mailing Address 807 North Cage		Date of Receipt
City Pharr	State Zip Code TX 78577	Transaction ID : SA11AI.17931 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer selfemployed	Occupation physician	- contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	
Full Name (Last, First, Middle Initial) Michael Alleyn Mailing Address 5505 N. 4th		Date of Receipt
City mcallen	State Zip Code TX 78501	04 26 2012 Transaction ID : SA11AI.17508 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00 contribution
Name of Employer self-employed Receipt For:	Occupation private investor	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Michael Alleyn		Date of Receipt
Mailing Address 5505 N. 4th	Charles	05 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City mcallen	State Zip Code TX 78501	Transaction ID : SA11AI.17719 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer self-employed Receipt For: Primary General Other (specify) ▼	Occupation private investor Aggregate Year-to-Date ▼ 1250.00	- contribution
SUBTOTAL of Receipts This Page (optional).		750.00
TOTAL This Period (last page this line number	er only)	

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

I OIT LINE HOMBET					PAGE	1	12	OF		188
(check only one)										
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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL		
Full Name (Last, First, Middle Initial) Michael Alleyn Mailing Address 5505 N. 4th City	State Zip Code	Date of Receipt M = M / D = D / Y = Y = Y = Y
mcallen FEC ID number of contributing federal political committee. Name of Employer self-employed Receipt For: Primary General Other (specify)	TX 78501 C Occupation private investor Aggregate Year-to-Date ▼ 1500.00	Amount of Each Receipt this Period 250.00 contribution
Full Name (Last, First, Middle Initial) Michael Amyx Mailing Address 2108 Mynah City mcallen FEC ID number of contributing federal political committee. Name of Employer self-employed Receipt For: Primary Other (specify)	State Zip Code TX 78501 C Occupation private investor Aggregate Year-to-Date ▼ 1000.00	Date of Receipt 04 26 2012 Transaction ID : SA11AI.17510 Amount of Each Receipt this Period 250.00 contribution
Full Name (Last, First, Middle Initial) Michael Amyx Mailing Address 2108 Mynah City mcallen FEC ID number of contributing federal political committee. Name of Employer self-employed Receipt For: Primary Other (specify)	State Zip Code TX 78501 C Occupation private investor Aggregate Year-to-Date ▼ 1250.00	Date of Receipt M
SUBTOTAL of Receipts This Page (optional)	>	750.00
TOTAL This Period (last page this line number	r only)	

		LINE			:	PAGE	. 1	3	OF	188
Use separate schedule(s) for each category of the	`	(check only one)								
Detailed Summary Page	×	11a		11b		11c		12	_	
		13		14		15		16		17

BORDER HEALTH FEDERA	L PAC							
Full Name (Last, First, Middle Initial) Michael Amyx Mailing Address 2108 Mynah City mcallen	Michael Amyx Mailing Address 2108 Mynah							
FEC ID number of contributing federal political committee. Name of Employer self-employed Receipt For: Primary General Other (specify)	Occupation private investor Aggregate Year-to-Date ▼ 1500.00	Amount of Each Receipt this Period 250.00 contribution						
Full Name (Last, First, Middle Initial) Dr. Edwardo Aquino Mailing Address 112 E. Xenops City Mcallen FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: Primary General Other (specify)	State Zip Code TX 78504 C Occupation physician Aggregate Year-to-Date ▼ 500.00	Date of Receipt 04 26 2012 Transaction ID : SA11AI.17511 Amount of Each Receipt this Period 125.00 contribution						
Full Name (Last, First, Middle Initial) Dr. Edwardo Aquino Mailing Address 112 E. Xenops City Mcallen FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: Primary General Other (specify)	State Zip Code TX 78504 C Occupation physician Aggregate Year-to-Date ▼ 625.00	Date of Receipt 05 30 2012 Transaction ID : SA11AI.17722 Amount of Each Receipt this Period 125.00 contribution						
	ı	<u> </u>						

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

FOR LINE NUMBER:						PAGE	 14	OF	 188	
(check only one)										
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			13		14		15	16	,	17

	the name and address of any political committee to	
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	- PAC	
Full Name (Last, First, Middle Initial) A. Dr. Edwardo Aquino Mailing Address 112 E. Xenops City Mcallen	State Zip Code TX 78504	Date of Receipt 06 20 2012 Transaction ID: SA11AI.18015 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: Primary General Other (specify)	Occupation physician Aggregate Year-to-Date ▼ 750.00	125.00 contribution
Full Name (Last, First, Middle Initial) Dario Arango Mailing Address 7004 N. Cynthia City mcallen FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: Primary General Other (specify)	State Zip Code TX 78504 C Occupation physician Aggregate Year-to-Date ▼ 1000.00	Date of Receipt 04 26 2012 Transaction ID : SA11AI.17512 Amount of Each Receipt this Period 250.00 contribution
Full Name (Last, First, Middle Initial) Dario Arango Mailing Address 7004 N. Cynthia City mcallen FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: Primary General Other (specify)	State Zip Code TX 78504 C Occupation physician Aggregate Year-to-Date ▼	Date of Receipt M M
SUBTOTAL of Receipts This Page (optional).		625.00
TOTAL This Period (last page this line numb	er only)	

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

FOR LINE NUMBER (check only one)

						PAGE	. 1	15	OF	•	188
	(check only one)										
	X	11a		11b		11c		12			
		13		14		15		16			17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL		
Full Name (Last, First, Middle Initial) Dario Arango Mailing Address 7004 N. Cynthia City mcallen FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: Primary Other (specify) Full Name (Last, First, Middle Initial)	State Zip Code TX 78504 C Occupation physician Aggregate Year-to-Date ▼ 1500.00	Date of Receipt M M M / 20 2012 Transaction ID: SA11AI.18016 Amount of Each Receipt this Period 250.00 contribution
Mailing Address 129 Bluebird City Mcallen FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: Primary General Other (specify) ▼	State Zip Code TX 78504 C Occupation physician Aggregate Year-to-Date ▼ 250.00	Date of Receipt M
Full Name (Last, First, Middle Initial) Daisy Arce Mailing Address 129 Bluebird City Mcallen FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: Primary General Other (specify)	State Zip Code TX 78504 C Occupation physician Aggregate Year-to-Date ▼ 300.00	Date of Receipt M M M / D D / 2012 Transaction ID : SA11AI.18017 Amount of Each Receipt this Period 50.00 contribution
SUBTOTAL of Receipts This Page (optional)	>	350.00
TOTAL This Period (last page this line numbe	r only)	

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

FOR LINE	NUMBER:	PAGE	PAGE 16 OF				
(check only one)							
X 11a	11b	11c	12				
13	14	15	16	17			

	he name and address of any political committee to	
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	PAC	
Full Name (Last, First, Middle Initial) Dr. Felipe Avila Mailing Address 104 W. 20th Street		Date of Receipt
City	State Zip Code	04 26 2012 Transaction ID : SA11AI.17515
Weslaco	TX 78596	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer	Occupation	- contribution
self-employed	doctor	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Felipe Avila Mailing Address 104 W. 20th Street		Date of Receipt
		05 30 2012
City	State Zip Code	Transaction ID : SA11AI.17726
Weslaco	TX 78596	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer	Occupation	contribution
self-employed	doctor	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 625.00	
Full Name (Last, First, Middle Initial) Dr. Felipe Avila		Date of Receipt
Mailing Address 104 W. 20th Street		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Weslaco	State Zip Code TX 78596	Transaction ID : SA11AI.18023 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer	Occupation	contribution
self-employed	doctor	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	750.00	
SUBTOTAL of Receipts This Page (optional)	>	375.00
TOTAL This Period (last page this line number	er only)	

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BORDER HEALTH FEDERA	L PAC	
Full Name (Last, First, Middle Initial) Murphy Badiga Mailing Address 1503 S. Airport suite 6 City weslaco FEC ID number of contributing federal political committee. Name of Employer self-employed Receipt For: Primary General Other (specify)	State Zip Code TX 78596 C Occupation physician Aggregate Year-to-Date ▼ 1600.00	Date of Receipt M
Full Name (Last, First, Middle Initial) Murphy Badiga Mailing Address 1503 S. Airport suite 6 City weslaco FEC ID number of contributing federal political committee. Name of Employer self-employed Receipt For: Primary Other (specify)	State Zip Code TX 78596 C Occupation physician Aggregate Year-to-Date ▼ 2000.00	Date of Receipt M M M
Full Name (Last, First, Middle Initial) Murphy Badiga Mailing Address 1503 S. Airport suite 6 City weslaco FEC ID number of contributing federal political committee. Name of Employer self-employed Receipt For: Primary Other (specify) General Other (specify)	State Zip Code TX 78596 C Occupation physician Aggregate Year-to-Date ▼ 2400.00	Date of Receipt M
SUBTOTAL of Receipts This Page (optional)	1200.00
TOTAL This Period (last page this line num	ber only)	

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or for commercial purposes, other than us	and Statements may not be sold or used by any pering the name and address of any political committee	
NAME OF COMMITTEE (IN FUII) BORDER HEALTH FEDEF	RAL PAC	
Full Name (Last, First, Middle Initial) A. Ms Susan Bajus		Date of Receipt
Mailing Address 5705 North 4th		05 30 2012
City	State Zip Code	Transaction ID : SA11AI.17728
McAllen	TX 78504	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	contribution
selfemployed	private investor	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) B. Ms Susan Bajus	•	Date of Receipt
Mailing Address 5705 North 4th		06 20 2012
City	State Zip Code	Transaction ID : SA11AI.18026
McAllen	TX 78504	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer selfemployed	Occupation private investor	contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	
Full Name (Last, First, Middle Initial) C. Cayetano Barrera	-	Date of Receipt
Mailing Address 501 Mockingbird Lane		05 302012
City	State Zip Code	Transaction ID : SA11AI.17729
mcallen	TX 78501	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	contribution
self-employed	physician	
Receipt For:	Aggregate Year-to-Date ▼	_
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (option	nal)	110.00
TOTAL This Period (last page this line no	umber only)	

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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL		
Full Name (Last, First, Middle Initial) Cayetano Barrera Mailing Address 501 Mockingbird Lane		Date of Receipt 06 20 2012
City mcallen FEC ID number of contributing federal political committee.	State Zip Code TX 78501	Transaction ID : SA11AI.18027 Amount of Each Receipt this Period 50.00
Name of Employer self-employed Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 300.00	contribution
Full Name (Last, First, Middle Initial) Mr. Marcos Barrera Mailing Address 3000 Yellowhammer City	State Zin Code	Date of Receipt 04 26 2012
City mcallen FEC ID number of contributing federal political committee.	State Zip Code TX 78504	Transaction ID : SA11AI.17519 Amount of Each Receipt this Period 125.00
Name of Employer self-employed Receipt For: Primary General Other (specify) ▼	Occupation private investor Aggregate Year-to-Date ▼ 500.00	contribution
Full Name (Last, First, Middle Initial) Mr. Marcos Barrera Mailing Address 3000 Yellowhammer City	State Zip Code	Date of Receipt 05 30 2012 Transaction ID: SA11AI.17730
mcallen FEC ID number of contributing federal political committee. Name of Employer	TX 78504	Amount of Each Receipt this Period 125.00 contribution
self-employed Receipt For: Primary General Other (specify)	private investor Aggregate Year-to-Date ▼ 625.00	
SUBTOTAL of Receipts This Page (optional)	>	300.00
TOTAL This Period (last page this line number	only)	

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NAME OF COMMITTEE (In Full)	D4.0	
BORDER HEALTH FEDERAL	. PAC	
Full Name (Last, First, Middle Initial) Mr. Marcos Barrera		Date of Receipt
Mailing Address 3000 Yellowhammer		06 20 2012
City	State Zip Code	Transaction ID : SA11AI.18028
mcallen	TX 78504	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer	Occupation	contribution
self-employed	private investor	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	Aggregate Teal-to-Date ¥	
Other (specify) ▼	750.00	
Full Name (Last, First, Middle Initial) Ricardo Barrera	•	Date of Receipt
Mailing Address 420 Frio		04 26 2012
City	State Zip Code	Transaction ID : SA11AI.17520
mission	TX 78572	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	contribution
self-employed	physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial)	1	Date of Receipt
Mailing Address 420 Frio		05 30 2012
City	State Zip Code	Transaction ID : SA11AI.17731
mission	TX 78572	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	contribution
self-employed	physician	_
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1250.00	
SUBTOTAL of Receipts This Page (optional)		625.00
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NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL F	PAC	
Full Name (Last, First, Middle Initial) Ricardo Barrera Mailing Address 420 Frio		Date of Receipt
City	State Zip Code	06 20 2012 Transaction ID : SA11AI.18029
mission	TX 78572	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer self-employed Receipt For:	Occupation physician	contribution
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	
Full Name (Last, First, Middle Initial) 3. Dr. Sebrahmanyan Behara Mailing Address 121 Cardinal		Date of Receipt
Mailing Address 121 Cardinal City	State Zip Code	04 26 2012 Transaction ID : SA11AI.17521
mcallen FEC ID number of contributing federal political committee.	TX 78504	Amount of Each Receipt this Period 400.00
Name of Employer self-employed	Occupation physician	contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1600.00	
Full Name (Last, First, Middle Initial) Dr. Sebrahmanyan Behara		Date of Receipt
Mailing Address 121 Cardinal		05 30 2012
City mcallen	State Zip Code TX 78504	Transaction ID : SA11AI.17732 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer self-employed	Occupation physician	contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	
SUBTOTAL of Receipts This Page (optional)		1050.00
TOTAL This Period (last page this line number of	only)	

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or for commercial purposes, other than using NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAI	the name and address of any political committee PAC	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Sebrahmanyan Behara Mailing Address 121 Cardinal City mcallen FEC ID number of contributing federal political committee. Name of Employer self-employed Receipt For: Primary General Other (specify)	State Zip Code TX 78504 C Occupation physician Aggregate Year-to-Date ▼ 2400.00	Date of Receipt 06 20 2012 Transaction ID: SA11AI.18030 Amount of Each Receipt this Period 400.00 contribution
Full Name (Last, First, Middle Initial) Juan Bernini Mailing Address 2804 Santa Ana City mission FEC ID number of contributing federal political committee. Name of Employer self-employed Receipt For: Primary General Other (specify)	State Zip Code TX 78574 C Occupation physician Aggregate Year-to-Date ▼	Date of Receipt 04 26 2012 Transaction ID: SA11AI.17522 Amount of Each Receipt this Period 250.00 contribution
Full Name (Last, First, Middle Initial) Juan Bernini Mailing Address 2804 Santa Ana City mission FEC ID number of contributing federal political committee. Name of Employer self-employed Receipt For: Primary General Other (specify)	State Zip Code TX 78574 C Occupation physician Aggregate Year-to-Date ▼ 1250.00	Date of Receipt 05 30 2012 Transaction ID : SA11AI.17733 Amount of Each Receipt this Period 250.00 contribution
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line numb	· · · · · · · · · · · · · · · · · · ·	900.00

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	the name and address of any political committee to	
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	_ PAC	
Full Name (Last, First, Middle Initial) Juan Bernini Mailing Address 2804 Santa Ana		Date of Receipt
City mission	State Zip Code TX 78574	06 20 2012 Transaction ID : SA11AI.18032 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer self-employed	Occupation physician	contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	
Full Name (Last, First, Middle Initial) Sarojini Bose Mailing Address 7007 N 1st Lane		Date of Receipt
City mcallen	State Zip Code TX 78504	Transaction ID : SA11AI.17523 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer self-employed	Occupation physician	contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Sarojini Bose		Date of Receipt
Mailing Address 7007 N 1st Lane		05 30 / Y=Y=Y=Y
City mcallen	State Zip Code TX 78504	Transaction ID : SA11AI.17734 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer self-employed Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1250.00	- contribution
SUBTOTAL of Receipts This Page (optional).		750.00
TOTAL This Period (last page this line number	er only)	

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or for commercial purposes, other than using th	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL		
Full Name (Last, First, Middle Initial) Sarojini Bose Mailing Address 7007 N 1st Lane		Date of Receipt
City mcallen	State Zip Code TX 78504	Transaction ID : SA11AI.18033 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer	Occupation	250.00 contribution
self-employed Receipt For: Primary General Other (specify) ▼	physician Aggregate Year-to-Date ▼ 1500.00	
Full Name (Last, First, Middle Initial) Francisco Bracamontes Mailing Address 2005 Cimarron Court	0.4.	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City mission FEC ID number of contributing federal political committee.	State Zip Code TX 78572	Transaction ID : SA11AI.17524 Amount of Each Receipt this Period 250.00
Name of Employer self-employed Receipt For:	Occupation physician Aggregate Year-to-Date ▼	contribution
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Francisco Bracamontes Mailing Address 2005 Cimarron Court		Date of Receipt 05 30 2012
City mission	State Zip Code TX 78572	Transaction ID : SA11AI.17735 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00 contribution
Name of Employer self-employed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1250.00	- CONTRIBUTION
SUBTOTAL of Receipts This Page (optional)		750.00
TOTAL This Period (last page this line number	r only)	

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or for commercial purposes, other than	using the name and address of any political committee	
NAME OF COMMITTEE (In Full) BORDER HEALTH FED	ERAL PAC	
Full Name (Last, First, Middle Initial) A. Francisco Bracamontes		Date of Receipt
Mailing Address 2005 Cimarron Cou		06 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.18034
mission	TX 78572	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	contribution
self-employed	physician	
Receipt For:		
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	1500.00	
Full Name (Last, First, Middle Initial) B. Dr. Yvonne Bracamontes		Date of Receipt
Mailing Address 2005 Cimarron Cou	rt	05 30 2012
City	State Zip Code	Transaction ID : SA11AI.17736
Mission	TX 78572	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	contribution
selfemployed	physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) C. Dr. Yvonne Bracamontes		Date of Receipt
Mailing Address 2005 Cimarron Cou	ırt	06 20 2012
City	State Zip Code	Transaction ID : SA11AI.18035
Mission	TX 78572	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer	Occupation	contribution
selfemployed	physician	
Receipt For:		\dashv
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	300.00	
	ptional)	350.00

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	the name and address of any political committee to	
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	. PAC	
Full Name (Last, First, Middle Initial) A. Robert Brace Mailing Address 2000 N. 8th Street		Date of Receipt
City	State Zip Code	04 26 2012 Transaction ID : SA11AI.17526
mcallen FEC ID number of contributing federal political committee.	TX 78501	Amount of Each Receipt this Period 400.00
Name of Employer self-employed	Occupation physician	- contribution
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1600.00	
Full Name (Last, First, Middle Initial) Robert Brace Mailing Address 2000 N. 8th Street		Date of Receipt
City mcallen	State Zip Code TX 78501	05 30 2012 Transaction ID : SA11AI.17737 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	400.00
Name of Employer self-employed	Occupation physician	- contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	
Full Name (Last, First, Middle Initial) C. Robert Brace		Date of Receipt
Mailing Address 2000 N. 8th Street		06 20 / Y Y Y Y Y Y Y
City mcallen	State Zip Code TX 78501	Transaction ID : SA11AI.18036 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer self-employed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 2400.00	- contribution
SUBTOTAL of Receipts This Page (optional)		1200.00
TOTAL This Period (last page this line number	er only)	

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or for commercial purposes, other than using t	he name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	. PAC	
Full Name (Last, First, Middle Initial) Alonzo Cantu Mailing Address P.O.Box 2673		Date of Receipt
City mcallen	State Zip Code TX 78502	04 26 2012 Transaction ID : SA11AI.17529 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	400.00
Name of Employer self-employed Receipt For: Primary General Other (specify) ▼	Occupation private investor Aggregate Year-to-Date ▼ 1600.00	contribution
Full Name (Last, First, Middle Initial) Alonzo Cantu Mailing Address P.O.Box 2673	State Zin Code	Date of Receipt 05 30 2012
City mcallen FEC ID number of contributing federal political committee.	State Zip Code TX 78502	Transaction ID : SA11AI.17740 Amount of Each Receipt this Period 400.00
Name of Employer self-employed Receipt For: Primary General Other (specify) ▼	Occupation private investor Aggregate Year-to-Date ▼ 2000.00	contribution
Full Name (Last, First, Middle Initial) Alonzo Cantu Mailing Address P.O.Box 2673 City	State Zip Code	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
mcallen FEC ID number of contributing federal political committee.	TX 78502	Amount of Each Receipt this Period 400.00
Name of Employer self-employed Receipt For: Primary General Other (specify) ▼	Occupation private investor Aggregate Year-to-Date ▼ 2400.00	contribution
SUBTOTAL of Receipts This Page (optional).	•	1200.00
TOTAL This Period (last page this line number	er only)	

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	e name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	PAC	
Full Name (Last, First, Middle Initial) Dr. Leonel Cantu Mailing Address 2102 Deborah		Date of Receipt
		05 30 2012
City Edinburg	State Zip Code TX 78539	Transaction ID : SA11AI.17741
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 50.00
Name of Employer Self employed	Occupation physician	- contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Leonel Cantu		Date of Receipt
Mailing Address 2102 Deborah City	State Zip Code TX 78539	06 20 2012 Transaction ID : SA11Al.18042
Edinburg FEC ID number of contributing federal political committee.	TX 78539	Amount of Each Receipt this Period 50.00
Name of Employer Self employed	Occupation physician	contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address 1201 S. Gumwood		05 30 2012
City Pharr	State Zip Code TX 78577	Transaction ID : SA11AI.17742 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer self-employee	Occupation private investor	contribution
Receipt For: Primary Other (specify)	Aggregate Year-to-Date ▼ 250.00	
CURTOTAL of Descripts This Prove (cont		150.00
SUBTOTAL of Receipts This Page (optional)	>	7

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or for commercial purposes, other than using	nd Statements may not be sold or used by any per g the name and address of any political committee	
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERA	L PAC	
Full Name (Last, First, Middle Initial) Ms Melissa Cantu Mailing Address 1201 S. Gumwood		Date of Receipt
	Charles T. O. I.	06 20 2012
City Pharr	State Zip Code TX 78577	Transaction ID : SA11AI.18045
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 50.00
Name of Employer	Occupation	contribution
self-employee Receipt For:	private investor	-
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Carlos Cardenas		Date of Receipt
Mailing Address 1000 N. Taylor Road		04 26 2012 _
City	State Zip Code	Transaction ID : SA11AI.17532
mcallen	TX 78501	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer	Occupation	contribution
self-employed	physician	_
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1600.00	
Full Name (Last, First, Middle Initial) C. Carlos Cardenas		Date of Receipt
Mailing Address 1000 N. Taylor Road		M = M / D = D / Y = Y = Y
City	State Zip Code	05 30 2012 Transaction ID : SA11AI.17743
mcallen	TX 78501	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer	Occupation	contribution
self-employed	physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	2000.00	
SUBTOTAL of Receipts This Page (optional	I)	850.00
TOTAL This Period (last page this line num	ber only)	

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	the name and address of any political committee to	
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	. PAC	
Full Name (Last, First, Middle Initial) Carlos Cardenas Mailing Address 1000 N. Taylor Road		Date of Receipt
City mcallen	State Zip Code TX 78501	Transaction ID : SA11AI.18046 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer self-employed	Occupation physician	- contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2400.00	
Full Name (Last, First, Middle Initial) Jose Carreras Mailing Address 1016 E. Griffin Parkway		Date of Receipt 04 262012
City mission	State Zip Code TX 78572	Transaction ID : SA11AI.17533 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer self-employed	Occupation physician	contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1600.00	
Full Name (Last, First, Middle Initial) Jose Carreras		Date of Receipt
Mailing Address 1016 E. Griffin Parkway		05 30 / Y=Y=Y=Y 2012
City mission	State Zip Code TX 78572	Transaction ID : SA11AI.17744 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer self-employed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 2000.00	. contribution
SUBTOTAL of Receipts This Page (optional).		1200.00
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or for commercial purposes, other than using th	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL		
Full Name (Last, First, Middle Initial) Jose Carreras Mailing Address 1016 E. Griffin Parkway		Date of Receipt
City	State Zip Code TX 78572	06 20 2012 Transaction ID : SA11AI.18047
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 400.00
Name of Employer self-employed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 2400.00	contribution
Full Name (Last, First, Middle Initial) Marissa Castaneda Mailing Address 5021 Elk Lane City	State Zip Code	Date of Receipt 05 30 2012 Transaction ID: SA11AI.17745
Edinburg FEC ID number of contributing federal political committee.	TX 78539	Amount of Each Receipt this Period 50.00 contribution
Name of Employer self-employed Receipt For: Primary General Other (specify) ▼	Occupation private investor Aggregate Year-to-Date ▼ 250.00	Contribution
Full Name (Last, First, Middle Initial) Marissa Castaneda Mailing Address 5021 Elk Lane City Edinburg	State Zip Code TX 78539	Date of Receipt 06 20 2012 Transaction ID : SA11AI.18049 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer self-employed Receipt For: Primary General Other (specify)	Occupation private investor Aggregate Year-to-Date 300.00	50.00 contribution
SUBTOTAL of Receipts This Page (optional)	<u> </u>	500.00
TOTAL This Period (last page this line number	only)	

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	he name and address of any political committee to	
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	. PAC	
Full Name (Last, First, Middle Initial) Augusto Castrillon Mailing Address 223 Rio Grande Drive		Date of Receipt
City mission	State Zip Code TX 78572	04 26 2012 Transaction ID : SA11AI.17535 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer self-employed	Occupation physician	- contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Augusto Castrillon Mailing Address 223 Rio Grande Drive		Date of Receipt
City mission	State Zip Code TX 78572	05 30 2012 Transaction ID : SA11AI.17746 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer self-employed	Occupation physician	- contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	
Full Name (Last, First, Middle Initial) Augusto Castrillon		Date of Receipt
Mailing Address 223 Rio Grande Drive		06 20 / Y=Y=Y=Y
City mission	State Zip Code TX 78572	Transaction ID : SA11AI.18050 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer self-employed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1500.00	- contribution
SUBTOTAL of Receipts This Page (optional)		750.00
TOTAL This Period (last page this line number	er only)	

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	ne name and address of any political committee to	
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	PAC	
Full Name (Last, First, Middle Initial) Norma Cavazos-Salas Mailing Address 2301 N. Bryan Road		Date of Receipt
City	State Zip Code	04 26 2012 Transaction ID : SA11AI.17536
mission	TX 78572	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer	Occupation	contribution
self-employed	physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) 3. Norma Cavazos-Salas Mailing Address 2301 N Bryan Road		Date of Receipt
Mailing Address 2301 N. Bryan Road	1	05 30 2012
City	State Zip Code	Transaction ID : SA11AI.17747
mission	TX 78572	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer	Occupation	contribution
self-employed	physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 625.00	
Full Name (Last, First, Middle Initial) Norma Cavazos-Salas		Date of Receipt
Mailing Address 2301 N. Bryan Road		06 20 2012
City mission	State Zip Code TX 78572	Transaction ID : SA11AI.18051 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	125.00
Name of Employer	Occupation	contribution
self-employed	physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	750.00	
SUBTOTAL of Receipts This Page (optional)	>	375.00
TOTAL This Period (last page this line number	r only)	

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or for commercial purposes, other than using the	he name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL		
Full Name (Last, First, Middle Initial) A. R. Chandrarasekharan Mailing Address 1210 East 8th street suite 1 City weslaco FEC ID number of contributing federal political committee. Name of Employer self-employed Receipt For: Primary Other (specify) Full Name (Last, First, Middle Initial)	State Zip Code TX 78591 C Occupation physician Aggregate Year-to-Date ▼ 500.00	Date of Receipt 04 26 2012 Transaction ID: SA11AI.17537 Amount of Each Receipt this Period 125.00 contribution
R. Chandrarasekharan Mailing Address 1210 East 8th street suite 1 City weslaco FEC ID number of contributing federal political committee. Name of Employer self-employed Receipt For: Primary Other (specify) Other (specify)	State Zip Code TX 78591 C Occupation physician Aggregate Year-to-Date ▼ 625.00	Date of Receipt 05 30 2012 Transaction ID : SA11AI.17748 Amount of Each Receipt this Period 125.00 contribution
Full Name (Last, First, Middle Initial) R. Chandrarasekharan Mailing Address 1210 East 8th street suite 1 City weslaco FEC ID number of contributing federal political committee. Name of Employer self-employed Receipt For: Primary Other (specify)	State Zip Code TX 78591 C Occupation physician Aggregate Year-to-Date ▼ 750.00	Date of Receipt M M M
SUBTOTAL of Receipts This Page (optional)	>	375.00
TOTAL This Period (last page this line number	r only)	

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	name and address of any political committee to	o solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL F	PAC			
Full Name (Last, First, Middle Initial) Dr. Virah Cooper Mailing Address 1801 South 5th Street suite 7		Date of Receipt		
City	State 7:- C-1-	04 26 2012		
City McAllen	State Zip Code TX 78503	Transaction ID : SA11AI.17539		
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period		
Name of Employer self-employee	Occupation physician	- contribution		
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 400.00			
Full Name (Last, First, Middle Initial) 3. Dr. Virah Cooper Mailing Address 1801 South 5th Street suite 7	Date of Receipt			
Mailing Address 1801 South 5th Street suite 7 City McAllen	State Zip Code TX 78503	Transaction ID : SA11AI.17750 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C			
Name of Employer self-employee	Occupation physician	contribution		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00			
Full Name (Last, First, Middle Initial) Dr. Virah Cooper		Date of Receipt		
Mailing Address 1801 South 5th Street suite 7		06 20 2012		
City McAllen	State Zip Code TX 78503	Transaction ID : SA11AI.18054 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	100.00		
Name of Employer	Occupation	contribution		
self-employee	physician			
Receipt For:	Aggregate Year-to-Date ▼			
Primary General Other (specify) ▼	600.00			
SUBTOTAL of Receipts This Page (optional)		300.00		
TOTAL This Period (last page this line number of	<u> </u>			

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or		name and address of any political committee to			
\rangle	NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL F	PAC			
Α.	Full Name (Last, First, Middle Initial) Dr. Oscar Cortez Mailing Address 4101 South Burns Drive	Date of Receipt			
	City McAllen	State Zip Code TX 78503	04 26 2012 Transaction ID : SA11AI.17540 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee. Name of Employer	Occupation	100.00 contribution		
	Self employed Receipt For: Primary General Other (specify)	physician Aggregate Year-to-Date ▼ 400.00			
В.	Full Name (Last, First, Middle Initial) Dr. Oscar Cortez Mailing Address 4101 South Burns Drive	Date of Receipt 05 30 2012			
	City McAllen FEC ID number of contributing federal political committee.	State Zip Code TX 78503	Transaction ID : SA11AI.17751 Amount of Each Receipt this Period 100.00		
	Name of Employer Self employed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 500.00	contribution		
Full Name (Last, First, Middle Initial) C. Dr. Oscar Cortez Mailing Address 4101 South Burns Drive		Chata Zin Coda	Date of Receipt M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y		
	City McAllen FEC ID number of contributing federal political committee.	State Zip Code TX 78503	Transaction ID : SA11AI.18055 Amount of Each Receipt this Period 100.00		
	Name of Employer Self employed Receipt For: Primary General Other (specify)	Occupation physician Aggregate Year-to-Date ▼ 600.00	contribution		
s	SUBTOTAL of Receipts This Page (optional)		300.00		
Т	OTAL This Period (last page this line number	only)			

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	he name and address of any political committee to	
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	PAC	
Full Name (Last, First, Middle Initial) Diana Cortinas Mailing Address 1400 Northgate Lane		Date of Receipt
City	State Zip Code	04 26 2012 Transaction ID : SA11AI.17541
mcallen	TX 78504	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	219.06
Name of Employer	Occupation	contribution
self-employed	physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 757.58	
Full Name (Last, First, Middle Initial) 3. Diana Cortinas Mailing Address 1400 Northgate Lane		Date of Receipt
		05 30 2012
City	State Zip Code	Transaction ID : SA11AI.17752
mcallen	TX 78504	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	73.02
Name of Employer	Occupation	contribution
self-employed	physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 830.60	
Full Name (Last, First, Middle Initial) Diana Cortinas		Date of Receipt
Mailing Address 1400 Northgate Lane		06 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City mcallen	State Zip Code TX 78504	Transaction ID : SA11AI.18056 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer	Occupation	contribution
self-employed	physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1030.60	
SUBTOTAL of Receipts This Page (optional)		492.08
TOTAL This Period (last page this line number	er only)	

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or for commercial purposes, other than using th	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL		
Full Name (Last, First, Middle Initial) Guillermo Cortinas Mailing Address 1224 Northgate Lane City mcallen FEC ID number of contributing federal political committee. Name of Employer self-employed Receipt For: Primary General Other (specify)	State Zip Code TX 78504 C Occupation physician Aggregate Year-to-Date ▼ 774.43	Date of Receipt O4 26 2012 Transaction ID: SA11AI.17542 Amount of Each Receipt this Period 223.93 contribution
Full Name (Last, First, Middle Initial) Guillermo Cortinas Mailing Address 1224 Northgate Lane City mcallen FEC ID number of contributing federal political committee. Name of Employer self-employed Receipt For: Primary General Other (specify)	State Zip Code TX 78504 C Occupation physician Aggregate Year-to-Date ▼	Date of Receipt 05 30 2012 Transaction ID: SA11AI.17753 Amount of Each Receipt this Period 74.64 contribution
Full Name (Last, First, Middle Initial) Guillermo Cortinas Mailing Address 1224 Northgate Lane City mcallen FEC ID number of contributing federal political committee. Name of Employer self-employed Receipt For: Primary General Other (specify)	State Zip Code TX 78504 C Occupation physician Aggregate Year-to-Date ▼ 899.07	Date of Receipt 06 21 2012 Transaction ID: SA11AI.18057 Amount of Each Receipt this Period 50.00 contribution
SUBTOTAL of Receipts This Page (optional)		348.57
TOTAL This Period (last page this line number	only)	

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	the name and address of any political committee to					
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	. PAC					
Full Name (Last, First, Middle Initial) Javier Cortinas Mailing Address 1400 Northgate	avier Cortinas					
City mcallen	State Zip Code TX 78504	04 26 2012 Transaction ID : SA11AI.17543 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period				
Name of Employer self-employed	Occupation physician	contribution				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00					
Full Name (Last, First, Middle Initial) Javier Cortinas Mailing Address 1400 Northgate		Date of Receipt				
City mcallen	State Zip Code TX 78504	05 30 2012 Transaction ID : SA11AI.17754 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	250.00 contribution				
Name of Employer self-employed Receipt For:	Occupation physician	Contribution				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00					
Full Name (Last, First, Middle Initial) Javier Cortinas		Date of Receipt				
Mailing Address 1400 Northgate	Charles	06 20 / Y = Y = Y = Y = Y				
City mcallen	State Zip Code TX 78504	Transaction ID : SA11AI.18058 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	250.00				
Name of Employer self-employed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1500.00	_ contribution				
SUBTOTAL of Receipts This Page (optional).		750.00				
TOTAL This Period (last page this line number	er only)					

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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL		
Full Name (Last, First, Middle Initial) Dr. Hildegardo Costa Mailing Address 129 Bluebird City Mcallen FEC ID number of contributing	State Zip Code TX 78504	Date of Receipt M
federal political committee. Name of Employer selfemployed Receipt For: □ Primary □ General □ Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 250.00	contribution
Full Name (Last, First, Middle Initial) Dr. Hildegardo Costa Mailing Address 129 Bluebird City	State Zip Code	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mcallen FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For:	TX 78504 C Occupation physician	Transaction ID : SA11AI.18059 Amount of Each Receipt this Period 50.00 contribution
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Dr. Edgar Cruz Mailing Address 6912 N. Peking City	State Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mcallen FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: □ Primary □ General □ Other (specify) ▼	TX 78501 C Occupation physician Aggregate Year-to-Date ▼ 250.00	Amount of Each Receipt this Period 50.00 contribution
SUBTOTAL of Receipts This Page (optional)	_	150.00
TOTAL This Period (last page this line number	r only)	

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or for commercial purposes, other than using t	he name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	. PAC	
Full Name (Last, First, Middle Initial) James Darling Mailing Address 1225 E Peking City mcallen	State Zip Code TX 78501	Date of Receipt 04 26 2012 Transaction ID: SA11AI.17546
FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: Primary General Other (specify)	Occupation private investor Aggregate Year-to-Date 600.00	Amount of Each Receipt this Period 150.00 contribution
Full Name (Last, First, Middle Initial) James Darling Mailing Address 1225 E Peking City mcallen FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: Primary General Other (specify) Other (specify)	State Zip Code TX 78501 C Occupation private investor Aggregate Year-to-Date ▼ 750.00	Date of Receipt M
Full Name (Last, First, Middle Initial) James Darling Mailing Address 1225 E Peking City mcallen FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: Primary General Other (specify)	State Zip Code TX 78501 C Occupation private investor Aggregate Year-to-Date ▼ 900.00	Date of Receipt 06 20 2012 Transaction ID : SA11AI.18060 Amount of Each Receipt this Period 150.00 contribution
SUBTOTAL of Receipts This Page (optional).	>	450.00
TOTAL This Period (last page this line number	er only)	

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	the name and address of any political committee to	
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	_ PAC	
Full Name (Last, First, Middle Initial) David Deanda Mailing Address 2408 Dorado		Date of Receipt
City mission	State Zip Code TX 78574	04 26 2012 Transaction ID : SA11AI.17548 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer self-employed	Occupation private investor	- contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) David Deanda Mailing Address 2408 Dorado		Date of Receipt
City mission	State Zip Code TX 78574	05 30 2012 Transaction ID : SA11AI.17759 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer self-employed	Occupation private investor	- contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	
Full Name (Last, First, Middle Initial) David Deanda		Date of Receipt
Mailing Address 2408 Dorado	Charles	06 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City mission	State Zip Code TX 78574	Transaction ID : SA11AI.18062 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer self-employed Receipt For: Primary General Other (specify) ▼	Occupation private investor Aggregate Year-to-Date ▼ 1500.00	_ contribution
SUBTOTAL of Receipts This Page (optional).		750.00
TOTAL This Period (last page this line number	er only)	

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or for commercial purposes, other than using	g the name and address of any political committee to	
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERA	AL PAC	
Full Name (Last, First, Middle Initial) 1. Dr. Carlos De Juana		Date of Receipt
Mailing Address 1105 Zinnia		04 26 2012
City	State Zip Code	Transaction ID : SA11AI.17549
McAllen	TX 78504	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer	Occupation	- contribution
self-employee	physician	
Receipt For: Primary General Other (cnecify)	Aggregate Year-to-Date ▼ 500.00	
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) 3. Dr. Carlos De Juana		Date of Receipt
Mailing Address 1105 Zinnia		05 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.17760
McAllen	TX 78504	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer	Occupation	contribution
self-employee	physician	
Receipt For: Primary General Other (cnecify)	Aggregate Year-to-Date ▼ 625.00	
Other (specify) ▼	023.00	
Full Name (Last, First, Middle Initial) Dr. Carlos De Juana		Date of Receipt
Mailing Address 1105 Zinnia		06 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.18063
McAllen	TX 78504	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer	Occupation	_ contribution
self-employee	physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	750.00	
SUBTOTAL of Receipts This Page (optional	I)	375.00
TOTAL This Period (last page this line num	·	

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

or for commercial purposes, other than using	the name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERA	L PAC	
Full Name (Last, First, Middle Initial) Dr. Andrew De La Garza Mailing Address 708 South H Street		Date of Receipt
City McAllen FEC ID number of contributing federal political committee. Name of Employer self-employed Receipt For: Primary General	State Zip Code TX 78501 C Occupation physician Aggregate Year-to-Date ▼	Transaction ID : SA11AI.17761 Amount of Each Receipt this Period 50.00 contribution
Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Andrew De La Garza Mailing Address 708 South H Street	250.00	Date of Receipt
City McAllen FEC ID number of contributing federal political committee. Name of Employer self-employed Receipt For: Primary General	State Zip Code TX 78501 C Occupation physician Aggregate Year-to-Date ▼	Transaction ID : SA11AI.18064 Amount of Each Receipt this Period 50.00 contribution
Other (specify) ▼ Full Name (Last, First, Middle Initial) Jorge De La Garza Mailing Address 120 Condor City mcallen	State Zip Code TX 78504	Date of Receipt M M M
FEC ID number of contributing federal political committee. Name of Employer self-employed Receipt For: □ Primary □ General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1000.00	250.00 contribution
SUBTOTAL of Receipts This Page (optional)) >	350.00
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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL		
Full Name (Last, First, Middle Initial) Jorge De La Garza Mailing Address 120 Condor		Date of Receipt O5 30 2012
City mcallen FEC ID number of contributing federal political committee. Name of Employer self-employed Receipt For: Primary General Other (specify)	State Zip Code TX 78504 C Occupation physician Aggregate Year-to-Date ▼ 1250.00	Transaction ID : SA11AI.17762 Amount of Each Receipt this Period 250.00 contribution
Full Name (Last, First, Middle Initial) 3. Jorge De La Garza Mailing Address 120 Condor City mcallen FEC ID number of contributing federal political committee. Name of Employer self-employed	State Zip Code TX 78504 C Occupation physician	Date of Receipt 06 20 2012 Transaction ID : SA11AI.18065 Amount of Each Receipt this Period 250.00 contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	
Full Name (Last, First, Middle Initial) Luis Delgado Jr. Mailing Address 5128 N. 10th City Mcallen FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: Primary General Other (specify)	State Zip Code TX 78504 C Occupation physician Aggregate Year-to-Date ▼ 600.00	Date of Receipt 04 26 2012 Transaction ID: SA11AI.17552 Amount of Each Receipt this Period 150.00 contribution
SUBTOTAL of Receipts This Page (optional)		650.00
TOTAL This Period (last page this line number	r only)	

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NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL PAC Full Name (Last, First, Middle Initial) Luis Delgado Jr.	
Luis Delgado Jr.	
Mailing Address 5128 N 10th	Date of Receipt
Mailing Address 5128 N. 10th	05 30 / Y Y Y Y Y
City State Zip Code	Transaction ID : SA11AI.17763
Mcallen TX 78504	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	250.00
Name of Employer Occupation	contribution
selfemployed physician	
Receipt For: Aggregate Year-to-Date ▼	
Primary General	1
Other (specify) ▼ 850.00	1
Full Name (Last, First, Middle Initial) Luis Delgado Jr.	Date of Receipt
Mailing Address 5128 N. 10th	06 20 _2012 _
City State Zip Code	7 20 2012 2012 2012 2012 2012 2012 2012
Mcallen TX 78504	Amount of Each Receipt this Period
FFC ID symbox of contributing	
federal political committee.	250.00
Name of Employer Occupation	contribution
selfemployed physician	
Receipt For:	_
Primary General Aggregate Year-to-Date ▼	-
Other (specify) ▼ 1100.00	1
Full Name (Last, First, Middle Initial) Alberto Duran	Date of Receipt
Mailing Address 1615 Palazzo	04 26 2012
City State Zip Code	Transaction ID : SA11AI.17554
mission TX 78572	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	400.00
Name of Employer Occupation	contribution
selfemployed physician	_
Receipt For: Aggregate Year-to-Date ▼	
Primary General	1
Other (specify) ▼ 1600.00	1
SUBTOTAL of Receipts This Page (optional)	900.00
TOTAL This Period (last page this line number only)	

FOR LINE NUMBER: PAGE 47 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

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14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL PAC Full Name (Last, First, Middle Initial) Alberto Duran Date of Receipt Mailing Address 1615 Palazzo 30 2012 City State Zip Code Transaction ID: SA11AI.17765 TX mission 78572 Amount of Each Receipt this Period FEC ID number of contributing C 400.00 federal political committee. contribution Name of Employer Occupation selfemployed physician Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Alberto Duran Date of Receipt Mailing Address 1615 Palazzo 06 20 2012 City State Zip Code Transaction ID: SA11AI.18069 TX mission 78572 Amount of Each Receipt this Period FEC ID number of contributing C 400.00 federal political committee. contribution Name of Employer Occupation selfemployed physician Receipt For: Aggregate Year-to-Date ▼ Primary General 2400.00 Other (specify) Full Name (Last, First, Middle Initial) c. Kotthegal Eshwar Date of Receipt Mailing Address 108 Yellow Hammer 30 05 2012 City State Zip Code Transaction ID: SA11AI.17767 TX mcallen 78504 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. contribution Name of Employer Occupation selfemployed physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 850.00 SUBTOTAL of Receipts This Page (optional).....

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

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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL		
Full Name (Last, First, Middle Initial) Kotthegal Eshwar Mailing Address 108 Yellow Hammer City mcallen	State Zip Code TX 78504	Date of Receipt M = M
FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: Primary General Other (specify)	Occupation physician Aggregate Year-to-Date ▼ 300.00	Amount of Each Receipt this Period 50.00 contribution
Full Name (Last, First, Middle Initial) 3. Antonio Esparza Mailing Address 136 W. Yucca City mcallent FEC ID number of contributing	State Zip Code TX 78504	Date of Receipt M M / D P / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
federal political committee. Name of Employer selfemployed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1000.00	250.00 contribution
Full Name (Last, First, Middle Initial) Antonio Esparza Mailing Address 136 W. Yucca City mcallent FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For:	State Zip Code TX 78504 C Occupation physician	Date of Receipt 05 30 2012 Transaction ID : SA11AI.17768 Amount of Each Receipt this Period 250.00 contribution
Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)	Aggregate Year-to-Date ▼ 1250.00	550.00
TOTAL This Period (last page this line number	r only)	

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or for commercial purposes, other than using t	the name and address of any political committee					
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	- PAC					
Full Name (Last, First, Middle Initial) Antonio Esparza Mailing Address 136 W. Yucca		Date of Receipt				
	0444	06 20 2012				
City mcallent	State Zip Code TX 78504	Transaction ID : SA11AI.18072				
FEC ID number of contributing federal political committee.	C 78504	Amount of Each Receipt this Period 250.00				
Name of Employer selfemployed	Occupation physician	contribution				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00					
Full Name (Last, First, Middle Initial) 3. Maria Elena Falcon	I	Date of Receipt				
Mailing Address 2212 Westway City	State Zip Code	04 26 2012 Transaction ID : SA11AI.17558				
mcallen	TX 78504	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	250.00				
Name of Employer self-employed	Occupation physician	contribution				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00					
Full Name (Last, First, Middle Initial) C. Maria Elena Falcon	1	Date of Receipt				
Mailing Address 2212 Westway		05 30 2012				
City mcallen	State Zip Code TX 78504	Transaction ID : SA11AI.17769 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	250.00				
Name of Employer	Occupation	contribution				
self-employed	physician	_				
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	1250.00					
SUBTOTAL of Receipts This Page (optional).	>	750.00				
	er only)					

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	e name and address of any political committee to	
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	PAC	
Full Name (Last, First, Middle Initial) Maria Elena Falcon Mailing Address 2212 Westway		Date of Receipt
City	State Zip Code	06 20 2012 Transaction ID : SA11AI.18074
mcallen FEC ID number of contributing federal political committee.	TX 78504	Amount of Each Receipt this Period 250.00
Name of Employer self-employed	Occupation physician	contribution
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1500.00	
Full Name (Last, First, Middle Initial) Alberto Felici Mailing Address 2309 W. Greenbriar Square		Date of Receipt 04 26 2012
City mcallen	State Zip Code TX 78504	Transaction ID : SA11AI.17559 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	100.00
Name of Employer self-employed	Occupation physician	contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) . Alberto Felici		Date of Receipt
Mailing Address 2309 W. Greenbriar Square		05 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City mcallen	State Zip Code TX 78504	Transaction ID : SA11AI.17770 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer self-employed Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 500.00	- contribution
SUBTOTAL of Receipts This Page (optional)		450.00
TOTAL This Period (last page this line number	only)	

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Full Name (Last, First, Middle Initial) A. Alberto Felici Mailing Address 2309 W. Greenbriar Square City mcallen FEC ID number of contributing federal political committee.	State Zip Code TX 78504	Date of Receipt 06 20 2012 Transaction ID: SA11AI.18075 Amount of Each Receipt this Period 164.65
Name of Employer self-employed Receipt For: Primary General	Occupation physician Aggregate Year-to-Date ▼	contribution
Other (specify) ▼ Full Name (Last, First, Middle Initial) Marco Flores Mailing Address 320 Primrose City	State Zip Code	Date of Receipt 04 26 2012
mcallen FEC ID number of contributing federal political committee. Name of Employer self-employed Receipt For: Primary General Other (specify)	TX 78504 C Occupation physician Aggregate Year-to-Date ▼ 1000.00	Transaction ID: SA11AI.17560 Amount of Each Receipt this Period 250.00 contribution
Full Name (Last, First, Middle Initial) Marco Flores Mailing Address 320 Primrose City mcallen FEC ID number of contributing federal political committee. Name of Employer self-employed Receipt For: Primary General Other (specify)	State Zip Code TX 78504 C Occupation physician Aggregate Year-to-Date ▼ 1247.61	Date of Receipt 05 30 2012 Transaction ID : SA11AI.17771 Amount of Each Receipt this Period 247.61 contribution
SUBTOTAL of Receipts This Page (optional)	>	662.26

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	ne name and address of any political committee to	
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	PAC	
Full Name (Last, First, Middle Initial) Marco Flores Mailing Address 320 Primrose		Date of Receipt
City mcallen	State Zip Code TX 78504	06 20 2012 Transaction ID : SA11AI.18076 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer self-employed	Occupation physician	- contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1497.61	
Full Name (Last, First, Middle Initial) Mr. Raymond Franklin Mailing Address 3212 Nightingale Court		Date of Receipt
City McAllen	State Zip Code TX 78504	05 30 2012 Transaction ID : SA11AI.17773 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer selfemployed	Occupation private investor	contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Raymond Franklin		Date of Receipt
Mailing Address 3212 Nightingale Court	0	M = M / D = D / Y = Y = Y = Y = O6 20 2012
City McAllen	State Zip Code TX 78504	Transaction ID : SA11AI.18079 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer selfemployed Receipt For: Primary General Other (specify) ▼	Occupation private investor Aggregate Year-to-Date ▼ 300.00	- contribution
SUBTOTAL of Receipts This Page (optional)	>	350.00
TOTAL This Period (last page this line number	· only)	

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NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL F	PAC	
Full Name (Last, First, Middle Initial) Lugenio Galindo Mailing Address 5936 N. Cynthia		Date of Receipt
	State 7: Code	04 26 2012
City mcallen	State Zip Code TX 78504	Transaction ID : SA11AI.17563 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer self-employed Receipt For:	Occupation physician	contribution
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1600.00	
Full Name (Last, First, Middle Initial) Bugenio Galindo Mailing Address 5936 N. Cynthia		Date of Receipt
City mcallen	State Zip Code TX 78504	05 30 2012 Transaction ID : SA11AI.17774 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer self-employed	Occupation physician	contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	
Full Name (Last, First, Middle Initial) Eugenio Galindo		Date of Receipt
Mailing Address 5936 N. Cynthia		06 20 2012
City mcallen	State Zip Code TX 78504	Transaction ID : SA11AI.18080 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer self-employed	Occupation physician	contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2400.00	
SUBTOTAL of Receipts This Page (optional)		1200.00
TOTAL This Period (last page this line number	only)	

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	the name and address of any political committee to	
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	. PAC	
Full Name (Last, First, Middle Initial) Elvin Garcia Mailing Address 2800 Santa Teresa		Date of Receipt
City	State Zip Code TX 78572	04 26 2012 Transaction ID : SA11AI.17564
mission FEC ID number of contributing federal political committee.	C 78572	Amount of Each Receipt this Period 250.00
Name of Employer self-employed	Occupation physician	contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Blvin Garcia Mailing Address 2800 Santa Teresa		Date of Receipt 05 30 2012
City mission	State Zip Code TX 78572	Transaction ID : SA11AI.17775 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer self-employed Receipt For:	Occupation physician	- contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	
Full Name (Last, First, Middle Initial) Elvin Garcia		Date of Receipt
Mailing Address 2800 Santa Teresa		06 20 / Y=Y=Y=Y
City mission	State Zip Code TX 78572	Transaction ID : SA11AI.18081 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer self-employed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1500.00	- contribution
SUBTOTAL of Receipts This Page (optional)		750.00
TOTAL This Period (last page this line number	er only)	

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	he name and address of any political committee to	
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	PAC	
Full Name (Last, First, Middle Initial) Hiram Garcia Mailing Address 2712 E Mile 5 Road		Date of Receipt
City	State Zip Code	04 26 2012 Transaction ID : SA11AI.17565
Mission	TX 78574	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	contribution
selfemployed	physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Hiram Garcia Mailing Address 2712 E Mile 5 Road		Date of Receipt
City	State Zip Code	05 30 2012
City Mission	State Zip Code TX 78574	Transaction ID : SA11AI.17776 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer	Occupation	contribution
selfemployed	physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	
Full Name (Last, First, Middle Initial) Hiram Garcia		Date of Receipt
Mailing Address 2712 E Mile 5 Road		06 20 2012
City Mission	State Zip Code TX 78574	Transaction ID : SA11AI.18082 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer	Occupation	contribution
selfemployed	physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1500.00	
SUBTOTAL of Receipts This Page (optional)		750.00
TOTAL This Period (last page this line number	er only)	

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or for commercial purposes, other than using t	he name and address of any political committee to	solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	. PAC					
Full Name (Last, First, Middle Initial) Dr. Oscar Garcia Mailing Address 1717 Palazzo		Date of Receipt				
City Mission	State Zip Code TX 78572	04 26 2012 Transaction ID : SA11AI.17567 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	40.00 contribution				
Name of Employer self-employed Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1240.00					
Full Name (Last, First, Middle Initial) Dr. Oscar Garcia Mailing Address 1717 Palazzo	Or. Oscar Garcia ailing Address 1717 Palazzo					
City Mission FEC ID number of contributing federal political committee.	State Zip Code TX 78572	Transaction ID : SA11AI.17778 Amount of Each Receipt this Period 400.00				
Name of Employer self-employed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1640.00	contribution				
Full Name (Last, First, Middle Initial) Dr. Oscar Garcia Mailing Address 1717 Palazzo City	State Zip Code	Date of Receipt M = M / D = D / Y = Y = Y = Y				
Mission FEC ID number of contributing federal political committee.	TX 78572	Amount of Each Receipt this Period 400.00				
Name of Employer self-employed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 2040.00	contribution				
SUBTOTAL of Receipts This Page (optional)		840.00				
TOTAL This Period (last page this line number	er only)					

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NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL F	PAC					
Full Name (Last, First, Middle Initial) Dr. Carlos Garcia-Cantu Mailing Address 4121 N. 10th #240		Date of Receipt				
City	State Zip Code	04 26 2012				
Mcallen	TX 78504	Transaction ID : SA11AI.17568 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	200.00				
Name of Employer selfemployed	Occupation physician	contribution				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00					
Full Name (Last, First, Middle Initial) 3. Dr. Carlos Garcia-Cantu Mailing Address 4424 N 4045 #240		Date of Receipt				
Mailing Address 4121 N. 10th #240 City	State Zip Code	05 30 2012 Transaction ID : SA11AI.17779				
Mcallen	TX 78504	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	200.00				
Name of Employer selfemployed	Occupation physician	contribution				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00					
Full Name (Last, First, Middle Initial) Dr. Carlos Garcia-Cantu		Date of Receipt				
Mailing Address 4121 N. 10th #240		06 20 2012				
City Mcallen	State Zip Code TX 78504	Transaction ID : SA11AI.18085 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	200.00				
Name of Employer selfemployed	Occupation physician	contribution				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00					
SUBTOTAL of Receipts This Page (optional)		600.00				
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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	PAC	
Full Name (Last, First, Middle Initial) Dr. James Garza Mailing Address 2821 Lakeshore Drive		Date of Receipt
City Edinburg	State Zip Code TX 78539	04 26 2012 Transaction ID : SA11AI.17570 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer	Occupation	400.00 contribution
self-employed Receipt For: Primary General Other (specify) ▼	physician Aggregate Year-to-Date ▼ 1600.00	
Full Name (Last, First, Middle Initial) Dr. James Garza Mailing Address 2821 Lakeshore Drive		Date of Receipt 05 30 2012
City Edinburg FEC ID number of contributing federal political committee	State Zip Code TX 78539	Transaction ID : SA11AI.17781 Amount of Each Receipt this Period 400.00
federal political committee. Name of Employer self-employed Receipt For:	Occupation physician	contribution
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	
Full Name (Last, First, Middle Initial) Dr. James Garza Mailing Address 2821 Lakeshore Drive		Date of Receipt
City Edinburg	State Zip Code TX 78539	06 20 2012 Transaction ID : SA11AI.18092 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00 contribution
Name of Employer self-employed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 2400.00	
SUBTOTAL of Receipts This Page (optional)	<u>·</u> _	1200.00
TOTAL This Period (last page this line number	r only)	

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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL		
Full Name (Last, First, Middle Initial) Rene Garza Mailing Address 5404 N. 1st street		Date of Receipt
City mcallen	State Zip Code TX 78504	04 26 2012 Transaction ID : SA11AI.17571 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer selfemployed Receipt For: Primary General Other (specify) ▼	Occupation private investor Aggregate Year-to-Date ▼ 1000.00	- contribution
Full Name (Last, First, Middle Initial) 3. Rene Garza Mailing Address 5404 N. 1st street	State 7in Code	Date of Receipt 05 30 2012
City mcallen FEC ID number of contributing federal political committee.	State Zip Code TX 78504	Transaction ID : SA11AI.17782 Amount of Each Receipt this Period 250.00
Name of Employer selfemployed Receipt For: Primary General Other (specify) ▼	Occupation private investor Aggregate Year-to-Date ▼ 1250.00	contribution
Full Name (Last, First, Middle Initial) Rene Garza Mailing Address 5404 N. 1st street City	State Zip Code	Date of Receipt 06 20 2012 Transaction ID : SA11AL 18003
mcallen FEC ID number of contributing federal political committee.	TX 78504	Transaction ID : SA11AI.18093 Amount of Each Receipt this Period 400.00
Name of Employer selfemployed Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation private investor Aggregate Year-to-Date ▼ 1650.00	. contribution
SUBTOTAL of Receipts This Page (optional)	<u> </u>	900.00
TOTAL This Period (last page this line number	r only)	

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	ne name and address of any political committee to					
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	PAC					
Full Name (Last, First, Middle Initial) Dr. Ayda Garza-Montalvo Mailing Address 2311 Silvardo North	Dr. Ayda Garza-Montalvo					
City Palmhurst	State Zip Code TX 78539	04 26 2012 Transaction ID : SA11AI.17572 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	125.00				
Name of Employer selfemployed Receipt For:	Occupation self-employee physician Aggregate Year-to-Date ▼	- contribution				
Primary General Other (specify) ▼	500.00					
Full Name (Last, First, Middle Initial) Dr. Ayda Garza-Montalvo Mailing Address 2311 Silvardo North		Date of Receipt				
City Palmhurst	State Zip Code TX 78539	Transaction ID : SA11AI.17783 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	125.00				
Name of Employer selfemployed	Occupation self-employee physician	contribution				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 625.00					
Full Name (Last, First, Middle Initial) Dr. Ayda Garza-Montalvo		Date of Receipt				
Mailing Address 2311 Silvardo North	Obelo 7: O :	06 20 2012				
City Palmhurst	State Zip Code TX 78539	Transaction ID : SA11AI.18094 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	125.00				
Name of Employer selfemployed Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation self-employee physician Aggregate Year-to-Date ▼ 750.00	_ contribution				
SUBTOTAL of Receipts This Page (optional)	>	375.00				
TOTAL This Period (last page this line number	r only)					

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

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	he name and address of any political committee to	
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	PAC	
Full Name (Last, First, Middle Initial) Lawrence Gelman Mailing Address 3900 Sundown Drive		Date of Receipt
City mcallen	State Zip Code TX 78503	04 26 2012 Transaction ID : SA11AI.17573
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 400.00
Name of Employer selfemployed	Occupation physician	contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1600.00	
Full Name (Last, First, Middle Initial) Lawrence Gelman Mailing Address 3900 Sundown Drive		Date of Receipt 05 30 2012
City mcallen	State Zip Code TX 78503	Transaction ID : SA11AI.17784 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer selfemployed	Occupation physician	- contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	
Full Name (Last, First, Middle Initial) Lawrence Gelman		Date of Receipt
Mailing Address 3900 Sundown Drive		06 20 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City mcallen	State Zip Code TX 78503	Transaction ID : SA11AI.18096 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer selfemployed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 2400.00	contribution
SUBTOTAL of Receipts This Page (optional)		1200.00
TOTAL This Period (last page this line numbe	r only)	

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

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or for commercial purposes, other than using the		o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL I	PAC	
Full Name (Last, First, Middle Initial) Dr. Sathiyaraj George Mailing Address 2607 Solera		Date of Receipt
	State Zip Code	06 20 2012
City Mission	State Zip Code TX 78572	Transaction ID : SA11AI.18097 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	contribution
self-employed	physician	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
	7	
Full Name (Last, First, Middle Initial) Dr. Richard Gillett		Date of Receipt
Mailing Address 54 South 10th		M M / D D / Y Y Y Y Y
City	State Zip Code	04 26 2012 Transaction ID : SA11AI.17574
McAllen	TX 78504	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	contribution
self-employee	physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) C. Dr. Richard Gillett		Date of Receipt
Mailing Address 54 South 10th		05 30 _2012 _
City	State Zip Code	Transaction ID : SA11AI.17785
McAllen	TX 78504	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	contribution
self-employee	physician	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	500.00	
SUBTOTAL of Receipts This Page (optional)		450.00
TOTAL This Period (last page this line number	<u> </u>	

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

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		13		14		15		16	;	17

	the name and address of any political committee to	
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	. PAC	
Full Name (Last, First, Middle Initial) Dr. Richard Gillett Mailing Address 54 South 10th		Date of Receipt
City McAllen	State Zip Code TX 78504	Transaction ID : SA11AI.18099 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	100.00
Name of Employer self-employee	Occupation physician	- contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) Alvaro Giraldo Mailing Address 106 W. Flamingo		Date of Receipt
City mcallen	State Zip Code TX 78504	04 26 2012 Transaction ID : SA11AI.17575 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	100.00
Name of Employer selfemployed	Occupation physician	contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) Alvaro Giraldo		Date of Receipt
Mailing Address 106 W. Flamingo	7.0	05 30 2012
City mcallen	State Zip Code TX 78504	Transaction ID : SA11AI.17786 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer selfemployed Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 500.00	contribution
SUBTOTAL of Receipts This Page (optional).	>	300.00
TOTAL This Period (last page this line number	er only)	

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

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	the name and address of any political committee to	
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	. PAC	
Full Name (Last, First, Middle Initial) Alvaro Giraldo Mailing Address 106 W. Flamingo		Date of Receipt
City mcallen	State Zip Code TX 78504	06 20 2012 Transaction ID : SA11AI.18100 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer selfemployed	Occupation physician	contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) Ada Gonzalez Mailing Address P.O. Box 9817		Date of Receipt
City	State Zip Code TX 78516	7 Transaction ID : SA11AI.17578 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	Occupation	75.00 contribution
Name of Employer selfemployed Receipt For:	Occupation private investor Aggregate Vegr-to-Date	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Ada Gonzalez		Date of Receipt
Mailing Address P.O. Box 9817	0000	05 30 2012
City alamo	State Zip Code TX 78516	Transaction ID : SA11AI.17789 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer selfemployed Receipt For: Primary General Other (specify) ▼	Occupation private investor Aggregate Year-to-Date ▼ 375.00	_ contribution
SUBTOTAL of Receipts This Page (optional)		250.00
TOTAL This Period (last page this line number	er only)	

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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	PAC	
Full Name (Last, First, Middle Initial) Ada Gonzalez Mailing Address P.O. Box 9817		Date of Receipt
City alamo	State Zip Code TX 78516	06 20 2012 Transaction ID : SA11AI.18107 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer	Occupation	75.00 contribution
selfemployed Receipt For: Primary General Other (specify) ▼	private investor Aggregate Year-to-Date ▼ 450.00	
Full Name (Last, First, Middle Initial) Jaime Gonzalez Mailing Address 3511 Plazas del Lago	Choko Zin Coda	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City edinburg FEC ID number of contributing federal political committee.	State Zip Code TX 78539	Transaction ID : SA11AI.17580 Amount of Each Receipt this Period 250.00
Name of Employer selfemployed Receipt For: Primary General Other (specify) ▼	Occupation private investor Aggregate Year-to-Date ▼ 1000.00	- contribution
Full Name (Last, First, Middle Initial) Jaime Gonzalez Mailing Address 3511 Plazas del Lago City	State Zip Code	Date of Receipt 05 30 2012
edinburg FEC ID number of contributing federal political committee.	TX 78539	Transaction ID : SA11AI.17791 Amount of Each Receipt this Period 250.00
Name of Employer selfemployed Receipt For: Primary General Other (specify) ▼	Occupation private investor Aggregate Year-to-Date ▼ 1250.00	contribution
SUBTOTAL of Receipts This Page (optional)	>	575.00
TOTAL This Period (last page this line number	r only)	

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or for commercial purposes, other than using th	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL		
Full Name (Last, First, Middle Initial) Jaime Gonzalez Mailing Address 3511 Plazas del Lago		Date of Receipt M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
City edinburg FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: Primary General Other (specify) ▼	State Zip Code TX 78539 C Occupation private investor Aggregate Year-to-Date ▼ 1500.00	Transaction ID: SA11AI.18111 Amount of Each Receipt this Period 250.00 contribution
Full Name (Last, First, Middle Initial) Juan Gonzalez-Dickson Mailing Address 1501 Meadwood City weslaco	State Zip Code TX 78596	Date of Receipt 04 26 2012 Transaction ID: SA11AI.17581 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer self-employed Receipt For: □ Primary □ General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1000.00	250.00 contribution
Full Name (Last, First, Middle Initial) Juan Gonzalez-Dickson Mailing Address 1501 Meadwood City weslaco FEC ID number of contributing	State Zip Code TX 78596	Date of Receipt M
federal political committee. Name of Employer self-employed Receipt For: Primary General Other (specify)	Occupation physician Aggregate Year-to-Date ▼ 1250.00	contribution
SUBTOTAL of Receipts This Page (optional)	<u> </u>	750.00
TOTAL This Period (last page this line number	r only)	

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

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or for commercial purposes, other than using th	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL		
Full Name (Last, First, Middle Initial) Juan Gonzalez-Dickson Mailing Address 1501 Meadwood City	State Zip Code	Date of Receipt 06 20 2012 Transaction ID : SA11AI.18112
weslaco FEC ID number of contributing federal political committee. Name of Employer self-employed Receipt For: Primary General Other (specify) This is a self-employed of the self-employed.	TX 78596 C Occupation physician Aggregate Year-to-Date ▼ 1500.00	Amount of Each Receipt this Period 250.00 contribution
Full Name (Last, First, Middle Initial) Verley Gordon Mailing Address 1700 E. Mile 3 Road City mission FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: Primary General Other (specify)	State Zip Code TX 78574 C Occupation physician Aggregate Year-to-Date ▼ 1000.00	Date of Receipt M M M / 26 2012 Transaction ID: SA11AI.17582 Amount of Each Receipt this Period 250.00 contribution
Full Name (Last, First, Middle Initial) Verley Gordon Mailing Address 1700 E. Mile 3 Road City mission FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: Primary General Other (specify)	State Zip Code TX 78574 C Occupation physician Aggregate Year-to-Date ▼ 1113.66	Date of Receipt M
SUBTOTAL of Receipts This Page (optional)	•	613.66
TOTAL This Period (last page this line number	r only)	

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

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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	PAC	
Full Name (Last, First, Middle Initial) Verley Gordon Mailing Address 1700 E. Mile 3 Road		Date of Receipt
City mission	State Zip Code TX 78574	06 20 2012 Transaction ID : SA11AI.18113 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	198.90
Name of Employer selfemployed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1312.56	Contribution
Full Name (Last, First, Middle Initial) Enrique Griego Mailing Address 905 Inspiratin Drive	State Zin Code	Date of Receipt 04 26 2012
City pharr FEC ID number of contributing federal political committee.	State Zip Code TX 78577	Transaction ID : SA11AI.17583 Amount of Each Receipt this Period 400.00
Name of Employer selfemployed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1600.00	- contribution
Full Name (Last, First, Middle Initial) Enrique Griego Mailing Address 905 Inspiratin Drive City	State Zip Code	Date of Receipt 05 30 2012
pharr FEC ID number of contributing federal political committee.	TX 78577	Amount of Each Receipt this Period 400.00
Name of Employer selfemployed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 2000.00	contribution
SUBTOTAL of Receipts This Page (optional)	<u> </u>	998.90
TOTAL This Period (last page this line number	r only)	

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

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or for commercial purposes, other than using	g the name and address of any political committee	
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERA	AL PAC	
Full Name (Last, First, Middle Initial) Enrique Griego		Date of Receipt
Mailing Address 905 Inspiratin Drive		06 20 2012
City	State Zip Code	Transaction ID : SA11AI.18114
pharr	TX 78577	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer	Occupation	contribution
selfemployed	physician	
Receipt For:		\dashv
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	2400.00	
Full Name (Last, First, Middle Initial) Dr. Maria Ruby Guajardo		Date of Receipt
Mailing Address 2603 Santa Laura		M = M / D = D / Y = Y = Y
City	State 75- On the	05 30 2012
City	State Zip Code	Transaction ID : SA11AI.17795
Mission	TX 78572	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	contribution
self-employee	physician	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General		
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Dr. Maria Ruby Guajardo		Date of Receipt
Mailing Address 2603 Santa Laura		06 20 2012
City	State Zip Code	Transaction ID : SA11AI.18115
Mission	TX 78572	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer	Occupation	contribution
self-employee	physician	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General		
Other (specify) ▼	300.00	
SUBTOTAL of Receipts This Page (optional	al)	500.00
TOTAL This Period (last page this line num	nber only)	

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or for commercial purposes, other than using th	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL		
Full Name (Last, First, Middle Initial) Daniel Guerra Mailing Address 101 S. Broadway		Date of Receipt 04 26 2012
City Mcallen FEC ID number of contributing federal political committee. Name of Employer self-employed Receipt For: Primary General Other (specify) ▼	State Zip Code TX 78501 C Occupation physician Aggregate Year-to-Date ▼ 550.00	Transaction ID : SA11AI.17585 Amount of Each Receipt this Period 100.00 contribution
Full Name (Last, First, Middle Initial) Daniel Guerra Mailing Address 101 S. Broadway City Mcallen FEC ID number of contributing federal political committee. Name of Employer self-employed Receipt For: Primary General Other (specify)	State Zip Code TX 78501 C Occupation physician Aggregate Year-to-Date ▼ 650.00	Date of Receipt 05 30 2012 Transaction ID : SA11AI.17796 Amount of Each Receipt this Period 100.00 contribution
Full Name (Last, First, Middle Initial) Daniel Guerra Mailing Address 101 S. Broadway City Mcallen FEC ID number of contributing federal political committee. Name of Employer self-employed Receipt For: Primary General Other (specify)	State Zip Code TX 78501 C Occupation physician Aggregate Year-to-Date ▼ 750.00	Date of Receipt M M M
SUBTOTAL of Receipts This Page (optional)	>	300.00
TOTAL This Period (last page this line number	r only)	

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or for commercial purposes, other than using	the name and address of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERA	L PAC	
Full Name (Last, First, Middle Initial) John Guerra Mailing Address 3105 Forest Court		Date of Receipt
City mission FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: □ Primary □ General □ Other (specify) ▼	State Zip Code TX 78572 C Occupation physician Aggregate Year-to-Date ▼ 400.00	Transaction ID : SA11AI.17586 Amount of Each Receipt this Period 100.00 contribution
Full Name (Last, First, Middle Initial) John Guerra Mailing Address 3105 Forest Court	Otata Zin Oude	Date of Receipt M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
City mission FEC ID number of contributing federal political committee.	State Zip Code TX 78572	Transaction ID : SA11AI.17798 Amount of Each Receipt this Period 100.00
Name of Employer selfemployed Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 500.00	- contribution
Full Name (Last, First, Middle Initial) John Guerra Mailing Address 3105 Forest Court City	State Zip Code	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
mission FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: Primary General	TX 78572 C Occupation physician Aggregate Year-to-Date ▼	Amount of Each Receipt this Period 100.00 contribution
Other (specify) ▼	600.00	300.00
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or for commercial purposes, other than using t	he name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	. PAC	
Full Name (Last, First, Middle Initial) Marcy Guerra Mailing Address 13337 Borolo Drive		Date of Receipt
City edinburg	State Zip Code TX 78541	04 26 2012 Transaction ID : SA11AI.17587 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer selfemployed Receipt For: □ Primary □ General □ Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1000.00	- contribution
Full Name (Last, First, Middle Initial) Marcy Guerra Mailing Address 13337 Borolo Drive	Chate To Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City edinburg FEC ID number of contributing federal political committee.	State Zip Code TX 78541	Transaction ID : SA11AI.17799 Amount of Each Receipt this Period 250.00
Name of Employer selfemployed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1250.00	contribution
Full Name (Last, First, Middle Initial) Marcy Guerra Mailing Address 13337 Borolo Drive		Date of Receipt 06 20 2012
City edinburg FEC ID number of contributing	State Zip Code TX 78541	Transaction ID : SA11AI.18118 Amount of Each Receipt this Period 250.00
federal political committee. Name of Employer selfemployed Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1500.00	contribution
SUBTOTAL of Receipts This Page (optional)	<u> </u>	750.00
TOTAL This Period (last page this line number	er only)	

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or for commercial purposes, other than using t	he name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	. PAC	
Full Name (Last, First, Middle Initial) Rodolfo Guerrero Mailing Address 1402 E. 8th Street		Date of Receipt
City weslaco	State Zip Code TX 78596	04 26 2012 Transaction ID : SA11AI.17588 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer	Occupation	250.00 contribution
selfemployed Receipt For: Primary General Other (specify) ▼	physician Aggregate Year-to-Date ▼ 877.23	
Full Name (Last, First, Middle Initial) Rodolfo Guerrero Mailing Address 1402 E. 8th Street		Date of Receipt 05 30 2012
City weslaco FEC ID number of contributing federal political committee.	State Zip Code TX 78596	Transaction ID : SA11AI.17800 Amount of Each Receipt this Period 250.00
Name of Employer selfemployed Receipt For:	Occupation physician Aggregate Year-to-Date ▼	contribution
Primary General Other (specify) ▼	Aggregate Year-to-Date V	
Full Name (Last, First, Middle Initial) C. Rodolfo Guerrero Mailing Address 1402 E. 8th Street		Date of Receipt 06 20 2012
City weslaco	State Zip Code TX 78596	Transaction ID : SA11AI.18121 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	148.86 contribution
Name of Employer selfemployed Receipt For: Primary General	Occupation physician Aggregate Year-to-Date ▼	- Contribution
Other (specify) ▼	1276.09	
SUBTOTAL of Receipts This Page (optional).	<u> </u>	648.86
TOTAL This Period (last page this line number	er only)	

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or for commercial purposes, other than using the	ne name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	PAC	
Full Name (Last, First, Middle Initial) A. Alberto Gutierrez Mailing Address 6020 Wisconsin		Date of Receipt
City edinburg	State Zip Code TX 78539	04 26 2012 Transaction ID : SA11AI.17589 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00 contribution
Name of Employer selfemployed Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1000.00	-
Full Name (Last, First, Middle Initial) Alberto Gutierrez Mailing Address 6020 Wisconsin		Date of Receipt M M M / D D / Y D D Y D D D D D D D D D D D D
City edinburg FEC ID number of contributing federal political committee.	State Zip Code TX 78539	Transaction ID : SA11AI.17801 Amount of Each Receipt this Period 250.00
Name of Employer selfemployed Receipt For:	Occupation physician Aggregate Year-to-Date ▼	contribution
Primary General Other (specify) ▼	1250.00	
Full Name (Last, First, Middle Initial) Alberto Gutierrez Mailing Address 6020 Wisconsin		Date of Receipt 06 20 2012
City edinburg	State Zip Code TX 78539	Transaction ID : SA11AI.18123 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer selfemployed Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1500.00	_ contribution
SUBTOTAL of Receipts This Page (optional)		750.00
TOTAL This Period (last page this line number	r only)	

FOR LINE NUMBER: PAGE 75 OF Use separate schedule(s) for each category of the (check only one) **X** 11a 11b 11c 12 Detailed Summary Page 13 14 15 16

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NAME OF COMMITTEE (In Full)	g the name and address of any political committee	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Marco Gutierrez Mailing Address 511 N. Depot Road City edinburg FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For:	State Zip Code TX 78541 C Occupation physician Aggregate Year-to-Date ▼	Date of Receipt 04 26 2012 Transaction ID : SA11AI.17590 Amount of Each Receipt this Period 400.00 contribution
Primary General Other (specify) ▼	1600.00	
Full Name (Last, First, Middle Initial) Marco Gutierrez Mailing Address 511 N. Depot Road		Date of Receipt M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
City edinburg	State Zip Code TX 78541	Transaction ID : SA11AI.17802 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer selfemployed Receipt For:	Occupation physician	contribution
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	
Full Name (Last, First, Middle Initial) Marco Gutierrez Mailing Address 511 N. Depot Road	'	Date of Receipt
City edinburg FEC ID number of contributing federal political committee.	State Zip Code TX 78541	Transaction ID : SA11AI.18124 Amount of Each Receipt this Period 400.00
Name of Employer selfemployed Receipt For: Primary General	Occupation physician Aggregate Year-to-Date ▼	contribution
Other (specify) ▼	2400.00	
SUBTOTAL of Receipts This Page (optional	al)	1200.00
TOTAL This Period (last page this line nun	nber only)	

FOR LINE NUMBER: PAGE 76 OF Use separate schedule(s) for each category of the Detailed Summary Page (check only one) X 11a 11b 11c 12 13 14 16 15

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NAME OF COMMITTEE (In Full) BORDER HEALTH FEDER	AL PAC	
Full Name (Last, First, Middle Initial) Miguel Gutierrez		Date of Receipt
Mailing Address 224 Lindberg		04 26 2012
City	State Zip Code	Transaction ID : SA11AI.17591
mcallen	TX 78501	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	contribution
selfemployed	physician	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Miguel Gutierrez		Date of Receipt
Mailing Address 224 Lindberg		05 30 / Y = Y = Y = Y
City	State Zip Code	Transaction ID : SA11AI.17803
mcallen	TX 78501	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	contribution
selfemployed	physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1250.00	
Full Name (Last, First, Middle Initial) Miguel Gutierrez		Date of Receipt
Mailing Address 224 Lindberg		Date of Receipt M
City	State Zip Code	Transaction ID : SA11AI.18125
mcallen	TX 78501	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	contribution
selfemployed	physician	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General		
Other (specify) ▼	1500.00	
SUBTOTAL of Receipts This Page (option	nal)	750.00
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Use separate schedule(s) for each category of the Detailed Summary Page

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or for commercial purposes, other than using	the name and address of any political committee	
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERA	L PAC	
Full Name (Last, First, Middle Initial) A. Dr. Edwardo Guzman		Date of Receipt
Mailing Address 2308 Highway 83 suite f		05 30 2012
City	State Zip Code	Transaction ID : SA11AI.17804
Penitas	TX 78573	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	contribution
self-employee	physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00 0	
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Dr. Edwardo Guzman		Date of Receipt
Mailing Address 2308 Highway 83 suite f		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	06 20 2012 Transaction ID : SA11AI.18126
Penitas	TX 78573	Amount of Each Receipt this Period
FEC ID number of contributing		sart of Edon Hoodipt tills I Glod
federal political committee.	C	50.00
Name of Employer	Occupation	contribution
self-employee	physician	_
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial) C. Victor Haddad		Date of Receipt
Mailing Address 4008 Burns Drive South		04 26 2012
City	State Zip Code	Transaction ID : SA11AI.17593
mcallen	TX 78503	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer	Occupation	contribution
selfemployed	physician	_
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00 0	
Other (specify) ▼	1600.00	
SUBTOTAL of Receipts This Page (optional))	500.00
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TOTAL This Period (last page this line numb	per only)	

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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	PAC	
Full Name (Last, First, Middle Initial) Victor Haddad Mailing Address 4008 Burns Drive South		Date of Receipt
City mcallen	State Zip Code TX 78503	05 30 2012 Transaction ID : SA11AI.17805 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer selfemployed Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 2000.00	- contribution
Full Name (Last, First, Middle Initial) Victor Haddad Mailing Address 4008 Burns Drive South		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City mcallen FEC ID number of contributing federal political committee.	State Zip Code TX 78503	Transaction ID : SA11AI.18127 Amount of Each Receipt this Period 400.00
Name of Employer selfemployed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 2400.00	contribution
Full Name (Last, First, Middle Initial) Thomas Hausle Mailing Address 701 South J City	State Zip Code	Date of Receipt 04 26 2012 Transaction ID: SA11AI.17594
McAllen FEC ID number of contributing federal political committee.	TX 78501	Amount of Each Receipt this Period 75.00
Name of Employer selfemployed Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 300.00	contribution
SUBTOTAL of Receipts This Page (optional)	·····	875.00
TOTAL This Period (last page this line number	only)	

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

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NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERA	AL PAC	
Full Name (Last, First, Middle Initial) Thomas Hausle		Date of Receipt
Mailing Address 701 South J		05 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.17806
McAllen	TX 78501	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer	Occupation	contribution
selfemployed	physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00 0	
Other (specify) ▼	375.00	
Full Name (Last, First, Middle Initial) Thomas Hausle		Date of Receipt
Mailing Address 701 South J		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	06 20 2012
McAllen	TX 78501	Transaction ID : SA11AI.18128 Amount of Each Receipt this Period
		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	75.00
Name of Employer	Occupation	contribution
selfemployed	physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	450.00	
Full Name (Last, First, Middle Initial) C. Robert Helbing		Date of Receipt
Mailing Address 820 Tamarack		04 26 2012
City	State Zip Code	Transaction ID : SA11AI.17595
mcallen	TX 78501	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	100.00
Name of Employer	Occupation	contribution
self-employed	private investor	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	400.00	
SUBTOTAL of Receipts This Page (optional	al)	250.00
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TOTAL This Period (last page this line nun	mber only)	

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or for commercial purposes, other than using t	he name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL		
Full Name (Last, First, Middle Initial) Robert Helbing Mailing Address 820 Tamarack City mcallen	State Zip Code TX 78501	Date of Receipt 05 30 2012 Transaction ID : SA11AI.17807 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer self-employed Receipt For: Primary General Other (specify)	Occupation private investor Aggregate Year-to-Date ▼ 500.00	100.00 contribution
Full Name (Last, First, Middle Initial) Robert Helbing Mailing Address 820 Tamarack City	State Zip Code	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
mcallen FEC ID number of contributing federal political committee. Name of Employer self-employed	TX 78501 C Occupation private investor	Transaction ID : SA11AI.18129 Amount of Each Receipt this Period 100.00 contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) Ambrosio Hernandez Mailing Address 2000 Dana City	State Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Pharr FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: Primary General Other (specify)	TX 78577 C Occupation physician Aggregate Year-to-Date ▼ 1000.00	Amount of Each Receipt this Period 250.00 contribution
SUBTOTAL of Receipts This Page (optional).	<u> </u>	450.00
TOTAL This Period (last page this line number	er orny)	

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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL						
Full Name (Last, First, Middle Initial) Ambrosio Hernandez Mailing Address 2000 Dana		Date of Receipt				
City Pharr	State Zip Code TX 78577	05 30 2012 Transaction ID : SA11AI.17810 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	250.00				
Name of Employer selfemployed Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1250.00	- contribution				
Full Name (Last, First, Middle Initial) Ambrosio Hernandez Mailing Address 2000 Dana	State 7in Code	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City Pharr FEC ID number of contributing federal political committee.	State Zip Code TX 78577	Transaction ID : SA11AI.18133 Amount of Each Receipt this Period 250.00				
Name of Employer selfemployed Receipt For: □ Primary □ General □ Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1500.00	- contribution				
Full Name (Last, First, Middle Initial) Maximiliano Hernandez Mailing Address 301 Byron Nelson Drive #40 Villas Jardin City mcallen FEC ID number of contributing federal political committee.	State Zip Code TX 78503	Date of Receipt 04 26 2012 Transaction ID : SA11AI.17599 Amount of Each Receipt this Period				
Name of Employer selfemployed Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1000.00	contribution				
SUBTOTAL of Receipts This Page (optional)	>	750.00				
TOTAL This Period (last page this line number	r only)					

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or for commercial purposes, other than using th	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	PAC	
Full Name (Last, First, Middle Initial) Maximiliano Hernandez Mailing Address 301 Byron Nelson Drive #40 Villas Jardin City mcallen FEC ID number of contributing	State Zip Code TX 78503	Date of Receipt M
federal political committee. Name of Employer selfemployed Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1250.00	contribution
Full Name (Last, First, Middle Initial) Maximiliano Hernandez Mailing Address 301 Byron Nelson Drive #40 Villas Jardin City mcallen FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: Primary General Other (specify)	State Zip Code TX 78503 C Occupation physician Aggregate Year-to-Date ▼ 1500.00	Date of Receipt 06 20 2012 Transaction ID: SA11AI.18132 Amount of Each Receipt this Period 250.00 contribution
Full Name (Last, First, Middle Initial) Maria Hoffman Mailing Address 802 Inspiration Road City pharr FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: Primary General Other (specify)	State Zip Code TX 78577 C Occupation physician Aggregate Year-to-Date ▼ 1000.00	Date of Receipt 04 26 2012 Transaction ID: SA11AI.17600 Amount of Each Receipt this Period 250.00 contribution
SUBTOTAL of Receipts This Page (optional)	>	750.00
TOTAL This Period (last page this line number	only)	

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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	PAC				
Full Name (Last, First, Middle Initial) Maria Hoffman Mailing Address 802 Inspiration Road		Date of Receipt			
City	State Zip Code TX 78577	05 30 2012 Transaction ID : SA11AI.17797 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee. Name of Employer	Occupation	250.00 contribution			
selfemployed Receipt For: Primary General Other (specify)	physician Aggregate Year-to-Date ▼ 1250.00				
Full Name (Last, First, Middle Initial) Maria Hoffman Mailing Address 802 Inspiration Road		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City pharr FEC ID number of contributing federal political committee.	State Zip Code TX 78577	Transaction ID : SA11AI.18119 Amount of Each Receipt this Period 250.00			
Name of Employer selfemployed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1500.00	contribution			
Full Name (Last, First, Middle Initial) Dr. Jacobo Hohenstein Mailing Address 800 East Dove suite L City	State Zip Code	Date of Receipt M M M / D D / Y Y Y Y Y 04 26 2012			
McAllen FEC ID number of contributing federal political committee.	TX 78504	Transaction ID : SA11AI.17601 Amount of Each Receipt this Period 200.00			
Name of Employer self-employee Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 800.00	contribution			
SUBTOTAL of Receipts This Page (optional)	>	700.00			
TOTAL This Period (last page this line number	r only)				

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or for commercial purposes, other than using th	e name and address of any political committee to	solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	PAC				
Full Name (Last, First, Middle Initial) Dr. Jacobo Hohenstein Mailing Address 800 East Dove suite L		Date of Receipt			
City McAllen FEC ID number of contributing	State Zip Code TX 78504	05 30 2012 Transaction ID : SA11AI.17812 Amount of Each Receipt this Period 200.00			
federal political committee. Name of Employer self-employee Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1000.00	contribution			
Full Name (Last, First, Middle Initial) Dr. Jacobo Hohenstein Mailing Address 800 East Dove suite L City	State Zip Code	Date of Receipt 06 20 2012 Transaction ID: SA11AI.18135			
McAllen FEC ID number of contributing federal political committee. Name of Employer self-employee	TX 78504 C Occupation physician	Amount of Each Receipt this Period 200.00 contribution			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00				
Full Name (Last, First, Middle Initial) Dr. Dynio Honrubia Mailing Address 5600 North Cynthia	State 7in Code	Date of Receipt 05 30 2012			
City McAllen FEC ID number of contributing federal political committee. Name of Employer self-employee	State Zip Code TX 78504 C Occupation physician	Transaction ID : SA11AI.17815 Amount of Each Receipt this Period 50.00 contribution			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00				
SUBTOTAL of Receipts This Page (optional)	>	450.00			
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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL					
Full Name (Last, First, Middle Initial) Dr. Dynio Honrubia Mailing Address 5600 North Cynthia City	State Zip Code	Date of Receipt M = M			
McAllen FEC ID number of contributing federal political committee. Name of Employer self-employee Receipt For: □ Primary □ General □ Other (specify) ▼	TX 78504 C Occupation physician Aggregate Year-to-Date ▼ 300.00	Amount of Each Receipt this Period 50.00 contribution			
Full Name (Last, First, Middle Initial) Vincent Honrubia Mailing Address 204 Rio Grande City mission FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: Primary General Other (specify)	State Zip Code TX 78572 C Occupation physician Aggregate Year-to-Date ▼ 1000.00	Date of Receipt 04 26 2012 Transaction ID: SA11AI.17603 Amount of Each Receipt this Period 250.00 contribution			
Full Name (Last, First, Middle Initial) Vincent Honrubia Mailing Address 204 Rio Grande City mission FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: Primary Other (specify)	State Zip Code TX 78572 C Occupation physician Aggregate Year-to-Date ▼ 1250.00	Date of Receipt M			
SUBTOTAL of Receipts This Page (optional)	<u> </u>	550.00			
TOTAL This Period (last page this line number	r only)				

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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	PAC	
Full Name (Last, First, Middle Initial) Vincent Honrubia Mailing Address 204 Rio Grande		Date of Receipt
City mission	State Zip Code TX 78572	06 20 2012 Transaction ID : SA11AI.18137 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00 contribution
Name of Employer selfemployed Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1500.00	
Full Name (Last, First, Middle Initial) Dr. Syed Husain Mailing Address 7020 N. 1st		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City McAllen FEC ID number of contributing federal political committee.	State Zip Code TX 78504	Transaction ID : SA11AI.17604 Amount of Each Receipt this Period 100.00
Name of Employer self-employee Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 400.00	contribution
Full Name (Last, First, Middle Initial) Dr. Syed Husain Mailing Address 7020 N. 1st City	State Zip Code	Date of Receipt 05 30 2012 Transaction ID: SA11AI.17817
McAllen FEC ID number of contributing federal political committee.	TX 78504	Amount of Each Receipt this Period
Name of Employer self-employee Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 500.00	contribution
SUBTOTAL of Receipts This Page (optional)	<u> </u>	450.00
TOTAL This Period (last page this line number	r only)	

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NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL F	PAC	
Full Name (Last, First, Middle Initial) Dr. Syed Husain Mailing Address 7020 N. 1st		Date of Receipt
City	State Zip Code	06 20 2012 Transaction ID : SA11AI.18138
McAllen FEC ID number of contributing federal political committee.	TX 78504	Amount of Each Receipt this Period 100.00
Name of Employer self-employee Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 600.00	contribution
Full Name (Last, First, Middle Initial) Dr. Norma Iglesias Mailing Address 712 S. Cage		Date of Receipt
City Pharr FEC ID number of contributing federal political committee.	State Zip Code TX 78577	7 26 2012 Transaction ID: SA11AI.17605 Amount of Each Receipt this Period 400.00
Name of Employer self-employed Receipt For: □ Primary □ General □ Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1600.00	contribution
Full Name (Last, First, Middle Initial) Dr. Norma Iglesias Mailing Address 712 S. Cage City	State Zip Code	Date of Receipt 05 30 2012 Transaction ID : SA11Al.17818
Pharr FEC ID number of contributing federal political committee.	TX 78577	Amount of Each Receipt this Period 400.00
Name of Employer self-employed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 2000.00	contribution
SUBTOTAL of Receipts This Page (optional)	>	900.00
TOTAL This Period (last page this line number	only)	

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14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL PAC Full Name (Last, First, Middle Initial) Dr. Norma Iglesias Date of Receipt Mailing Address 712 S. Cage 2012 06 20 City State Zip Code Transaction ID: SA11AI.18139 TX Pharr 78577 Amount of Each Receipt this Period FEC ID number of contributing C 400.00 federal political committee. contribution Name of Employer Occupation self-employed physician Receipt For: Aggregate Year-to-Date ▼ Primary General 2400.00 Other (specify) Full Name (Last, First, Middle Initial) B. Nelson Kalaf Date of Receipt Mailing Address 5401 N. 8th Street 04 26 2012 City State Zip Code Transaction ID: SA11AI.17608 TX mcAllen 78504 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. contributon Name of Employer Occupation selfemployed physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial)

c. Nelson Kalaf Date of Receipt Mailing Address 5401 N. 8th Street 30 05 2012 City State Zip Code Transaction ID: SA11AI.17821 TX mcAllen 78504 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. contributon Name of Employer Occupation selfemployed physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1250.00 Other (specify)

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or for commercial purposes, other than using t	he name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	. PAC	
Full Name (Last, First, Middle Initial) Nelson Kalaf Mailing Address 5401 N. 8th Street		Date of Receipt
City mcAllen	State Zip Code TX 78504	06 20 2012 Transaction ID : SA11AI.18144
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 250.00
Name of Employer selfemployed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1500.00	contributon
Full Name (Last, First, Middle Initial) Gauri Kanhere Mailing Address 2548 Palm Circle	State Zin Code	Date of Receipt 04 26 2012
City rio grande city FEC ID number of contributing federal political committee.	State Zip Code TX 78582	Transaction ID : SA11AI.17609 Amount of Each Receipt this Period 250.00
Name of Employer selfemployed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1000.00	contribution
Full Name (Last, First, Middle Initial) Gauri Kanhere Mailing Address 2548 Palm Circle		Date of Receipt 05 30 2012
City rio grande city FEC ID number of contributing federal political committee.	State Zip Code TX 78582	Transaction ID : SA11AI.17822 Amount of Each Receipt this Period 250.00
Name of Employer selfemployed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1250.00	contribution
SUBTOTAL of Receipts This Page (optional)	•	750.00
TOTAL This Period (last page this line number	er only)	

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	the name and address of any political committee to	
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERA	_ PAC	
Full Name (Last, First, Middle Initial) Gauri Kanhere Mailing Address, 2548 Polm Circle		Date of Receipt
Mailing Address 2548 Palm Circle		06 20 2012
City	State Zip Code TX 78582	Transaction ID : SA11AI.18145
rio grande city	10002	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	- contribution
selfemployed	physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	
Full Name (Last, First, Middle Initial) Gholam Kiani		Date of Receipt
Mailing Address 213 e. Xenops		04 26 2012
City mcallen	State Zip Code TX 78504	Transaction ID : SA11AI.17611
_		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	contribution
selfemployed	physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Cholam Kiani		Date of Receipt
Mailing Address 213 e. Xenops		05 30 2012
City mcallen	State Zip Code TX 78504	Transaction ID : SA11AI.17824 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer	Occupation	contribution
selfemployed	physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1250.00	
SUBTOTAL of Receipts This Page (optional)	· · · · · · · · · · · · · · · · · · ·	750.00
TOTAL This Period (last page this line numb	er only)	

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	he name and address of any political committee to	
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	PAC	
Full Name (Last, First, Middle Initial) Gholam Kiani Mailing Address 213 e. Xenops		Date of Receipt
City	State Zip Code	06 20 2012 Transaction ID : SA11AI.18151
mcallen FEC ID number of contributing federal political committee.	TX 78504	Amount of Each Receipt this Period 250.00
Name of Employer selfemployed	Occupation physician	- contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	
Full Name (Last, First, Middle Initial) Mary Elizabeth Klenz Mailing Address 5111 N. 10th Street	•	Date of Receipt
City mcallen	State Zip Code TX 78504	7 Transaction ID : SA11AI.17612 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer selfemployed	Occupation physician	contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Mary Elizabeth Klenz		Date of Receipt
Mailing Address 5111 N. 10th Street		05 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City mcallen	State Zip Code TX 78504	Transaction ID : SA11AI.17825 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer selfemployed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1250.00	- contribution
SUBTOTAL of Receipts This Page (optional)		750.00
TOTAL This Period (last page this line number	er only)	

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1		to solicit contributions from such committee.
BORDER HEALTH FEDERAL	PAC	
Full Name (Last, First, Middle Initial) Mary Elizabeth Klenz		Date of Receipt
Mailing Address 5111 N. 10th Street		06 20 2012
City	State Zip Code	Transaction ID : SA11AI.18152
mcallen	TX 78504	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer	Occupation	contribution
selfemployed	physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	Aggregate real to Date V	
Other (specify) ▼	1400.00	
Full Name (Last, First, Middle Initial) 3. Jorge Kutugata		Date of Receipt
Mailing Address Rt 2 Box 522-K		04 26 _2012 _
City	State Zip Code	Transaction ID : SA11AI.17613
weslaco	TX 78596	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	contribution
selfemployed	physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Jorge Kutugata		Date of Receipt
Mailing Address Rt 2 Box 522-K		05 30 2012
City	State Zip Code	Transaction ID : SA11AI.17826
weslaco	TX 78596	Amount of Each Receipt this Period
FEC ID number of contributing	C	250.00
federal political committee.		The state of the s
Name of Employer	Occupation	contribution
Name of Employer selfemployed	Occupation physician	contribution
Name of Employer selfemployed Receipt For:		contribution
Name of Employer selfemployed	physician	contribution
Name of Employer selfemployed Receipt For: Primary General	physician Aggregate Year-to-Date ▼ 1250.00	contribution 650.00

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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL		
Full Name (Last, First, Middle Initial) Jorge Kutugata Mailing Address Rt 2 Box 522-K		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City weslaco FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: Primary General Other (specify) ▼	State Zip Code TX 78596 C Occupation physician Aggregate Year-to-Date ▼ 1500.00	Transaction ID : SA11AI.18153 Amount of Each Receipt this Period 250.00 contribution
Full Name (Last, First, Middle Initial) Dale Linebarger Mailing Address 901 West 9th Street #405 City austin FEC ID number of contributing federal political committee. Name of Employer self-employed Receipt For: Primary Other (specify)	State Zip Code TX 78703 C Occupation private investor Aggregate Year-to-Date ▼ 1600.00	Date of Receipt 04 26 2012 Transaction ID: SA11AI.17616 Amount of Each Receipt this Period 400.00 contribution
Full Name (Last, First, Middle Initial) Dale Linebarger Mailing Address 901 West 9th Street #405 City austin FEC ID number of contributing federal political committee. Name of Employer self-employed Receipt For: Primary General Other (specify)	State Zip Code TX 78703 C Occupation private investor Aggregate Year-to-Date ▼ 2000.00	Date of Receipt M M M
SUBTOTAL of Receipts This Page (optional)	>	1050.00
TOTAL This Period (last page this line number	r only)	

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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	PAC	
Full Name (Last, First, Middle Initial) Dale Linebarger Mailing Address 901 West 9th Street #405 City austin FEC ID number of contributing	State Zip Code TX 78703	Date of Receipt 06 20 2012 Transaction ID : SA11AI.18159 Amount of Each Receipt this Period
federal political committee. Name of Employer self-employed Receipt For: Primary General Other (specify)	Occupation private investor Aggregate Year-to-Date ▼ 2400.00	contribution
Full Name (Last, First, Middle Initial) Ms Lisa Longoria Mailing Address 716 South Excalibur Street City	Date of Receipt 05 30 2012 Transaction ID: SA11AI.17830	
Edinburg FEC ID number of contributing federal political committee. Name of Employer	State Zip Code TX 78539 C Occupation	Amount of Each Receipt this Period 7.45 contribution
self-employee Receipt For: Primary General Other (specify) ▼	private investor Aggregate Year-to-Date ▼ 207.45	
Full Name (Last, First, Middle Initial) Ms Lisa Longoria Mailing Address 716 South Excalibur Street City Edinburg FEC ID number of contributing federal political committee. Name of Employer self-employee Receipt For:	State Zip Code TX 78539 C Occupation private investor Aggregate Year-to-Date ▼	Date of Receipt M M M / 20 2012 Transaction ID: SA11AI.18162 Amount of Each Receipt this Period 50.00 contribution
Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)	257.45	457.45
TOTAL This Period (last page this line number	only)	

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	e name and address of any political committee to	
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	PAC	
Full Name (Last, First, Middle Initial) A. Alfredo Lopez Mailing Address 7609 N. 24th Circle		Date of Receipt
City mcallen	State Zip Code TX 78504	05 30 2012 Transaction ID : SA11AI.17831 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer selfemployed	Occupation physician	- contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Alfredo Lopez Mailing Address 7609 N. 24th Circle		Date of Receipt
City mcallen	State Zip Code TX 78504	Transaction ID : SA11AI.18163 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer selfemployed	Occupation physician	contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Salil Mangi		Date of Receipt
Mailing Address 3801 Sundown Court East		04 26 / Y Y Y Y Y Y Y
City mcallen	State Zip Code TX 78503	Transaction ID : SA11AI.17621 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer selfemployed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1000.00	- contribution
SUBTOTAL of Receipts This Page (optional)		400.00
TOTAL This Period (last page this line number	only)	

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or for commercial purposes, other than using th	Statements may not be sold or used by any perse e name and address of any political committee t					
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	PAC					
Full Name (Last, First, Middle Initial) A. Salil Mangi		Date of Receipt				
Mailing Address 3801 Sundown Court East		05 30 2012				
City	State Zip Code	Transaction ID : SA11AI.17834				
mcallen	TX 78503	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	250.00				
Name of Employer	Occupation	contribution				
selfemployed	physician					
Receipt For:	Aggregate Year-to-Date ▼	1				
Primary General	00 0					
Other (specify) ▼	1250.00					
Full Name (Last, First, Middle Initial) Salil Mangi		Date of Receipt				
Mailing Address 3801 Sundown Court East		06 20 _2012 _				
City	State Zip Code	7 20 2012 Transaction ID : SA11AI.18167				
mcallen	TX 78503	Amount of Each Receipt this Period				
FEC ID number of contributing		1				
federal political committee.	C	250.00				
	Occupation	contribution				
Name of Employer selfemployed	Occupation					
Receipt For:	physician	-				
Receipt For: Primary General	Aggregate Year-to-Date ▼					
Other (specify) ▼	1500.00					
Full Name (Last, First, Middle Initial) C. Carlos Manrique		Date of Receipt				
Mailing Address 116 Cardinal		M = M / D = D / Y = Y = Y				
City	State Zip Code	04 26 2012 Transaction ID : SA11AI.17622				
mcallen	TX 78504	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	400.00 contribution				
Name of Employer	Name of Employer Occupation					
selfemployed	physician	_				
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	1600.00					
CURTOTAL of Descints This Description	<u> </u>	900.00				
SUBTOTAL of Receipts This Page (optional)		300.00				
TOTAL This Period (last page this line number	only)					

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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL		
Full Name (Last, First, Middle Initial) Carlos Manrique Mailing Address 116 Cardinal City mcallen FEC ID number of contributing federal political committee.	State Zip Code TX 78504	Date of Receipt 05 30 2012 Transaction ID : SA11AI.17835 Amount of Each Receipt this Period
Name of Employer selfemployed Receipt For: Primary General Other (specify)	Occupation physician Aggregate Year-to-Date ▼ 2000.00	contribution
Full Name (Last, First, Middle Initial) Carlos Manrique Mailing Address 116 Cardinal City	Date of Receipt 06 20 2012 Transaction ID: SA11Al.18168	
mcallen FEC ID number of contributing federal political committee. Name of Employer	State Zip Code TX 78504 C Occupation	Amount of Each Receipt this Period 400.00 contribution
selfemployed Receipt For: □ Primary □ General □ Other (specify) ▼	physician Aggregate Year-to-Date ▼ 2400.00	
Full Name (Last, First, Middle Initial) Agustin Martinez Mailing Address 7603 N. 2nd Lane City	State Zip Code	Date of Receipt 04 26 2012 Transaction ID: SA11AL 17623
mcallen FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: Primary General Other (specify) Other (specify)	TX 78504 C Occupation physician Aggregate Year-to-Date ▼ 1600.00	Transaction ID : SA11AI.17623 Amount of Each Receipt this Period 400.00 contribution
SUBTOTAL of Receipts This Page (optional)		1200.00
TOTAL This Period (last page this line numbe	r only)	

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	the name and address of any political committee to	
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	. PAC	
Full Name (Last, First, Middle Initial) Agustin Martinez Mailing Address 7603 N. 2nd Lane		Date of Receipt 05 30 2012
City mcallen	State Zip Code TX 78504	Transaction ID : SA11AI.17836 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00 contribution
Name of Employer selfemployed Receipt For:	Occupation physician	CONTRIBUTION
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	
Full Name (Last, First, Middle Initial) Agustin Martinez Mailing Address 7603 N. 2nd Lane		Date of Receipt
City mcallen	State Zip Code TX 78504	Transaction ID : SA11AI.18169 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer selfemployed	Occupation physician	- contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2400.00	
Full Name (Last, First, Middle Initial) . Ricardo Martinez		Date of Receipt
Mailing Address 1903 W. Smith		04 26 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City edinburg	State Zip Code TX 78539	Transaction ID : SA11AI.17624 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer selfemployed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1000.00	_ contribution
SUBTOTAL of Receipts This Page (optional)		1050.00
TOTAL This Period (last page this line number	er only)	

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	the name and address of any political committee to	
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	. PAC	
Full Name (Last, First, Middle Initial) Ricardo Martinez Mailing Address 1903 W. Smith		Date of Receipt
City	State Zip Code TX 78539	05 30 2012 Transaction ID : SA11AI.17837 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 250.00
Name of Employer selfemployed	Occupation physician	contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	
Full Name (Last, First, Middle Initial) Ricardo Martinez Mailing Address 1903 W. Smith		Date of Receipt
City edinburg	State Zip Code TX 78539	Transaction ID : SA11AI.18170 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer selfemployed	Occupation physician	contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	
Full Name (Last, First, Middle Initial) Dr. Robert Martinez		Date of Receipt
Mailing Address 2809 Santa Lydia		04 26 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Mission	State Zip Code TX 78572	Transaction ID : SA11AI.17625 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer self-employee Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 400.00	- contribution
SUBTOTAL of Receipts This Page (optional)		600.00
TOTAL This Period (last page this line number	er only)	

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NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	. PAC	
Full Name (Last, First, Middle Initial) Dr. Robert Martinez Mailing Address 2809 Santa Lydia City Mission FEC ID number of contributing federal political committee. Name of Employer self-employee Receipt For: Primary General Other (specify)	State Zip Code TX 78572 C Occupation physician Aggregate Year-to-Date ▼ 500.00	Date of Receipt M
Full Name (Last, First, Middle Initial) Dr. Robert Martinez Mailing Address 2809 Santa Lydia City Mission FEC ID number of contributing federal political committee. Name of Employer self-employee Receipt For: Primary General Other (specify)	State Zip Code TX 78572 C Occupation physician Aggregate Year-to-Date ▼ 600.00	Date of Receipt 06 20 2012 Transaction ID: SA11AI.18171 Amount of Each Receipt this Period 100.00 contribution
Full Name (Last, First, Middle Initial) Santos Martinez Mailing Address 125 East Yucca City mcallen FEC ID number of contributing federal political committee. Name of Employer self-employed Receipt For: Primary Other (specify) General	State Zip Code TX 78504 C Occupation private investor Aggregate Year-to-Date ▼ 1000.00	Date of Receipt M
SUBTOTAL of Receipts This Page (optional)	>	450.00

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	the name and address of any political committee to	
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	- PAC	
Full Name (Last, First, Middle Initial) Santos Martinez Mailing Address 125 East Yucca		Date of Receipt M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
City mcallen	State Zip Code TX 78504	Transaction ID : SA11AI.17839 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	159.52 contribution
Name of Employer self-employed Receipt For:	Occupation private investor	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1159.52	
Full Name (Last, First, Middle Initial) Santos Martinez Mailing Address 125 East Yucca		Date of Receipt
City mcallen	State Zip Code TX 78504	7 Transaction ID : SA11AI.18172 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer self-employed	Occupation private investor	- contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1409.52	
Full Name (Last, First, Middle Initial) Pedro McDougal		Date of Receipt
Mailing Address 1516 Iris	7. 6	04 26 2012
City mcallen	State Zip Code TX 78501	Transaction ID : SA11AI.17628 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer selfemployed Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1600.00	_ contribution
SUBTOTAL of Receipts This Page (optional).	>	809.52
TOTAL This Period (last page this line number	er only)	

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NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL I	PAC	
Full Name (Last, First, Middle Initial) Pedro McDougal Mailing Address 1516 Iris		Date of Receipt
City	State Zip Code	05 30 2012 Transaction ID : SA11AI.17841
mcallen	TX 78501	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer selfemployed Receipt For: ☐ Primary ☐ General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 2000.00	contribution
Full Name (Last, First, Middle Initial) 3. Pedro McDougal	2000.00	Date of Receipt
Mailing Address 1516 Iris City mcallen FEC ID number of contributing federal political committee.	State Zip Code TX 78501	06 20 2012 Transaction ID: SA11AI.18176 Amount of Each Receipt this Period 400.00 contribution
Name of Employer selfemployed Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 2400.00	
Full Name (Last, First, Middle Initial) Bertha Medina Mailing Address 1300 1 1/2 Street City	State Zip Code	Date of Receipt 04 26 2012 Transaction ID: SA11AI.17630
mcallen FEC ID number of contributing federal political committee.	TX 78501	Amount of Each Receipt this Period 400.00
Name of Employer selfemployed Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1600.00	contribution
SUBTOTAL of Receipts This Page (optional)		1200.00
TOTAL This Period (last page this line number	only)	

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NAME OF COMMITTEE (In Full)		to solicit contributions from such committee.
BORDER HEALTH FEDERAL	PAC	
Full Name (Last, First, Middle Initial) Bertha Medina Mailing Address 1300 1 1/2 Street		Date of Receipt
		05 30 7 2012
City	State Zip Code TX 78501	Transaction ID : SA11AI.17843
mcallen FEC ID number of contributing federal political committee.	C 78501	Amount of Each Receipt this Period 400.00
Name of Employer	Occupation	contribution
selfemployed Receipt For: Primary General	physician Aggregate Year-to-Date ▼	_
Other (specify) ▼	2000.00	
Full Name (Last, First, Middle Initial) Bertha Medina		Date of Receipt
Mailing Address 1300 1 1/2 Street		06 20 2012
City mcallen	State Zip Code TX 78501	Transaction ID : SA11AI.18179 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer selfemployed	Occupation physician	- contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2400.00	
Full Name (Last, First, Middle Initial) C. Dr. Carlos Mego	1	Date of Receipt
Mailing Address 602 McColl Circle		04 26 2012
City McAllen	State Zip Code TX 78501	Transaction ID : SA11AI.17631 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer	Occupation	contribution
self-employed	physician	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
I I I I I I I I I I I I I I I I I I I	1600.00	
Other (specify) ▼		
		1200.00

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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	PAC	
Full Name (Last, First, Middle Initial) Dr. Carlos Mego Mailing Address 602 McColl Circle		Date of Receipt 05 30 2012
City McAllen FEC ID number of contributing	State Zip Code TX 78501	Transaction ID : SA11AI.17844 Amount of Each Receipt this Period
federal political committee. Name of Employer	Occupation	400.00 - contribution
self-employed Receipt For: Primary General Other (specify) ▼	physician Aggregate Year-to-Date ▼ 2000.00	
Full Name (Last, First, Middle Initial) 3. Dr. Carlos Mego Mailing Address 602 McColl Circle		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City McAllen FEC ID number of contributing federal political committee.	State Zip Code TX 78501	Transaction ID : SA11AI.18180 Amount of Each Receipt this Period 400.00
Name of Employer self-employed Receipt For: Primary General	Occupation physician Aggregate Year-to-Date ▼	contribution
Other (specify) ▼ Full Name (Last, First, Middle Initial)	2400.00	
Manuel Mercado Mailing Address 3002 Santa Susana		Date of Receipt O4 26 2012
City mission FEC ID number of contributing	State Zip Code TX 78572	Transaction ID : SA11AI.17632 Amount of Each Receipt this Period
federal political committee. Name of Employer	Occupation	250.00 contribution
selfemployed Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	physician Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)	<u> </u>	1050.00
TOTAL This Period (last page this line number	r only)	

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

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or for commercial purposes, other than using the	Statements may not be sold or used by any pers e name and address of any political committee to				
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	PAC				
Full Name (Last, First, Middle Initial) Manuel Mercado Mailing Address 3002 Santa Susana	Date of Receipt				
	State 7'm On-4	05 30 2012			
City mission	State Zip Code TX 78572	Transaction ID : SA11AI.17845 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	243.11			
Name of Employer selfemployed	Occupation physician	- contribution			
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1243.11				
Full Name (Last, First, Middle Initial) Manuel Mercado Mailing Address 2002 Septe Suggest		Date of Receipt			
Mailing Address 3002 Santa Susana City mission EEC ID number of contributing	State Zip Code TX 78572	06 20 2012 Transaction ID : SA11AI.18188 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	Cocupation	250.00 contribution			
Name of Employer selfemployed	Occupation physician				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1493.11				
Full Name (Last, First, Middle Initial) C. Scott Meyer		Date of Receipt			
Mailing Address 2100 School Lane		04 26 2012			
City Mission	State Zip Code TX 78572	Transaction ID : SA11AI.17633 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	ů .				
Name of Employer	Occupation	contribution			
selfemployed	private investor				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00				
SUBTOTAL of Receipts This Page (optional)	·····	568.11			
TOTAL This Period (last page this line number	only)				

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or for commercial purposes, other than us	s and Statements may not be sold or used by any per sing the name and address of any political committee to			
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDER	RAL PAC			
Full Name (Last, First, Middle Initial) Scott Meyer	Date of Receipt			
Mailing Address 2100 School Lane		05 30 2012		
City	State Zip Code	Transaction ID : SA11AI.17846		
Mission	TX 78572	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	16.41		
Name of Employer	Occupation	contribution		
selfemployed	private investor			
Receipt For:	Aggregate Year-to-Date ▼	7		
Primary General	0.0			
Other (specify) ▼	316.41			
Full Name (Last, First, Middle Initial) 3. Scott Meyer		Date of Receipt		
Mailing Address 2100 School Lane		M = M / D = D / Y = Y = Y		
City	Chata 71. O. I	06 20 2012		
City	State Zip Code	Transaction ID : SA11AI.18189		
Mission	TX 78572	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	25.00		
Name of Employer	Occupation	contribution		
selfemployed	private investor			
Receipt For:	Aggregate Year-to-Date ▼			
Primary General Other (specify) ▼	341.41			
Full Name (Last, First, Middle Initial) C. Dr. Fausto Meza		Date of Receipt		
Mailing Address 4914 Edinburg Road		05 30 2012		
City	State Zip Code	Transaction ID : SA11AI.17847		
Edinburg	TX 78539	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С	2.98		
Name of Employer	Occupation	contribution		
selfemployed	private investor			
Receipt For:	Aggregate Year-to-Date ▼	7		
Primary General				
Other (specify) ▼	202.98			
SUBTOTAL of Receipts This Page (option	onal)	44.39		
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	- · · · · · · · · · · · · · · · · · · ·	to solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	PAC				
Full Name (Last, First, Middle Initial) Dr. Fausto Meza	Date of Receipt				
Mailing Address 4914 Edinburg Road		06 20 2012			
City	State Zip Code	Transaction ID : SA11AI.18190			
Edinburg	TX 78539	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	25.00			
Name of Employer	Occupation	contribution			
selfemployed	private investor				
Receipt For:	Aggregate Year-to-Date ▼				
Primary General					
Other (specify) ▼	227.98				
Full Name (Last, First, Middle Initial) Dr. Emil Milano		Date of Receipt			
Mailing Address 225 E. Cornell		04 26 2012 _			
City	City State Zip Code				
McAllen	Transaction ID : SA11AI.17635 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	100.00			
Name of Employer	Occupation	contribution			
selfemployed	private investor				
Receipt For:	Aggregate Year-to-Date ▼				
Primary General Other (specify) ▼	400.00				
Full Name (Last, First, Middle Initial)	1	Date of Receipt			
Mailing Address 225 E. Cornell		05 30 2012			
City	State Zip Code	Transaction ID : SA11AI.17848			
McAllen	TX 78504	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	ÿ				
	Cogunation	contribution			
Name of Employer	Occupation				
selfemployed	private investor				
selfemployed Receipt For:	'				
selfemployed	private investor				
selfemployed Receipt For: Primary General	private investor Aggregate Year-to-Date ▼ 500.00	225.00			

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or for commercial purposes, other than using	the name and address of any political committee to	o solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	- PAC				
Full Name (Last, First, Middle Initial) Dr. Emil Milano Mailing Address 225 E. Cornell	Date of Receipt				
City McAllen	State Zip Code TX 78504	06 20 2012 Transaction ID : SA11AI.18191 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee. Name of Employer	Occupation	100.00 contribution			
selfemployed Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	private investor Aggregate Year-to-Date ▼ 600.00				
Full Name (Last, First, Middle Initial) 3. Carlos N Mohamed Jr. Mailing Address 2821 Michael Angelo	I	Date of Receipt 04 26 2012			
City Edinburg FEC ID number of contributing	State Zip Code TX 78539	Transaction ID : SA11AI.17636 Amount of Each Receipt this Period			
federal political committee. Name of Employer self-employed	Occupation physician	- contribution			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00				
Full Name (Last, First, Middle Initial) Carlos N Mohamed Jr. Mailing Address 2821 Michael Angelo		Date of Receipt			
City Edinburg FEC ID number of contributing federal political committee.	State Zip Code TX 78539	05 30 2012 Transaction ID : SA11AI.17849 Amount of Each Receipt this Period 100.00			
Name of Employer self-employed Receipt For: Primary General	Occupation physician Aggregate Year-to-Date ▼	contribution			
Other (specify) ▼	500.00	200.00			
SUBTOTAL of Receipts This Page (optional).	<u> </u>	300.00			
TOTAL This Period (last page this line number	er only)				

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or for commercial purposes, other than using th	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL		
Full Name (Last, First, Middle Initial) Carlos N Mohamed Jr. Mailing Address 2821 Michael Angelo		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Edinburg FEC ID number of contributing federal political committee. Name of Employer self-employed Receipt For: □ Primary □ General □ Other (specify) ▼	State Zip Code TX 78539 C Occupation physician Aggregate Year-to-Date ▼ 600.00	Transaction ID : SA11AI.18192 Amount of Each Receipt this Period 100.00 contribution
Full Name (Last, First, Middle Initial) Dr. Armando Moncada Mailing Address 1421 North 2nd Street City McAllen FEC ID number of contributing federal political committee. Name of Employer self-employee Receipt For: Primary General Other (specify)	State Zip Code TX 78504 C Occupation physician Aggregate Year-to-Date ▼ 1600.00	Date of Receipt 04 26 2012 Transaction ID: SA11AI.17637 Amount of Each Receipt this Period 400.00 contribution
Full Name (Last, First, Middle Initial) Dr. Armando Moncada Mailing Address 1421 North 2nd Street City McAllen FEC ID number of contributing federal political committee. Name of Employer self-employee Receipt For: Primary General Other (specify)	State Zip Code TX 78504 C Occupation physician Aggregate Year-to-Date ▼ 2000.00	Date of Receipt M
SUBTOTAL of Receipts This Page (optional)	<u> </u>	900.00
TOTAL This Period (last page this line number	only)	

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or for commercial purposes, other than using th	ne name and address of any political committee to	solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL					
Full Name (Last, First, Middle Initial) Dr. Armando Moncada Mailing Address 1421 North 2nd Street City McAllen FEC ID number of contributing federal political committee. Name of Employer	State Zip Code TX 78504 C Occupation	Date of Receipt 06 20 2012 Transaction ID: SA11AI.18193 Amount of Each Receipt this Period 400.00 contribution			
self-employee Receipt For: Primary General Other (specify) ▼	physician Aggregate Year-to-Date ▼ 2400.00				
Full Name (Last, First, Middle Initial) Carlos Morales Mailing Address 3325 Kent Lane	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City mcallen FEC ID number of contributing federal political committee.	State Zip Code TX 78503	Transaction ID : SA11AI.17638 Amount of Each Receipt this Period 400.00			
Name of Employer selfemployed Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1600.00	contribution			
Full Name (Last, First, Middle Initial) Carlos Morales Mailing Address 3325 Kent Lane		Date of Receipt 05 30 2012			
City mcallen FEC ID number of contributing federal political committee. Name of Employer selfemployed	State Zip Code TX 78503 C Occupation physician	Transaction ID : SA11AI.17851 Amount of Each Receipt this Period 400.00 contribution			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00				
SUBTOTAL of Receipts This Page (optional)		1200.00			
TOTAL This Period (last page this line number	r only)				

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or		name and address of any political committee to					
	NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL F	PAC					
	Full Name (Last, First, Middle Initial) Carlos Morales		Date of Receipt				
	Mailing Address 3325 Kent Lane		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
	City	State Zip Code	Transaction ID : SA11AI.18194				
	mcallen	TX 78503	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	400.00				
	Name of Employer	Occupation	contribution				
	selfemployed	physician					
	Receipt For:	Aggregate Year-to-Date ▼					
	Primary General	Aggregate real-to-bate •					
	Other (specify) ▼	2400.00					
	Full Name (Last, First, Middle Initial) Leonel Moreno		Date of Receipt				
	Mailing Address 1608 Woods Drive	04 26 2012					
	City	State Zip Code	Transaction ID : SA11AI.17639				
	mission	TX 78572	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С	250.00				
	Name of Employer	Occupation	contribution				
	selfemployed	physician					
	Receipt For:	Aggregate Year-to-Date ▼					
	Primary General	riggregate real to Bate v					
	Other (specify) ▼	1000.00					
	Full Name (Last, First, Middle Initial) Leonel Moreno		Date of Receipt				
	Mailing Address 1608 Woods Drive		05 30 2012				
	City	State Zip Code	Transaction ID : SA11AI.17852				
	mission	TX 78572	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	250.00				
	Name of Employer	Occupation	contribution				
	selfemployed	physician					
	Receipt For:	Aggregate Year-to-Date ▼					
	Primary General	Aggregate fear-to-Date ▼					
	Other (specify) ▼	1250.00					
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NAME OF COMMITTEE (IS FUIL)							
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	PAC						
Full Name (Last, First, Middle Initial) Leonel Moreno		Date of Receipt					
Mailing Address 1608 Woods Drive		06 20 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
City	State Zip Code	Transaction ID : SA11AI.18197					
mission	TX 78572	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	250.00					
Name of Employer	Occupation	- contribution					
selfemployed	physician						
Receipt For:	Aggregate Year-to-Date ▼	1					
Primary General	00 0						
Other (specify) ▼	1500.00						
Full Name (Last, First, Middle Initial) Lauren Naylor		Date of Receipt					
Mailing Address 3020 Melinda Drive	05 30 2012 _						
City	State Zip Code	Transaction ID : SA11AI.17853					
Edinburg	TX 78539	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	50.00					
Name of Employer	Occupation	contribution					
selfemployed	physician						
Receipt For: Primary General	Aggregate Year-to-Date ▼						
Other (specify) ▼	250.00						
Full Name (Last, First, Middle Initial) Lauren Naylor		Date of Receipt					
Mailing Address 3020 Melinda Drive		06 20 2012					
City	State Zip Code	Transaction ID : SA11AI.18198					
Edinburg	TX 78539	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	50.00					
Name of Employer	Occupation	contribution					
selfemployed	1 7						
Receipt For:	Aggregate Year-to-Date ▼						
Primary General Other (specify) ▼	300.00						
CURTOTAL of Descints This Desc (anticant)		350.00					
SUBTOTAL of Receipts This Page (optional)	>	330.30					
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or for commercial purposes, other than us	and Statements may not be sold or used by any per ing the name and address of any political committee						
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDER	AL PAC						
Full Name (Last, First, Middle Initial) Dr. Victor Ogunlana Mailing Address, 2604 Septe Terese							
		05 30 / Y Y Y Y Y Y					
City	State Zip Code	Transaction ID : SA11AI.17854					
Mission	TX 78572	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	50.00					
Name of Employer	Occupation	contribution					
self-employed	doctor						
Receipt For:	Aggregate Year-to-Date ▼						
Primary General Other (specify) ▼	250.00						
Full Name (Last, First, Middle Initial) Dr. Victor Ogunlana		Date of Receipt					
Dr. Victor Ogunlana Mailing Address 2604 Santa Teresa		Date of Receipt					
		06 20 2012					
City	State Zip Code	Transaction ID : SA11AI.18199					
Mission	TX 78572	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	50.00					
Name of Employer	Occupation	contribution					
self-employed	doctor						
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 300.00						
Other (specify) ▼	300.00						
Full Name (Last, First, Middle Initial) Dr. Noel Olveira		Date of Receipt					
Mailing Address 9917 Bentsen Road		04 26 2012					
City	State Zip Code	Transaction ID : SA11AI.17642					
McAllen	TX 78504	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	100.00					
Name of Employer	Occupation	contribution					
selfemployed	physician						
Receipt For:	Aggregate Year-to-Date ▼						
Primary General Other (specify) ▼	400.00						
SUBTOTAL of Receints This Page (artist	nal)	200.00					
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TOTAL This Period (last page this line nu	umber only)						

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NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	PAC	
Full Name (Last, First, Middle Initial) Dr. Noel Olveira Mailing Address 9917 Bentsen Road		Date of Receipt
City McAllen	State Zip Code TX 78504	05 30 2012 Transaction ID : SA11AI.17855 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
Name of Employer selfemployed	Occupation physician	- contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Noel Olveira Mailing Address 9917 Bentsen Road		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City McAllen	State Zip Code TX 78504	Transaction ID : SA11AI.18200 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer selfemployed	Occupation physician	contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) Dr. Athanaji Orfanos		Date of Receipt
Mailing Address 3013 Lakeshore Drive	Chat.	04 26 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Edinburg	State Zip Code TX 78539	Transaction ID : SA11AI.17643 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer selfemployed Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation private investor Aggregate Year-to-Date ▼ 400.00	- contribution
SUBTOTAL of Receipts This Page (optional)		300.00
TOTAL This Period (last page this line number	r only)	

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		name and address of any political committee to	
<u>/</u>	Mailing Address 3013 Lakeshore Drive City Edinburg FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: Primary General Other (specify) ▼	State Zip Code TX 78539 C Occupation private investor Aggregate Year-to-Date ▼	Date of Receipt M M J 2012 Transaction ID: SA11AI.17856 Amount of Each Receipt this Period 100.00 contribution
В.	Full Name (Last, First, Middle Initial) Dr. Athanaji Orfanos Mailing Address 3013 Lakeshore Drive City Edinburg FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: Primary General Other (specify)	State Zip Code TX 78539 C Occupation private investor Aggregate Year-to-Date ▼ 600.00	Date of Receipt 06 20 2012 Transaction ID : SA11AI.18206 Amount of Each Receipt this Period 100.00 contribution
C.	Full Name (Last, First, Middle Initial) Mr. Jose Ortega Mailing Address 2504 Xanthisma City mcallen FEC ID number of contributing federal political committee. Name of Employer self-employed Receipt For: Primary General Other (specify)	State Zip Code TX 78504 C Occupation private investor Aggregate Year-to-Date ▼ 400.00	Date of Receipt M M M / 26 2012 Transaction ID: SA11AI.17644 Amount of Each Receipt this Period 100.00 contribution
S	UBTOTAL of Receipts This Page (optional)	<u> </u>	300.00
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Full Name (Last, First, Middle Initial)	. FAC					
Mr. Jose Ortega		Date of Receipt				
Mailing Address 2504 Xanthisma						
City	State Zip Code	Transaction ID : SA11AI.17857				
mcallen	TX 78504	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	7.45				
Name of Employer	Occupation	contribution				
self-employed	private investor					
Receipt For:	Aggregate Year-to-Date ▼					
Primary General						
Other (specify) ▼	407.45					
Full Name (Last, First, Middle Initial) 3. Mr. Jose Ortega		Date of Receipt				
Mailing Address 2504 Xanthisma	06 20 2012					
City	State Zip Code	Transaction ID : SA11AI.18207				
mcallen	TX 78504	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	13.00				
Name of Employer	Occupation	contribution				
self-employed	private investor					
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	420.45					
Full Name (Last, First, Middle Initial)	_1	Date of Receipt				
Mailing Address 600 Tulip		04 26 _2012				
City	State Zip Code	Transaction ID : SA11AI.17645				
mcallen	TX 78504	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	250.00				
pomosi oommittoo	Name of Employer Occupation					
Name of Employer	Occupation					
Name of Employer selfemployed	Occupation physician					
Name of Employer selfemployed Receipt For:	· ·					
Name of Employer selfemployed Receipt For: Primary General	physician Aggregate Year-to-Date ▼	_				
Name of Employer selfemployed Receipt For:	physician					
Name of Employer selfemployed Receipt For: Primary General	physician Aggregate Year-to-Date ▼ 1000.00	270.45				

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	he name and address of any political committee to	
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	PAC	
Full Name (Last, First, Middle Initial) Armando Osio Mailing Address 600 Tulip		Date of Receipt
City mcallen	State Zip Code TX 78504	05 30 2012 Transaction ID : SA11AI.17858
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 250.00
Name of Employer selfemployed	Occupation physician	contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	
Full Name (Last, First, Middle Initial) Armando Osio Mailing Address 600 Tulip	Date of Receipt	
City mcallen	State Zip Code TX 78504	Transaction ID : SA11AI.18209 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer selfemployed	Occupation physician	contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	
Full Name (Last, First, Middle Initial) Carmen Osorio-Castillo		Date of Receipt
Mailing Address 1601 Sebastian Drive	Class Transfer	05 30 / Y = Y = Y = Y
City Mission	State Zip Code TX 78572	Transaction ID : SA11AI.17859 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer self-employee Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation private investor Aggregate Year-to-Date ▼ 250.00	- contribution
SUBTOTAL of Receipts This Page (optional)	>	550.00
TOTAL This Period (last page this line number	r only)	

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

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	the name and address of any political committee to					
NAME OF COMMITTEE (IN FUII) BORDER HEALTH FEDERAL	_ PAC					
Full Name (Last, First, Middle Initial) Carmen Osorio-Castillo Mailing Address 1601 Sebastian Drive		Date of Receipt				
City Mission	State Zip Code TX 78572	7 Transaction ID : SA11AI.18210				
FEC ID number of contributing federal political committee.	C 70372	Amount of Each Receipt this Period 50.00				
Name of Employer self-employee Receipt For:	Occupation private investor	- contribution				
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00					
Full Name (Last, First, Middle Initial) Fernando Otero Mailing Address 121 E. Quamasia #148 City	Date of Receipt 04 26 2012 Transaction ID : SA11AI.17647					
mcallen FEC ID number of contributing federal political committee.	State Zip Code TX 78501	Amount of Each Receipt this Period 250.00				
Name of Employer selfemployed Receipt For: □ Primary □ General □ Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1000.00	- contribution				
Full Name (Last, First, Middle Initial) Fernando Otero Mailing Address 121 E. Quamasia #148 City	State Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
mcallen FEC ID number of contributing federal political committee.	TX 78501	Amount of Each Receipt this Period 250.00				
Name of Employer selfemployed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1250.00	- contribution				
SUBTOTAL of Receipts This Page (optional).	····	550.00				
TOTAL This Period (last page this line numb	er only)					

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	the name and address of any political committee to	
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	. PAC	
Full Name (Last, First, Middle Initial) Fernando Otero Mailing Address 121 E. Quamasia #148 City mcallen FEC ID number of contributing federal political committee.	State Zip Code TX 78501	Date of Receipt 06 20 2012 Transaction ID : SA11AI.18211 Amount of Each Receipt this Period 250.00
Name of Employer selfemployed Receipt For: □ Primary □ General □ Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1500.00	contribution
Full Name (Last, First, Middle Initial) Kip Owen Mailing Address 2305 Red River City	Date of Receipt 04 26 2012	
City mcallen FEC ID number of contributing federal political committee. Name of Employer selfemployed	State Zip Code TX 78572 C Occupation physician	Transaction ID : SA11AI.17648 Amount of Each Receipt this Period 75.00 contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Kip Owen Mailing Address 2305 Red River City mcallen FEC ID number of contributing federal political committee.	State Zip Code TX 78572	Date of Receipt 05 30 2012 Transaction ID : SA11AI.17861 Amount of Each Receipt this Period 75.00
Name of Employer selfemployed Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 375.00	contribution
SUBTOTAL of Receipts This Page (optional).		400.00
TOTAL This Period (last page this line number	er only)	

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Any information copied from such Reports and S or for commercial purposes, other than using the						
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL F	PAC					
Full Name (Last, First, Middle Initial) A. Kip Owen Mailing Address 2305 Red River		Date of Receipt				
City	State Zip Code	06 20 2012 Transaction ID : SA11AI.18212				
mcallen	TX 78572	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	100.00				
Name of Employer selfemployed	Occupation physician	contribution				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00					
Full Name (Last, First, Middle Initial) Mr. Esteban Palacios Jr. Mailing Address B.O. Burgage	Date of Receipt					
Mailing Address P.O. Box 3669 City	State Zip Code	05 30 2012 Transaction ID: SA11Al.17862				
Edinburg	TX 78540	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer selfemployed	Occupation private investor	contribution				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00					
Full Name (Last, First, Middle Initial) Mr. Esteban Palacios Jr.		Date of Receipt				
Mailing Address P.O. Box 3669		06 20 2012				
City Edinburg	State Zip Code TX 78540	Transaction ID : SA11AI.18214 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer selfemployed	Occupation private investor	contribution				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00					
SUBTOTAL of Receipts This Page (optional)		200.00				
TOTAL This Period (last page this line number of	only)					

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or for commercial purposes, other than using the	ne name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL		
Full Name (Last, First, Middle Initial) Prakash Palimar Mailing Address 121 Canary City mcallen FEC ID number of contributing federal political committee.	State Zip Code TX 78504	Date of Receipt 04 26 2012 Transaction ID: SA11AI.17650 Amount of Each Receipt this Period 250.00
Name of Employer selfemployed Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1000.00	- contribution
Full Name (Last, First, Middle Initial) Prakash Palimar Mailing Address 121 Canary City	State Zip Code	Date of Receipt M
mcallen FEC ID number of contributing federal political committee. Name of Employer selfemployed	TX 78504 C Occupation physician	Transaction ID : SA11AI.17863 Amount of Each Receipt this Period 250.00 contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	
Full Name (Last, First, Middle Initial) Prakash Palimar Mailing Address 121 Canary City	State Zip Code	Date of Receipt 06 20 2012 Transaction ID : SA11AI.18215
mcallen FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	TX 78504 C Occupation physician Aggregate Year-to-Date ▼ 1500.00	Amount of Each Receipt this Period 250.00 contribution
SUBTOTAL of Receipts This Page (optional)		750.00
TOTAL This Period (last page this line number	r only)	

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NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	_ PAC	
Full Name (Last, First, Middle Initial) Dr. Guillermo Pechero Mailing Address 2312 La Condesa City Edinburg FEC ID number of contributing federal political committee. Name of Employer self-employed Receipt For: Primary General Other (specify)	State Zip Code TX 78539 C Occupation physician Aggregate Year-to-Date ▼ 1600.00	Date of Receipt M
Full Name (Last, First, Middle Initial) Dr. Guillermo Pechero Mailing Address 2312 La Condesa City Edinburg FEC ID number of contributing federal political committee. Name of Employer self-employed Receipt For: Primary General Other (specify)	State Zip Code TX 78539 C Occupation physician Aggregate Year-to-Date ▼ 2000.00	Date of Receipt M
Full Name (Last, First, Middle Initial) Dr. Guillermo Pechero Mailing Address 2312 La Condesa City Edinburg FEC ID number of contributing federal political committee. Name of Employer self-employed Receipt For: Primary General Other (specify)	State Zip Code TX 78539 C Occupation physician Aggregate Year-to-Date ▼ 2250.00	Date of Receipt M M M / D D / 2012 Transaction ID : SA11AI.18218 Amount of Each Receipt this Period 250.00 contribution
SUBTOTAL of Receipts This Page (optional)	· • • • • • • • • • • • • • • • • • • •	1050.00

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NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL F	PAC				
Full Name (Last, First, Middle Initial) Eduardo Peguero Mailing Address P.O.Box 5959		Date of Receipt			
City	State 7in Code	04 26 2012			
City McAllen	State Zip Code TX 78502	Transaction ID : SA11AI.17652 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	150.00			
Name of Employer Self-employed Receipt For:	Occupation physcian	contribution			
Primary General Other (specify)	Aggregate Year-to-Date ▼ 600.00				
Full Name (Last, First, Middle Initial) Eduardo Peguero Mailing Address P.O. Box 5959		Date of Receipt			
Mailing Address P.O.Box 5959 City	State Zip Code	05 30 2012 Transaction ID : SA11AI.17865			
McAllen	TX 78502	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	150.00			
Name of Employer Self-employed	Occupation physcian	contribution			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00				
Full Name (Last, First, Middle Initial) Eduardo Peguero		Date of Receipt			
Mailing Address P.O.Box 5959		06 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City McAllen	State Zip Code TX 78502	Transaction ID : SA11AI.18219 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	150.00			
Name of Employer Self-employed	Occupation physcian	contribution			
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 900.00				
SUBTOTAL of Receipts This Page (optional)		450.00			
TOTAL This Period (last page this line number of	only)				

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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	PAC	
Full Name (Last, First, Middle Initial) Dr. Alberto Pena Mailing Address 3716 Tigris		Date of Receipt
City Edinburg	State Zip Code TX 78539	05 30 2012 Transaction ID : SA11AI.17866 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	14.90 contribution
Name of Employer self-employed Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation doctor Aggregate Year-to-Date ▼ 214.90	
Full Name (Last, First, Middle Initial) 3. Dr. Alberto Pena Mailing Address 3716 Tigris		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Edinburg FEC ID number of contributing federal political committee.	State Zip Code TX 78539	Amount of Each Receipt this Period 50.00
Name of Employer self-employed Receipt For: Primary General	Occupation doctor Aggregate Year-to-Date ▼	contribution
Other (specify) ▼ Full Name (Last, First, Middle Initial)	264.90	
Mailing Address 100 Bluebird		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City mcallen	State Zip Code TX 78504	Transaction ID : SA11AI.17654 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00 contribution
Name of Employer selfemployed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1600.00	COTHIBULION
SUBTOTAL of Receipts This Page (optional)		464.90
TOTAL This Period (last page this line number	r only)	

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	ne name and address of any political committee to	
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	PAC	
Full Name (Last, First, Middle Initial) A. Jose Pena Mailing Address 100 Bluebird		Date of Receipt
City	State Zip Code	05 30 2012 Transaction ID : SA11AI.17867
mcallen	TX 78504	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer	Occupation	contribution
selfemployed	physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	
Full Name (Last, First, Middle Initial) Jose Pena		Date of Receipt
Mailing Address 100 Bluebird	Oberts Transfer	06 20 / Y = Y = Y = Y = Y
City mcallen	State Zip Code TX 78504	Transaction ID : SA11AI.18221
mcallen EEC ID number of contributing		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer	Occupation	contribution
selfemployed	physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2400.00	
Full Name (Last, First, Middle Initial) Juan Pena		Date of Receipt
Mailing Address 905 S. Huisache Court		04 26 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City pharr	State Zip Code TX 78577	Transaction ID : SA11AI.17655 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer	Occupation	contribution
self-employed	private investor	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1600.00	
SUBTOTAL of Receipts This Page (optional)	>	1200.00
TOTAL This Period (last page this line number	· only)	

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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	PAC	
Full Name (Last, First, Middle Initial) Juan Pena Mailing Address 905 S. Huisache Court		Date of Receipt
City	State Zip Code TX 78577	05 30 2012 Transaction ID : SA11AI.17868 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer self-employed Receipt For: Primary General Other (specify) ▼	Occupation private investor Aggregate Year-to-Date ▼ 2000.00	contribution
Full Name (Last, First, Middle Initial) 3. Juan Pena Mailing Address 905 S. Huisache Court	Ctoto Tip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City pharr FEC ID number of contributing federal political committee.	State Zip Code TX 78577 C	Transaction ID : SA11AI.18222 Amount of Each Receipt this Period 400.00
Name of Employer self-employed Receipt For: Primary General Other (specify) ▼	Occupation private investor Aggregate Year-to-Date ▼ 2400.00	contribution
Full Name (Last, First, Middle Initial) Dr. Nicholas Pereira Mailing Address 7005 North Cynthia City	State Zip Code	Date of Receipt 04 26 2012 Transaction ID: SA11AI.17656
McAllen FEC ID number of contributing federal political committee.	TX 78504	Amount of Each Receipt this Period
Name of Employer self-employee Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 600.00	contribution
SUBTOTAL of Receipts This Page (optional)	>	950.00
TOTAL This Period (last page this line numbe	r only)	

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	the name and address of any political committee to				
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	. PAC				
Full Name (Last, First, Middle Initial) A. Dr. Nicholas Pereira Mailing Address 7005 North Cynthia		Date of Receipt			
City McAllen	State Zip Code TX 78504	Transaction ID : SA11AI.17869 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	150.00			
Name of Employer self-employee	Occupation physician	- contribution			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00				
Full Name (Last, First, Middle Initial) 3. Dr. Florencia Perez Mailing Address 4600 Victoria		Date of Receipt			
City McAllen	State Zip Code TX 78503	Transaction ID : SA11AI.17658 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С	209.95			
Name of Employer selfemployed	Occupation private investor	contribution			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 726.11				
Full Name (Last, First, Middle Initial) Dr. Florencia Perez		Date of Receipt			
Mailing Address 4600 Victoria	Chata	05 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City McAllen	State Zip Code TX 78503	Transaction ID : SA11AI.17871 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	69.99			
Name of Employer selfemployed Receipt For: Primary General Other (specify) ▼	Occupation private investor Aggregate Year-to-Date ▼ 796.10	_ contribution			
SUBTOTAL of Receipts This Page (optional)		429.94			
TOTAL This Period (last page this line number	er only)				

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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	PAC	
Full Name (Last, First, Middle Initial) Dr. Florencia Perez Mailing Address 4600 Victoria		Date of Receipt
City McAllen	State Zip Code TX 78503	06 20 2012 Transaction ID : SA11AI.18226 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer	Occupation	200.00 contribution
selfemployed Receipt For: Primary General Other (specify) ▼	private investor Aggregate Year-to-Date ▼ 996.10	
Full Name (Last, First, Middle Initial) Claudia Pierson Mailing Address 6912 N. Peking		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City mcallen FEC ID number of contributing federal political committee.	State Zip Code TX 78501	Transaction ID : SA11AI.17659 Amount of Each Receipt this Period 241.17
Name of Employer selfemployed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 834.04	contribution
Full Name (Last, First, Middle Initial) Claudia Pierson Mailing Address 6912 N. Peking City	State Zip Code	Date of Receipt 05 30 2012
mcallen FEC ID number of contributing federal political committee.	TX 78501	Amount of Each Receipt this Period 80.39
Name of Employer selfemployed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 914.43	contribution
SUBTOTAL of Receipts This Page (optional)	>	521.56
TOTAL This Period (last page this line numbe	r only)	

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	the name and address of any political committee to	
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	. PAC	
Full Name (Last, First, Middle Initial) Claudia Pierson Mailing Address 6912 N. Peking		Date of Receipt
City mcallen	State Zip Code TX 78501	Transaction ID : SA11AI.18228 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	140.68
Name of Employer selfemployed	Occupation physician	contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1055.11	
Full Name (Last, First, Middle Initial) Sergio Preciado Mailing Address 521 E. Bluebird		Date of Receipt 04 26 2012
City mcallen	State Zip Code TX 78504	Transaction ID : SA11AI.17662 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer selfemployed	Occupation physician	contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Sergio Preciado		Date of Receipt
Mailing Address 521 E. Bluebird		05 30 / Y = Y = Y = Y
City mcallen	State Zip Code TX 78504	Transaction ID : SA11AI.17876 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	110.50
Name of Employer selfemployed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1110.50	- contribution
SUBTOTAL of Receipts This Page (optional)	>	501.18
TOTAL This Period (last page this line number	er only)	

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or for commercial purposes, other than using the	Statements may not be sold or used by any perse e name and address of any political committee to			
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	PAC			
Full Name (Last, First, Middle Initial) A. Sergio Preciado		Date of Receipt		
Mailing Address 521 E. Bluebird		06 20 Y Y Y Y Y Y		
City	State Zip Code	Transaction ID : SA11AI.18231		
mcallen	TX 78504	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	193.38		
Name of Employer	Occupation	contribution		
selfemployed	physician			
Receipt For:	Aggregate Year-to-Date ▼	1		
Primary General				
Other (specify) ▼	1303.88			
Full Name (Last, First, Middle Initial) Sergio Ramirez		Date of Receipt		
Mailing Address 1608 Woods Drive		M = M / D = D / Y = Y = Y		
City	Chair 7: 2 ·	04 26 2012		
City	State Zip Code	Transaction ID : SA11AI.17663		
mission	TX 78572	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	250.00 contribution		
Name of Employer	Occupation			
selfemployed	physician			
Receipt For:	Aggregate Year-to-Date ▼	1		
Primary General Other (specify) ▼	1000.00			
Full Name (Last, First, Middle Initial) C. Sergio Ramirez		Date of Receipt		
Mailing Address 1608 Woods Drive		05 30 2012		
City	State Zip Code	Transaction ID : SA11AI.17877		
mission	TX 78572	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	250.00		
Name of Employer	Occupation	_ contribution		
selfemployed	physician			
Receipt For:	Aggregate Year-to-Date ▼]		
Primary General				
Other (specify) ▼	1250.00			
SUBTOTAL of Receipts This Page (optional)		693.38		
TOTAL This Period (last page this line number				

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or for commercial purposes, other than using	nd Statements may not be sold or used by any peg the name and address of any political committee	
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERA	AL PAC	
Full Name (Last, First, Middle Initial) A. Sergio Ramirez		Date of Receipt
Mailing Address 1608 Woods Drive		06 20 2012
City	State Zip Code	Transaction ID : SA11AI.18232
mission	TX 78572	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	contribution
selfemployed	physician	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General	0.0	
Other (specify) ▼	1500.00	
Full Name (Last, First, Middle Initial) Gustavo Ramos		Date of Receipt
Mailing Address 1301 S. Perking		04 26 _2012 _
City	State Zip Code	Transaction ID : SA11AI.17664
mcallen	TX 78501	Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.	C	400.00
	Occupation	contribution
Name of Employer selfemployed	Occupation	
Receipt For:	physicain	4
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	1600.00	
Full Name (Last, First, Middle Initial) C. Gustavo Ramos	,	Date of Receipt
Mailing Address 1301 S. Perking		05 30 2012
City	State Zip Code	Transaction ID : SA11AI.17878
mcallen	TX 78501	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer	Occupation	contribution
selfemployed	physicain	_
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	2000.00	
SUBTOTAL of Receipts This Page (optional	ıl)	1050.00
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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL		
Full Name (Last, First, Middle Initial) Gustavo Ramos Mailing Address 1301 S. Perking		Date of Receipt
City mcallen	State Zip Code TX 78501	06 20 2012 Transaction ID : SA11AI.18235 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00 contribution
Name of Employer selfemployed Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation physicain Aggregate Year-to-Date ▼ 2400.00	
Full Name (Last, First, Middle Initial) Mr. Mario Rangel Mailing Address 3213 Lance Lot Lane City	State Zip Code	Date of Receipt 05 30 2012 Transaction ID: SA11AL17890
Edinburg FEC ID number of contributing federal political committee.	TX 78539	Transaction ID : SA11AI.17880 Amount of Each Receipt this Period 3.28
Name of Employer selfemployed Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation private investor Aggregate Year-to-Date ▼ 203.28	contribution
Full Name (Last, First, Middle Initial) Mr. Mario Rangel Mailing Address 3213 Lance Lot Lane		Date of Receipt 06 20 2012
City Edinburg FEC ID number of contributing	State Zip Code TX 78539	Transaction ID : SA11AI.18237 Amount of Each Receipt this Period 25.00
federal political committee. Name of Employer selfemployed Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation private investor Aggregate Year-to-Date ▼ 228.28	contribution
SUBTOTAL of Receipts This Page (optional)	<u>-</u>	428.28
TOTAL This Period (last page this line numbe	r only)	7 7 7

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or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	g the name and address of any political committee	to solicit contributions from such committee.		
BORDER HEALTH FEDERA	AL PAC			
Full Name (Last, First, Middle Initial) R.V. Reddy		Date of Receipt		
Mailing Address 1500 Southland Drive		04 26 2012		
City	State Zip Code	Transaction ID : SA11AI.17668		
weslaco	TX 78596	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	125.00		
Name of Employer	Occupation	contribution		
selfemployed	physician			
Receipt For:		_		
Primary General	Aggregate Year-to-Date ▼			
Other (specify) ▼	500.00			
Full Name (Last, First, Middle Initial) R.V. Reddy		Date of Receipt		
Mailing Address 1500 Southland Drive		M = M / D = D / Y = Y = Y		
C:h.	Otata 7in Onda	05 30 2012		
City	State Zip Code	Transaction ID : SA11AI.17882		
weslaco	TX 78596	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	125.00 contribution		
Name of Employer	Occupation			
selfemployed	physician			
Receipt For:	Aggregate Year-to-Date ▼	1		
Primary General Other (specify) ▼	625.00			
Full Name (Last, First, Middle Initial)	I	Date of Receipt		
Mailing Address 1500 Southland Drive		06 20 2012		
City	State Zip Code	Transaction ID : SA11AI.18239		
weslaco	TX 78596	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	125.00		
Name of Employer	Occupation	contribution		
selfemployed	physician			
Receipt For:	Aggregate Year-to-Date ▼	-		
Primary General	Aggregate rear-to-bate \$			
Other (specify) ▼	750.00			
SUBTOTAL of Receipts This Page (optional	al)	375.00		
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TOTAL This Period (last page this line nun	nber only)	1		

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	the name and address of any political committee to	
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	. PAC	
Full Name (Last, First, Middle Initial) William Restrepo Mailing Address 1117 S. Cynthia		Date of Receipt 04 26 2012
City mcallen	State Zip Code TX 78504	Transaction ID : SA11AI.17670 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer selfemployed	Occupation physician	- contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) William Restrepo Mailing Address 1117 S. Cynthia		Date of Receipt 05 30 2012
City mcallen	State Zip Code TX 78504	05 30 2012 Transaction ID : SA11AI.17884 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer selfemployed	Occupation physician	contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	
Full Name (Last, First, Middle Initial) William Restrepo		Date of Receipt
Mailing Address 1117 S. Cynthia	0000	06 20 / Y = Y = Y = Y = Y
City mcallen	State Zip Code TX 78504	Transaction ID : SA11AI.18241 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer selfemployed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1500.00	_ contribution
SUBTOTAL of Receipts This Page (optional)		750.00
TOTAL This Period (last page this line number	er only)	

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NAME OF COMMITTEE (IN Full) BORDER HEALTH FEDERA	AL PAC	
Full Name (Last, First, Middle Initial) Homero Rivas		Date of Receipt
Mailing Address 100 E. Houston		04 26 2012
City	State Zip Code	Transaction ID : SA11AI.17672
mcallen	TX 78501	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	- contribution
selfemployed	physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Homero Rivas		Date of Receipt
Mailing Address 100 E. Houston		05 30 2012
City	State Zip Code	Transaction ID : SA11AI.17886
mcallen	TX 78501	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	230.92
Name of Employer	Occupation	contribution
selfemployed	physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1230.92	
Full Name (Last, First, Middle Initial) Homero Rivas	ı	Date of Receipt
Mailing Address 100 E. Houston		M M / D D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
City mcallen	State Zip Code TX 78501	Transaction ID : SA11AI.18243 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	_ contribution
selfemployed	physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1480.92	
	<u> </u>	730.92

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or for commercial purposes, other than using the	he name and address of any political committee t				
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	PAC				
Full Name (Last, First, Middle Initial) Benjamin Robalino Mailing Address 1217 S. Cynthia City	Date of Receipt 04 26 2012 Transaction ID: SA11AL 17673				
mcallen	State Zip Code TX 78501	Transaction ID : SA11AI.17673 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee. Name of Employer selfemployed	Occupation physcian	Amount of Each Receipt this Period 250.00 contribution			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00				
Full Name (Last, First, Middle Initial) Benjamin Robalino Mailing Address 1217 S. Cynthia		Date of Receipt 05 30 2012			
City mcallen					
FEC ID number of contributing federal political committee.	C	250.00 contribution			
Name of Employer selfemployed	Occupation physcian	-			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00				
Full Name (Last, First, Middle Initial) . Benjamin Robalino		Date of Receipt			
Mailing Address 1217 S. Cynthia		06 20 2012			
City mcallen	State Zip Code TX 78501	Transaction ID : SA11AI.18244 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	250.00			
Name of Employer	Occupation	contribution			
selfemployed	physcian				
Receipt For:	Aggregate Year-to-Date ▼	1			
Primary General Other (specify) ▼	1500.00				
SUBTOTAL of Receipts This Page (optional)	·····	750.00			
TOTAL This Period (last page this line number	r only)				

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or for commercial purposes, other than using t	the name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	- PAC	
Full Name (Last, First, Middle Initial) Mr. Martin Rocha Mailing Address P.O. Box 662		Date of Receipt
City Santa Rosa FEC ID number of contributing	State Zip Code TX 78593	05 30 2012 Transaction ID : SA11AI.17888 Amount of Each Receipt this Period 9.85
federal political committee. Name of Employer selfemployed Receipt For:	Occupation private investor Aggregate Year-to-Date ▼	- contribution
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	209.85	
Mr. Martin Rocha Mailing Address P.O. Box 662		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Santa Rosa FEC ID number of contributing federal political committee.	State Zip Code TX 78593	Transaction ID : SA11AI.18245 Amount of Each Receipt this Period 50.00
Name of Employer selfemployed	Occupation private investor	- contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 259.85	
Full Name (Last, First, Middle Initial) Paulette Saca Mailing Address 109 Condor		Date of Receipt 04 26 2012
City mcallen	State Zip Code TX 78504	Transaction ID : SA11AI.17675 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	75.00
Name of Employer self-employed Receipt For: Primary General	Occupation private investor Aggregate Year-to-Date ▼	. contribution
Other (specify) ▼	300.00	
	<u> </u>	134.85
TOTAL This Period (last page this line number	er only)	

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

or for commercial purposes, other than using th	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL		
Full Name (Last, First, Middle Initial) Paulette Saca Mailing Address 109 Condor		Date of Receipt 05 30 2012
City mcallen FEC ID number of contributing federal political committee. Name of Employer self-employed Receipt For: □ Primary □ General Other (specify) ▼	State Zip Code TX 78504 C Occupation private investor Aggregate Year-to-Date ▼ 375.00	Transaction ID : SA11AI.17889 Amount of Each Receipt this Period 75.00 contribution
Full Name (Last, First, Middle Initial) Paulette Saca Mailing Address 109 Condor City mcallen FEC ID number of contributing	State Zip Code TX 78504	Date of Receipt 06 20 2012 Transaction ID : SA11AI.18249 Amount of Each Receipt this Period 75.00
Receipt For: Primary Other (specify) ▼ Name of Employer Self-employed General	Occupation private investor Aggregate Year-to-Date ▼ 450.00	contribution
Full Name (Last, First, Middle Initial) Javier Saenz Mailing Address 2308 Monaco Drive City mission FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: Primary General Other (specify)	State Zip Code TX 78574 C Occupation physician Aggregate Year-to-Date ▼ 1600.00	Date of Receipt 04 26 2012 Transaction ID : SA11AI.17676 Amount of Each Receipt this Period 400.00 contribution
SUBTOTAL of Receipts This Page (optional)		550.00
TOTAL This Period (last page this line number	r only)	

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	e name and address of any political committee to	
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	PAC	
Full Name (Last, First, Middle Initial) A. Javier Saenz Mailing Address 2308 Monaco Drive		Date of Receipt
City	State Zip Code	05 30 2012 Transaction ID : SA11Al.17890
mission	TX 78574	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer	Occupation	contribution
selfemployed	physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	
Full Name (Last, First, Middle Initial) 3. Javier Saenz Mailing Address, 2308 Monaco Drive		Date of Receipt
Mailing Address 2308 Monaco Drive	I	06 20 2012
City	State Zip Code	Transaction ID : SA11AI.18250
mission	TX 78574	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer	Occupation	contribution
selfemployed	physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2400.00	
Full Name (Last, First, Middle Initial) JJ Saenz		Date of Receipt
Mailing Address 2400 S.E. Augusta Square		04 26 2012
City mcallen	State Zip Code TX 78503	Transaction ID : SA11AI.17677 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	contribution
selfemployed	physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
SUBTOTAL of Receipts This Page (optional)		1050.00
TOTAL This Period (last page this line number	only)	

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or for commercial purposes, other than using	g the name and address of any political committee to				
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERA	AL PAC				
Full Name (Last, First, Middle Initial) J Saenz		Date of Receipt			
Mailing Address 2400 S.E. Augusta Squar	Mailing Address 2400 S.E. Augusta Square				
City	State Zip Code	05			
mcallen	TX 78503	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	250.00			
Name of Employer	Occupation	contribution			
selfemployed	physician				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00				
Full Name (Last, First, Middle Initial) 3. JJ Saenz Mailing Address 2400 S.E. Augusta Squar	e	Date of Receipt			
011	7: 0	06 20 2012			
City	State Zip Code	Transaction ID : SA11AI.18251			
mcallen	TX 78503	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	250.00			
Name of Employer	Occupation	contribution			
selfemployed	physician				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00				
Full Name (Last, First, Middle Initial) Larry Safir		Date of Receipt			
Mailing Address 3300 S. 2nd suite 10		04 26 2012			
City	State Zip Code	Transaction ID : SA11AI.17678			
mcallen	TX 78503	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	400.00 contribution			
Name of Employer	Name of Employer Occupation				
self-employed					
Receipt For: Primary General	Aggregate Year-to-Date ▼				
Other (specify) ▼	1600.00				
SUBTOTAL of Receipts This Page (optional	l)	900.00			
TOTAL This Period (last page this line num	aber only)				

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	the name and address of any political committee to	
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	. PAC	
Full Name (Last, First, Middle Initial) Larry Safir Mailing Address 3300 S. 2nd suite 10 City	Date of Receipt M	
mcallen FEC ID number of contributing federal political committee. Name of Employer self-employed Receipt For: □ Primary □ General □ Other (specify) ▼	State Zip Code TX 78503 C Occupation private investor Aggregate Year-to-Date ▼ 2000.00	Amount of Each Receipt this Period 400.00 contribution
Full Name (Last, First, Middle Initial) Larry Safir Mailing Address 3300 S. 2nd suite 10 City mcallen FEC ID number of contributing federal political committee. Name of Employer self-employed Receipt For: Primary General Other (specify)	State Zip Code TX 78503 C Occupation private investor Aggregate Year-to-Date ▼ 2400.00	Date of Receipt M
Full Name (Last, First, Middle Initial) Juan Salazar Mailing Address 801 E Nolana Loop City McAllen FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: Primary General Other (specify)	State Zip Code TX 78504 C Occupation physician Aggregate Year-to-Date ▼ 1000.00	Date of Receipt 04 26 2012 Transaction ID : SA11AI.17679 Amount of Each Receipt this Period 250.00 contribution
SUBTOTAL of Receipts This Page (optional).	>	1050.00
TOTAL This Period (last page this line number	er only)	

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	the name and address of any political committee to						
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	. PAC						
Full Name (Last, First, Middle Initial) Juan Salazar Mailing Address 801 E Nolana Loop	Date of Receipt 05 30 2012						
City McAllen							
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 250.00					
Name of Employer selfemployed	Occupation physician	- contribution					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00						
Full Name (Last, First, Middle Initial) Juan Salazar Mailing Address 801 E Nolana Loop	Date of Receipt 06 20 2012						
City McAllen	State Zip Code TX 78504	Transaction ID : SA11AI.18253 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	250.00					
Name of Employer selfemployed	Occupation physician	- contribution					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00						
Full Name (Last, First, Middle Initial) Elisa Garza Sanchez		Date of Receipt					
Mailing Address 3509 N. Glasscock	Stata Zin Codo	04 26 2012					
City Mission	State Zip Code TX 78574	Transaction ID : SA11AI.17680 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	125.00					
Name of Employer Self employed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 500.00	- contribution					
SUBTOTAL of Receipts This Page (optional)		625.00					
TOTAL This Period (last page this line number	er only)						

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or		name and address of any political committee to	
\rangle	NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL F	PAC	
Α.	Full Name (Last, First, Middle Initial) Elisa Garza Sanchez		Date of Receipt
	Mailing Address 3509 N. Glasscock City	05 30 2012 Transaction ID : SA11Al.17894	
	Mission	State Zip Code TX 78574	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	125.00
	Name of Employer Self employed	Occupation physician	contribution
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 625.00	
В.	Full Name (Last, First, Middle Initial) Elisa Garza Sanchez		Date of Receipt
	Mailing Address 3509 N. Glasscock City	State Zip Code	06 20 2012 Transaction ID : SA11AI.18256
	Mission	TX 78574	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	125.00
	Name of Employer Self employed	Occupation physician	contribution
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
С.	Full Name (Last, First, Middle Initial) Mr. Victor Sanchez		Date of Receipt
	Mailing Address P.O. Box 1868		04 26 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	McAllen	State Zip Code TX 78503	Transaction ID : SA11AI.17681 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer selfemployed	Occupation private investor	contribution
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
s	SUBTOTAL of Receipts This Page (optional)		500.00
Т	OTAL This Period (last page this line number of	only)	

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	the name and address of any political committee to						
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	. PAC						
Full Name (Last, First, Middle Initial) Mr. Victor Sanchez Mailing Address P.O. Box 1868	Date of Receipt 05 30 2012						
City McAllen	<u> </u>						
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period					
Name of Employer selfemployed	Occupation private investor	- contribution					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00						
Full Name (Last, First, Middle Initial) Mr. Victor Sanchez Mailing Address P.O. Box 1868	Date of Receipt						
City McAllen	State Zip Code TX 78503	06 20 2012 Transaction ID : SA11AI.18258 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С	250.00					
Name of Employer selfemployed	Occupation private investor	- contribution					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00						
Full Name (Last, First, Middle Initial) Michael Seiba		Date of Receipt					
Mailing Address P. O. Box 4556	0000	04 26 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
City mcallen	State Zip Code TX 78502	Transaction ID : SA11AI.17683 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	250.00					
Name of Employer selfemployed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1000.00	_ contribution					
SUBTOTAL of Receipts This Page (optional)		750.00					
TOTAL This Period (last page this line number	er only)						

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	the name and address of any political committee to				
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	. PAC				
Full Name (Last, First, Middle Initial) Michael Seiba Mailing Address P. O. Box 4556		Date of Receipt			
City mcallen	State Zip Code TX 78502	05 30 2012 Transaction ID : SA11AI.17897 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С	250.00			
Name of Employer selfemployed	Occupation physician	- contribution			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00				
Full Name (Last, First, Middle Initial) Michael Seiba Mailing Address P. O. Box 4556		Date of Receipt			
City mcallen	State Zip Code TX 78502	7 Transaction ID : SA11AI.18261 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С	250.00			
Name of Employer selfemployed	Occupation physician	contribution			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00				
Full Name (Last, First, Middle Initial) Dr. Samuel Serna		Date of Receipt			
Mailing Address 125 E. Cornell		04 26 2012			
City McAllen	State Zip Code TX 78504	Transaction ID : SA11AI.17684 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С	100.00			
Name of Employer self-employee Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 400.00	contribution			
SUBTOTAL of Receipts This Page (optional).		600.00			
TOTAL This Period (last page this line number	er only)				

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	the name and address of any political committee to				
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	. PAC				
Full Name (Last, First, Middle Initial) Dr. Samuel Serna Mailing Address 125 E. Cornell		Date of Receipt			
City McAllen	State Zip Code TX 78504	Transaction ID : SA11AI.17898 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	100.00			
Name of Employer self-employee	Occupation physician	contribution			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00				
Full Name (Last, First, Middle Initial) Dr. Samuel Serna Mailing Address 125 E. Cornell		Date of Receipt 06 20 2012			
City McAllen	State Zip Code TX 78504	Transaction ID : SA11AI.18262 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	100.00			
Name of Employer self-employee	Occupation physician	- contribution			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00				
Full Name (Last, First, Middle Initial) Tawhid Shuaib		Date of Receipt			
Mailing Address 4000 Burns Drive		04 26 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City mcallen	State Zip Code TX 78503	Transaction ID : SA11AI.17685 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	400.00			
Name of Employer selfemployed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1600.00	- contribution			
SUBTOTAL of Receipts This Page (optional).		600.00			
TOTAL This Period (last page this line number	er only)				

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

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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL		
Full Name (Last, First, Middle Initial) Tawhid Shuaib Mailing Address 4000 Burns Drive City mcallen FEC ID number of contributing federal political committee.	State Zip Code TX 78503	Date of Receipt M
Name of Employer selfemployed Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 2000.00	contribution
Full Name (Last, First, Middle Initial) Tawhid Shuaib Mailing Address 4000 Burns Drive City	State Zip Code	Date of Receipt 06 20 2012 Transaction ID: SA11AI.18263
mcallen FEC ID number of contributing federal political committee. Name of Employer	TX 78503 C Occupation	Amount of Each Receipt this Period 400.00 contribution
selfemployed Receipt For: Primary General Other (specify) ▼	physician Aggregate Year-to-Date ▼ 2400.00	
Full Name (Last, First, Middle Initial) Dennis Slavin Mailing Address 1501 S. Oklahoma City	State Zip Code	Date of Receipt M
weslaco FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: Primary General	TX 78596 C Occupation physician Aggregate Year-to-Date ▼	Amount of Each Receipt this Period 50.00 contribution
Other (specify) ▼ SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number	<u>^</u>	850.00

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

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or for commercial purposes, other than using t	he name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL		
Full Name (Last, First, Middle Initial) Dennis Slavin Mailing Address 1501 S. Oklahoma		Date of Receipt
City weslaco FEC ID number of contributing	State Zip Code TX 78596	06 20 2012 Transaction ID : SA11AI.18264 Amount of Each Receipt this Period
federal political committee. Name of Employer	Occupation	50.00 contribution
selfemployed Receipt For: Primary General Other (specify) ▼	physician Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Joel Solis Mailing Address 405 E. Avocet		Date of Receipt 04 26 2012
City Mcallen FEC ID number of contributing federal political committee.	State Zip Code TX 78501	Transaction ID : SA11AI.17688 Amount of Each Receipt this Period 122.60
Name of Employer self-employed Receipt For: Primary General	Occupation physician Aggregate Year-to-Date ▼	contribution
Other (specify) ▼ Full Name (Last, First, Middle Initial)	, 484.27	
Mailing Address 405 E. Avocet	State 7:- C-J-	Date of Receipt 05 30 2012
City Mcallen FEC ID number of contributing federal political committee.	State Zip Code TX 78501	Amount of Each Receipt this Period 49.04
Name of Employer self-employed Receipt For:	Occupation physician Aggregate Year-to-Date ▼	contribution
Primary General Other (specify) ▼	533.31	
SUBTOTAL of Receipts This Page (optional)	>	221.64
TOTAL This Period (last page this line number	er only)	

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

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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	PAC				
Full Name (Last, First, Middle Initial) Joel Solis Mailing Address 405 E. Avocet		Date of Receipt			
City Mcallen	State Zip Code TX 78501	06 20 2012 Transaction ID : SA11AI.18267 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	150.00			
Name of Employer self-employed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 683.31	- contribution			
Full Name (Last, First, Middle Initial) Dr. Hector Soto Mailing Address 101 South Greenbriar	State Zin Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City McAllen FEC ID number of contributing federal political committee.	State Zip Code TX 78502	Transaction ID : SA11AI.17689 Amount of Each Receipt this Period 400.00			
Name of Employer self-employee Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1600.00	- contribution			
Full Name (Last, First, Middle Initial) Dr. Hector Soto Mailing Address 101 South Greenbriar City	State Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
McAllen FEC ID number of contributing federal political committee.	TX 78502	Amount of Each Receipt this Period 400.00			
Name of Employer self-employee Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 2000.00	contribution			
SUBTOTAL of Receipts This Page (optional)	<u> </u>	950.00			
TOTAL This Period (last page this line number	r only)				

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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	PAC	
Full Name (Last, First, Middle Initial) Dr. Hector Soto Mailing Address 101 South Greenbriar		Date of Receipt
City McAllen	State Zip Code TX 78502	06 20 2012 Transaction ID : SA11Al.18268 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00 contribution
Name of Employer self-employee Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 2400.00	
Full Name (Last, First, Middle Initial) Alejandro Tey Mailing Address 3012 Laurie Lane		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Edinburg FEC ID number of contributing	State Zip Code TX 78539	Transaction ID : SA11AI.17692 Amount of Each Receipt this Period 250.00
Receipt For: Primary General Rederal political committee. Receipt Employer General	Occupation physician Aggregate Year-to-Date ▼	contribution
Other (specify) ▼ Full Name (Last, First, Middle Initial)	1000.00	
Alejandro Tey Mailing Address 3012 Laurie Lane		Date of Receipt 05 30 2012
City Edinburg	State Zip Code TX 78539	Transaction ID : SA11AI.17906 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Self employed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1250.00	. contribution
SUBTOTAL of Receipts This Page (optional)	>	900.00
TOTAL This Period (last page this line number	<u> </u>	

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

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	the name and address of any political committee to					
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERA	L PAC					
Full Name (Last, First, Middle Initial) A. Alejandro Tey Mailing Address 3012 Laurie Lane	Alejandro Tey					
City Edinburg	State Zip Code TX 78539	06 20 2012 Transaction ID : SA11AI.18276 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	250.00				
Name of Employer Self employed	Occupation physician	- contribution				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00					
Full Name (Last, First, Middle Initial) 3. Jose Trejo Mailing Address 112 S. Broadway	Date of Receipt 04 262012					
City mcallen	State Zip Code TX 78501	Transaction ID : SA11AI.17693 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	250.00				
Name of Employer self-employed	Occupation private investor	contribution				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00					
Full Name (Last, First, Middle Initial) Jose Trejo		Date of Receipt				
Mailing Address 112 S. Broadway		05 30 / Y=Y=Y=Y				
City mcallen	State Zip Code TX 78501	Transaction ID : SA11AI.17907 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	250.00				
Name of Employer self-employed Receipt For: Primary General Other (specify) ▼	Occupation private investor Aggregate Year-to-Date ▼ 1250.00	_ contribution				
SUBTOTAL of Receipts This Page (optional)		750.00				
TOTAL This Period (last page this line numb	per only)					

FOR LINE NUMBER: PAGE 152 OF 188 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c

Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL PAC Full Name (Last, First, Middle Initial) Jose Trejo Date of Receipt Mailing Address 112 S. Broadway 20 2012 06 City State Zip Code Transaction ID: SA11AI.18277 TX mcallen 78501 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. contribution Name of Employer Occupation self-employed private investor Receipt For: Aggregate Year-to-Date ▼ Primary General 1500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Krishna Turlapati Date of Receipt Mailing Address 9123 1st Street 04 26 2012 City State Zip Code Transaction ID: SA11AI.17695 TX McAllen 78504 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. contribution Name of Employer Occupation selfemployed physician Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Dr. Krishna Turlapati Date of Receipt Mailing Address 9123 1st Street 30 05 2012 City State Zip Code Transaction ID: SA11AI.17909 TX McAllen 78504 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. contribution Name of Employer Occupation selfemployed physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify)

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	the name and address of any political committee to	
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	. PAC	
Full Name (Last, First, Middle Initial) Dr. Krishna Turlapati Mailing Address 9123 1st Street		Date of Receipt
City	State Zip Code	06 20 2012 Transaction ID : SA11Al.18279
McAllen	TX 78504	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	100.00
Name of Employer	Occupation	contribution
selfemployed	physician	-
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) Susan Turley Mailing Address 242 The Latitute		Date of Receipt
Mailing Address 312 Thunderbird		04 26 2012
City	State Zip Code	Transaction ID : SA11AI.17696
mcallen	TX 78504	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer	Occupation	contribution
self-employed	physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Susan Turley		Date of Receipt
Mailing Address 312 Thunderbird		05 30 2012
City mcallen	State Zip Code TX 78504	Transaction ID : SA11AI.17910 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	211.95
Name of Employer	Occupation	contribution
self-employed	physician	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1211.95	
SUBTOTAL of Receipts This Page (optional)	>	561.95
TOTAL This Period (last page this line number	er only)	

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or for commercial purposes, other than using	the name and address of any political committee						
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERA	L PAC						
Full Name (Last, First, Middle Initial) Susan Turley	Susan Turley						
Mailing Address 312 Thunderbird		06 20 / Y = Y = Y = Y					
City	State Zip Code	Transaction ID : SA11AI.18280					
mcallen	TX 78504	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	250.00					
Name of Employer	Occupation	contribution					
self-employed	physician						
Receipt For:	Aggregate Year-to-Date ▼	1					
Primary General	riggiogato real-to-Date ▼						
Other (specify) ▼	1461.95						
Full Name (Last, First, Middle Initial) Marcel Twahirwa		Date of Receipt					
Mailing Address 2403 El Encino Drive		M = M / D = D / Y = Y = Y					
C:h.							
City	State Zip Code	Transaction ID : SA11AI.17697					
mission	TX 78572	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	250.00					
Name of Employer	Occupation	contribution					
selfemployed	physician						
Receipt For:	Aggregate Year-to-Date ▼	7					
Primary General	00 0						
Other (specify) ▼	1000.00						
Full Name (Last, First, Middle Initial) Marcel Twahirwa		Date of Receipt					
Mailing Address 2403 El Encino Drive		05 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
City	State Zip Code	Transaction ID : SA11AI.17911					
mission	TX 78572	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	250.00					
Name of Employer	contribution						
selfemployed							
Receipt For:	1						
Other (specify) ▼	1250.00						
SUBTOTAL of Receipts This Page (optional)	·····	750.00					
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TOTAL This Period (last page this line numb	per only)						

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or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	the name and address of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Marcel Twahirwa Mailing Address 2403 El Encino Drive City mission FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: Primary General Other (specify)	State Zip Code TX 78572 C Occupation physician Aggregate Year-to-Date ▼ 1500.00	Date of Receipt 06 20 2012 Transaction ID : SA11AI.18281 Amount of Each Receipt this Period 250.00 contribution
Full Name (Last, First, Middle Initial) Dr. Theresa Valladares Mailing Address 2302 Red River Drive City Mission FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: Primary General Other (specify)	State Zip Code TX 78572 C Occupation physician Aggregate Year-to-Date ▼ 400.00	Date of Receipt 04
Full Name (Last, First, Middle Initial) Dr. Theresa Valladares Mailing Address 2302 Red River Drive City Mission FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: Primary General Other (specify)	State Zip Code TX 78572 C Occupation physician Aggregate Year-to-Date ▼ 500.00	Date of Receipt 05 30 2012 Transaction ID: SA11AI.17912 Amount of Each Receipt this Period 100.00 contribution
SUBTOTAL of Receipts This Page (optional).	>	450.00

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or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	g the name and address of any political committee	
BORDER HEALTH FEDERA	AL PAC	
Full Name (Last, First, Middle Initial) Dr. Theresa Valladares		Date of Receipt
Mailing Address 2302 Red River Drive	06 20 2012	
City	State Zip Code	Transaction ID : SA11AI.18283
Mission	TX 78572	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	contribution
selfemployed	physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	600.00	
Full Name (Last, First, Middle Initial) Jose Vasquez	'	Date of Receipt
Mailing Address 2548 Palm Circle	04 26 _2012 _	
City	State Zip Code	Transaction ID : SA11AI.17610
rio grande city	TX 78582	Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.	C	250.00
Name of Employer	contribution	
selfemployed	Occupation physician	
Receipt For:		\dashv
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Jose Vasquez		Date of Receipt
Mailing Address 2548 Palm Circle		
Zo4o Palm Circle		05 30 _2012 _
City	State Zip Code	Transaction ID : SA11AI.17823
rio grande city	TX 78582	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	contribution	
selfemployed		
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	1250.00	
SUBTOTAL of Receipts This Page (options	al)	600.00
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TOTAL This Period (last page this line nur	mber only)	

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	ne name and address of any political committee to	
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	PAC	
Full Name (Last, First, Middle Initial) Jose Vasquez Mailing Address 2548 Palm Circle		Date of Receipt
City	State Zip Code	06 20 2012
rio grande city	TX 78582	Transaction ID : SA11AI.18146 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer selfemployed	Occupation physician	- contribution
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1500.00	
Full Name (Last, First, Middle Initial) Dr. Efraim Vela Mailing Address 100 E. Ridge Road #B	Date of Receipt 04 26 2012	
City McAllen	State Zip Code TX 78503	Transaction ID : SA11AI.17699 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer selfemployed	Occupation physician	contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) C. Dr. Efraim Vela	·	Date of Receipt
Mailing Address 100 E. Ridge Road #B		05 30 2012
City McAllen	State Zip Code TX 78503	Transaction ID : SA11AI.17913 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	154.87
Name of Employer selfemployed Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1154.87	contribution
SUBTOTAL of Receipts This Page (optional)		654.87
TOTAL This Period (last page this line number	r only)	

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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL		
Full Name (Last, First, Middle Initial) Dr. Efraim Vela Mailing Address 100 E. Ridge Road #B	State 75- Oct.	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City McAllen FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: Primary General Other (specify)	State Zip Code TX 78503 C Occupation physician Aggregate Year-to-Date ▼ 1404.87	Transaction ID : SA11AI.18286 Amount of Each Receipt this Period 250.00 contribution
Full Name (Last, First, Middle Initial) Ramiro Verdoreen Mailing Address 301 E. Newport City mcallen FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: Primary General Other (specify)	State Zip Code TX 78501 C Occupation physician Aggregate Year-to-Date ▼ 1600.00	Date of Receipt 04 26 2012 Transaction ID: SA11AI.17700 Amount of Each Receipt this Period 400.00 contribution
Full Name (Last, First, Middle Initial) Ramiro Verdoreen Mailing Address 301 E. Newport City mcallen FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: Primary General Other (specify)	State Zip Code TX 78501 C Occupation physician Aggregate Year-to-Date ▼ 2000.00	Date of Receipt 05 30 2012 Transaction ID: SA11AI.17914 Amount of Each Receipt this Period 400.00 contribution
SUBTOTAL of Receipts This Page (optional)		1050.00
TOTAL This Period (last page this line number	only)	

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	the name and address of any political committee to						
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	. PAC						
Full Name (Last, First, Middle Initial) Ramiro Verdoreen Mailing Address 301 E. Newport		Date of Receipt					
City mcallen	State Zip Code TX 78501	06 20 2012 Transaction ID : SA11AI.18288 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С	400.00					
Name of Employer selfemployed	Occupation physician	contribution					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2400.00						
Full Name (Last, First, Middle Initial) Carlos Villalta Mailing Address P. O. Box 1632	Carlos Villalta						
City mission	State Zip Code TX 78573	7 Transaction ID : SA11AI.17701 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С	125.00					
Name of Employer selfemployed	Occupation physician	contribution					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00						
Full Name (Last, First, Middle Initial) Carlos Villalta		Date of Receipt					
Mailing Address P. O. Box 1632		05 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
City mission	State Zip Code TX 78573	Transaction ID : SA11AI.17915 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С	125.00					
Name of Employer selfemployed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 625.00	- contribution					
SUBTOTAL of Receipts This Page (optional).		650.00					
TOTAL This Period (last page this line number	er only)						

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	the name and address of any political committee to					
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	- PAC					
Full Name (Last, First, Middle Initial) Carlos Villalta Mailing Address P. O. Box 1632		Date of Receipt				
City mission	State Zip Code TX 78573	Transaction ID : SA11AI.18290 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	125.00				
Name of Employer selfemployed	Occupation physician	contribution				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00					
Full Name (Last, First, Middle Initial) Rita Villanueva Mailing Address 801 E. Nolana Suite 4 City	Rita Villanueva Mailing Address 801 E. Nolana Suite 4					
mcallen FEC ID number of contributing	State Zip Code TX 78504	Transaction ID : SA11AI.17702 Amount of Each Receipt this Period 147.50				
Receipt For: Primary Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 510.09	contribution				
Full Name (Last, First, Middle Initial) Rita Villanueva Mailing Address 801 E. Nolana Suite 4 City	State Zip Code	Date of Receipt M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y				
mcallen FEC ID number of contributing federal political committee.	TX 78504	Amount of Each Receipt this Period 24.17				
Name of Employer selfemployed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 534.26	- contribution				
SUBTOTAL of Receipts This Page (optional).	•	296.67				
TOTAL This Period (last page this line number	er only)					

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or for commercial purposes, other than using the	he name and address of any political committee to	solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL						
Full Name (Last, First, Middle Initial) Rita Villanueva Mailing Address 801 E. Nolana Suite 4 City mcallen FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial)	State Zip Code TX 78504 C Occupation physician Aggregate Year-to-Date ▼ 620.30	Date of Receipt M M C 20 2012 Transaction ID : SA11AI.18291 Amount of Each Receipt this Period 86.04 contribution				
Mailing Address 901 W. Moore City	State Zip Code	Date of Receipt O4 26 2012 Transaction ID: SA11AI.17703				
pharr FEC ID number of contributing federal political committee. Name of Employer	TX 78577 C Occupation	Amount of Each Receipt this Period 120.58 contribution				
selfemployed Receipt For: Primary General Other (specify)	physician Aggregate Year-to-Date ▼ 417.02					
Full Name (Last, First, Middle Initial) Victor Villarreal Mailing Address 901 W. Moore City	State Zip Code	Date of Receipt 05 30 2012 Transaction ID: SA11Al.17917				
pharr FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: Primary General Other (specify) Other (specify)	TX 78577 C Occupation physician Aggregate Year-to-Date ▼ 457.21	Amount of Each Receipt this Period 40.19 contribution				
SUBTOTAL of Receipts This Page (optional)		246.81				
TOTAL This Period (last page this line number	er only)					

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

					PAGE	1	62 OF		188
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	the name and address of any political committee to					
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	. PAC					
Full Name (Last, First, Middle Initial) Victor Villarreal Mailing Address 901 W. Moore	or Villarreal					
City	State Zip Code TX 78577	Transaction ID : SA11AI.18292				
FEC ID number of contributing federal political committee.	C 78577	Amount of Each Receipt this Period 70.34				
Name of Employer selfemployed	Occupation physician	- contribution				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 527.55					
Full Name (Last, First, Middle Initial) Roger Vitko Mailing Address 1017 south 1st	Date of Receipt					
City mcallen	State Zip Code TX 78502	7				
FEC ID number of contributing federal political committee.	C	150.00 contribution				
Name of Employer self-employed Receipt For:	Occupation physician	CONTRIBUTION				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00					
Full Name (Last, First, Middle Initial) . Roger Vitko		Date of Receipt				
Mailing Address 1017 south 1st		05 30 / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y				
City mcallen	State Zip Code TX 78502	Transaction ID : SA11AI.17918 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	150.00				
Name of Employer self-employed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 750.00	- contribution				
SUBTOTAL of Receipts This Page (optional)		370.34				
TOTAL This Period (last page this line number	er only)					

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

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or for commercial purposes, other than using the	statements may not be sold or used by any per- ne name and address of any political committee t	
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	PAC	
Full Name (Last, First, Middle Initial) A. Roger Vitko		Date of Receipt
Mailing Address 1017 south 1st		06 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.18293
mcallen	TX 78502	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer	Occupation	contribution
self-employed	physician	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	00 0	
Other (specify) ▼	900.00	
Full Name (Last, First, Middle Initial) Raymond Walker		Date of Receipt
Mailing Address 1117 Shallow		M = M / D = D / Y = Y = Y
apt 4	Otata 7:n Ocata	04 26 2012
City	State Zip Code	Transaction ID : SA11AI.17705
mcallen	TX 78504	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	contribution
self-employed	private investor	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) C. Raymond Walker	1	Date of Receipt
Mailing Address 1117 Shallow apt 4		05 30 2012
City	State Zip Code	Transaction ID : SA11AI.17919
mcallen	TX 78504	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	contribution
self-employed	private investor	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General		
Other (specify) ▼	1250.00	
SUBTOTAL of Receipts This Page (optional)		650.00
TOTAL This Period (last page this line numbe	r only)	

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

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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL		
Full Name (Last, First, Middle Initial) Raymond Walker Mailing Address 1117 Shallow apt 4 City mcallen FEC ID number of contributing federal political committee. Name of Employer self-employed Receipt For:	State Zip Code TX 78504 C Occupation private investor	Date of Receipt 06 20 2012 Transaction ID: SA11AI.18294 Amount of Each Receipt this Period 250.00 contribution
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	
Full Name (Last, First, Middle Initial) James Webb Mailing Address 312 Redbud	State 7in Codo	Date of Receipt 04 26 2012
City mcallen	State Zip Code TX 78504	Transaction ID : SA11AI.17706 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	133.28
Name of Employer self-employed Receipt For: Primary General Other (specify) ▼	Occupation private investor Aggregate Year-to-Date ▼ 460.93	contribution
Full Name (Last, First, Middle Initial) James Webb Mailing Address 312 Redbud		Date of Receipt 05 30 2012
City mcallen	State Zip Code TX 78504	Transaction ID : SA11AI.17920 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	44.43
Name of Employer self-employed Receipt For: Primary General Other (specify) ▼	Occupation private investor Aggregate Year-to-Date ▼ 505.36	contribution
SUBTOTAL of Receipts This Page (optional)		427.71
TOTAL This Period (last page this line number	r only)	

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NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL F	PAC	
Full Name (Last, First, Middle Initial) James Webb Mailing Address 312 Redbud		Date of Receipt
	State 7in Code	06 20 2012
City mcallen	State Zip Code TX 78504	Transaction ID : SA11AI.18295 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer self-employed	Occupation private investor	contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 605.36	
Full Name (Last, First, Middle Initial) 3. Patrick Wilcox Mailing Address 111 Pio Grande		Date of Receipt
Mailing Address 111 Rio Grande City mission	State Zip Code TX 78572	04 26 2012 Transaction ID : SA11AI.17707 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer selfemployed	Occupation physician	contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) Patrick Wilcox		Date of Receipt
Mailing Address 111 Rio Grande		05 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City mission	State Zip Code TX 78572	Transaction ID : SA11AI.17921 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer selfemployed	Occupation physician	contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		300.00
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BORDER HEALTH FEDER	RAL PAC	
Full Name (Last, First, Middle Initial) Patrick Wilcox		Date of Receipt
Mailing Address 111 Rio Grande		06 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.18296
mission	TX 78572	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	contribution
selfemployed	physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	Aggregate rear-to-bate ▼	
Other (specify) ▼	600.00	
Full Name (Last, First, Middle Initial) 3. Subbarrao Yarra	•	Date of Receipt
Mailing Address 6905		M = M / D = D / Y = Y = Y
N. Cynthia		04 26 2012
City	State Zip Code	Transaction ID : SA11AI.17708
McAllen	TX 78504	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer	Occupation	contribution
Self-employed	physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	riggregate real to bate v	
Other (specify) ▼	800.00	
Full Name (Last, First, Middle Initial) C. Subbarrao Yarra	·	Date of Receipt
Mailing Address 6905 N. Cynthia		05 30 2012
City	State Zip Code	Transaction ID : SA11AI.17922
McAllen	TX 78504	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	200.00
Name of Employer	Occupation	contribution
Self-employed	physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	, igg. egate Total to Date V	
Other (specify) ▼	1000.00	
SUBTOTAL of Receipts This Page (optic	nal)	500.00
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TOTAL This Period (last page this line n	umber only)	

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or for commercial purposes, other than using	the name and address of any political committee	
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERA	L PAC	
Full Name (Last, First, Middle Initial) Subbarrao Yarra Mailing Address 6905 N. Cynthia City McAllen FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify)	State Zip Code TX 78504 C Occupation physician Aggregate Year-to-Date ▼ 1400.00	Date of Receipt M
Full Name (Last, First, Middle Initial) Dr. Christopher Zaleski Mailing Address 6804 N. 1st		Date of Receipt
City mcallen FEC ID number of contributing federal political committee.	State Zip Code TX 78504	04 26 2012 Transaction ID : SA11AI.17709 Amount of Each Receipt this Period 250.00
Name of Employer selfemployed Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1000.00	contribution
Full Name (Last, First, Middle Initial) Dr. Christopher Zaleski Mailing Address 6804 N. 1st City mcallen FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: Primary General Other (specify)	State Zip Code TX 78504 C Occupation physician Aggregate Year-to-Date ▼ 1250.00	Date of Receipt 05 30 2012 Transaction ID : SA11AI.17923 Amount of Each Receipt this Period 250.00 contribution
SUBTOTAL of Receipts This Page (optional)) >	900.00
TOTAL This Period (last page this line numb	per only)	

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

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FOR LINE NUMBER: PAGE 168 OF 188 (check only one) X 11a 11b 11c 12									
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NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	. PAC	
Full Name (Last, First, Middle Initial) Dr. Christopher Zaleski Mailing Address 6804 N. 1st City mcallen FEC ID number of contributing federal political committee. Name of Employer selfemployed	State Zip Code TX 78504 C Occupation physician	Date of Receipt 06 20 2012 Transaction ID: SA11AI.18301 Amount of Each Receipt this Period 250.00 contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	
Full Name (Last, First, Middle Initial) Hugo Zapata Mailing Address 316 Xenops City mcallen FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: Primary General Other (specify)	State Zip Code TX 78504 C Occupation physician Aggregate Year-to-Date ▼ 1600.00	Date of Receipt 04 26 2012 Transaction ID : SA11AI.17710 Amount of Each Receipt this Period 400.00 contribution
Full Name (Last, First, Middle Initial) Hugo Zapata Mailing Address 316 Xenops City mcallen FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: Primary General Other (specify)	State Zip Code TX 78504 C Occupation physician Aggregate Year-to-Date ▼ 2000.00	Date of Receipt 05 30 2012 Transaction ID: SA11AI.17924 Amount of Each Receipt this Period 400.00 contribution
SUBTOTAL of Receipts This Page (optional)	<u> </u>	1050.00
TOTAL This Period (last page this line number	er only)	

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

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14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL PAC Full Name (Last, First, Middle Initial) Hugo Zapata Date of Receipt Mailing Address 316 Xenops 20 2012 City State Zip Code Transaction ID: SA11AI.18302 TX 78504 mcallen Amount of Each Receipt this Period FEC ID number of contributing C 400.00 federal political committee. contribution Name of Employer Occupation selfemployed physician Receipt For: Aggregate Year-to-Date ▼ Primary General 2400.00 Other (specify)

Full Name (Last, First, Middle Initial) B. Dr. Fuad Zayed Date of Receipt Mailing Address 1425 Sweet Lane 04 26 2012 City State Zip Code Transaction ID: SA11AI.17712 TX Edinburg 78539 Amount of Each Receipt this Period FEC ID number of contributing C 75.00 federal political committee. contribution Name of Employer Occupation selfemployed physician Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Fuad Zayed Date of Receipt

Mailing Address 1425 Sweet Lane 30 05 2012 City State Zip Code Transaction ID: SA11AI.17926 TX Edinburg 78539 Amount of Each Receipt this Period FEC ID number of contributing C 75.00 federal political committee. contribution Name of Employer Occupation selfemployed physician Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)			7	Ξ	Ξ	7	Ξ	5	50.00)
TOTAL This Period (last page this line number only)	_		7	_	_	7	_			

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	the name and address of any political committee to	
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERA	L PAC	
Full Name (Last, First, Middle Initial) Dr. Fuad Zayed Mailing Address 1425 Sweet Lane		Date of Receipt
City	State Zip Code TX 78539	06 20 2012 Transaction ID : SA11AI.18304
Edinburg FEC ID number of contributing federal political committee.	C 78539	Amount of Each Receipt this Period 75.00
Name of Employer selfemployed	Occupation physician	- contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
Full Name (Last, First, Middle Initial) Mailing Address		Date of Receipt
City	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С	2. 2. 1000pt tillo 1 0100
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address	State 7:- Order	M = M / D = D / Y = Y = Y
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional))	75.00
TOTAL This Period (last page this line numb	ber only)	105174.25

S	CHEDULE B (FEC Form 3X)			E NUMBER: PAGE 171 OF 188						
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			Summary Page	X 21b 27	22 28a	23 28b	24 28c	25 29	26 30b	
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\setminus	NAME OF COMMITTEE (In Full)									
$ \rangle$	BORDER HEALTH FEDERAL PAC	;								
\angle	Full Name (Last, First, Middle Initial)			T						
Α.	Ms Eliza Alvardo		Date of	Disburser	ment					
					M M	/ D	D / Y	YY	Υ	
	Mailing Address 1303 W. Kiwi #4				04	09		2012		
	City	State	Zip Code							
	Pharr	TX	78577		Trans	action ID :	SB21B.183	316		
	Purpose of Disbursement			100						
	contract services - salary expenditure Candidate Name			001	Amount	t of Each [Disbursemer	nt this F	Period	
	Canuldate Name			Category/ Type				5006	.94	
	Office Sought: House Disbursem	nent For:		1,900		7	7			
		Primary	General							
		Other (spec	cify) 🔻							
_	State: District: Full Name (Last, First, Middle Initial)									
В.	Ms Eliza Alvardo				Date of	Disburser	nent			
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	Mailing Address 1303 W. Kiwi #4				04	23	3	2012		
	•	State	Zip Code		Trans	action ID	: SB21B.18:	319		
	Pharr Purpose of Disbursement	TX	78577							
	contract services - salary expenditure			001	Amount	t of Each [Disbursemer	nt this F	Period	
	Candidate Name			Category/				F000	.02	
	Office Country			Type		-	7	5006	. ყა	
	Office Sought: House Disbursem	nent For: Primary	General							
		Other (spe								
	State: District:		- · · ·							
_	Full Name (Last, First, Middle Initial)									
C.	Ms Eliza Alvardo					Disburser				
	Mailing Address 1303 W. Kiwi #4				05	07		2012	Y	
		State	Zip Code		Trans	action ID	: SB21B.18:	330		
	Pharr Purpose of Disbursement	TX	78577							
	contract services - salary expenditure			001	Amount	t of Each [Disbursemer	nt this F	Period	
	Candidate Name			Category/				5006		
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	Office Sought: House Disbursem	nent For: Primary	General							
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	for commercial purposes, other than using the name								
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	BONDER HEAETH EDERAET AC	,							
	Full Name (Last, First, Middle Initial)								
A.	Ms Eliza Alvardo				Date of D	isburser	nent		
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	Mailing Address 1303 W. Kiwi #4				05	18		2012	
	011.	31-1- 3 1-	Ondo						
	,		Code 577		Transac	tion ID :	SB21B.	18335	
	Pharr Purpose of Disbursement	1/ /6:	011						
	contract services - salalry expenditure			001	Amount o	f Fach [Disburse	ment this	Period
	Candidate Name				7 0		-10.5 a. 00.		
				Category/ Type	1			500	06.94
	Office Sought: House Disburser	nent For:		.,,,,,					
	Senate	Primary	General						
	President	Other (specify)	▼						
	State: District:								
	Full Name (Last, First, Middle Initial)								
В.	Ms Eliza Alvardo				Date of D	isburser	nent		
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	Mailing Address 1303 W. Kiwi #4				06	04		2012	
	-								
	City S Pharr		Code 577		Transac	tion ID	SB21B	.18342	
	Purpose of Disbursement	1/ /0:	011						
	contract services - salary expenditure			001	Amount o	f Each [Disburse	ment this	Period
	Candidate Name			Category/	100	-	-		
				Type		7		500	06.94
	Office Sought: House Disburser	nent For:							
	Senate	Primary	General						
	President	Other (specify)	▼						
	State: District:								
	Full Name (Last, First, Middle Initial)								
C.	Ms Eliza Alvardo				Date of D	isburser	nent		
					M I M	/ D		YY	Y
	Mailing Address 1303 W. Kiwi #4				06	18		2012	
	City	State Zip	Code						
	Pharr	•	577		Transac	tion ID	SB21B	.18349	
	Purpose of Disbursement								
	contract services - salary expenditure			001	Amount o	f Each [Disburse	ment this	Period
	Candidate Name			Category/					
				Type				500	06.93
	Office Sought: House Disburser	nent For:							
	Senate	Primary	General						
	President	Other (specify)	▼						
_	State: District:								
								1500	0.01
8	SUBTOTAL of Disbursements This Page (optional)			••••••		7	- 1	1502	.0.01
_	OTAL This Period (last nage this line number only)								
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	EMIZED DISBURSEMENTS	Use separate sch		FOR LIN	_				Ľ			<u> </u>	. 55	
11	LIVIIZED DISBURSEWIEN IS	for each category		X 21	,	22		23	24		25		26	
		Detailed Summary	y Page	27		28a	H	28b	280		29		30b	
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	for commercial purposes, other than using the name												,	
\setminus	NAME OF COMMITTEE (In Full)													
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	BONDER HEALTH EDLINET A													
	Full Name (Last, First, Middle Initial)													
Α.	ATT				[Date of	Dis	burse	ment					
						M = M	/	D	D /	Y Y	Υ	Υ		
	Mailing Address P.O. Box 930170				04 30 2012									
	Cit.	7:- 0-	4.		_									
	City :	State Zip Co TX 75393	ae			Transa	acti	on ID	: SB211	3.183	24			
	Purpose of Disbursement	75595			_									
	land lines expenditure			001		Amount	of	Each	Disburs	emen	t this	Perio	od	
	Candidate Name						-	-			-	_		
				Category/ Type				7			254	1.14		
	Office Sought: House Disburser	ment For:			┪ ‐				,					
	Senate	Primary G	eneral											
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	Mailing Address P.O. Box 930170					06		0	5	_ 2	012			
	City	State Zip Co	de		_									
	Dallas	TX 75393				Trans	acti	on ID	: SB21	B.183	43			
	Purpose of Disbursement				_									
	land line expenditure			001	l A	Amount	of	Each	Disburs	emen	t this	Perio	od	
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City MODESTO	State Zip Code CA 95353		Transaction ID:	SB21B.18338
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or	for commercial purposes, other than using the nam	e and add	dress of any politica	al committee to	solicit co	ntributions	from such committee.
\setminus	NAME OF COMMITTEE (In Full)						
$ \rangle$	BORDER HEALTH FEDERAL PAC						
\angle	Full Name (Last, First, Middle Initial)			<u> </u>			
Α.	BERG FOR SENATE				Date o	f Disburse	ement
					M = M	/ D	D / Y Y Y Y Y
	Mailing Address PO BOX 9394				06	Ō	1 2012
	City	State	Zip Code				
	-	ND	58106		Trans	action ID	: SB23.18347
	Purpose of Disbursement contribution						
	Candidate Name			011	Amoun	t of Each	Disbursement this Period
	BERG FOR SENATE			Category/ Type			5000.00
	Office Sought: House Disbursen	nent For:	2012	1,700			7
		Primary	General				
		Other (sp	ecify) 🔻				
_	State: ND District: 00 Full Name (Last, First, Middle Initial)						
В.	BERG FOR SENATE				Date o	f Disburse	ement
-					M = M	/ D	
	Mailing Address PO BOX 9394				06	2	2012
	•	State ND	Zip Code 58106		Trans	saction ID	: SB23.18350
	Purpose of Disbursement						
	contribution			011	Amoun	t of Each	Disbursement this Period
	Candidate Name BERG FOR SENATE			Category/			5000.00
	Office Sought: House Disbursen	nent For:	2012	Туре			-
	Senate	Primary	General				
		Other (spe	ecify) 🔻				
_	State: ND District: 00						
C.	Full Name (Last, First, Middle Initial) DAVID H DEWHURST				Date of	f Disburse	ement
					M M	/ D	
	Mailing Address 1210 SAN ANTONIO STREET SUI	TE 700			06	2	
	•	State	Zip Code		Trans	saction ID	: SB23.18354
	AUSTIN Purpose of Disbursement	TX	78767				
	contribution for special runoff			011	Amoun	t of Fach	Disbursement this Period
	Candidate Name			Category/	, anoun	. o. Laon	
	DAVID H DEWHURST			Type			5000.00
	Office Sought: House Disbursen	nent For: Primary	2012 General				
		Other (sp					
_	State: TX District: 00	\- P	Special-Primary	/			
	·						/5000.00
٤	SUBTOTAL of Disbursements This Page (optional)			·····•			15000.00
١,	OTAL This Period (last page this line number only)						
1 '	(p o o o o o o)						

1mage# 12954224664 PAGE 182 / 188

: 97 A = G7 9 @ G5 B9 CI G'H9 LHF9 @ 5 H98 'HC' 5 F9 DCF HZ G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: SB23

Transaction ID: SB23.18354

Input name error on contribution of 06.22.2012 (\$5K) reflecting Demoncratic Senate Congressional Committee; should have reflected David Dewhurst for Texas. The aforementioned individual/organizations events are nest to

other by line item. Input error on name.

Form/Schedule: Transaction ID:

SCHEDULE B (FEC	Form 3X)				<u> </u>	INIT AT	LIMPER			г	PAGE	183 ()F 1º			
ITEMIZED DISBURSI	•		parate schedule(s)			only o	UMBER: one)	:		Ľ	AGE	100 () TO			
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		Detailed	Summary Page			27	28a	H	28b	28	ic	29	3			
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or for commercial purposes, oth		ne and add	dress of any politi	cal con	nmitte	e to s	solicit co	ntribu	utions	from s	uch co	ommitt	ee.			
NAME OF COMMITTEE (In	•															
angle BORDER HEALTH	FEDERAL PAG	C														
Full Name (Last, First, Middl	e Initial)															
A. JOSE M HERNANI	,						Date o	f Dis	burse	ment						
JOOL WITHLINWAIN	<i>5</i> L2						M M		D	D /	YY	Y	Υ			
Mailing Address PO BOX 16	67						05		02	<u>?</u>	_20	012				
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City MODESTO		State CA	Zip Code 95353				Trans	sactio	on ID	: SB23	.18336	6				
Purpose of Disbursement		<u> </u>	95555													
contribution				0	11	1 Amount of Each Disbursement this Per										
Candidate Name				Cate	egory			-		-		F055	00			
JOSE M HERNAND							,			5000	.00					
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Sena		Primary	General													
State: CA District:	10	Other (sp	ecity) 🔻													
Full Name (Last, First, Middl																
B. MICA FOR CONGR	•						Date o	f Dis	burse	ment						
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		<u> </u>														
City CASSELBERRY		State FL	Zip Code 32718				Trans	sacti	on ID	: SB23	3.18312	2				
Purpose of Disbursement			32710													
contribution				C)11		Amoun	t of I	Each	Disbure	sement	t this F	Period			
Candidate Name				Cate	egory	/			-			E000	.00			
MICA FOR CONGR					ype				7			5000	.00			
Office Sought: House		ment For:														
Sena Presi		Primary Other (spe	General													
State: FL District:	07	Other (op	cony) 🔻													
Full Name (Last, First, Middl	e Initial)															
C. MICA FOR CONGR	•						Date o	f Dis	burse	ment						
							M M	/	D	D /	YY	Υ	Υ			
Mailing Address P. O. BOX	181546						04		03	š	20	012				
City		State	Zip Code													
CASSELBERRY		FL	32718				Trans	sacti	on ID	: SB23	3.18313	3				
Purpose of Disbursement				_	-	_										
contribution				0	11		Amoun	t of I	Each	Disbure	sement	t this F	Period			
Candidate Name	DECC				egory	/			-	-		5000	00			
MICA FOR CONGI		ment For:	2010	Ty	уре	_			7				.00			
Office Sought: Hous		Primary	2012 ✓ General													
Presi		Other (sp														
State: FL District:	07	/ - la	<i>→</i> , ▼													
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SUBTOTAL of Disbursements				•						15000	.00					
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TOTAL This Period (last page	this line number only)				•	Ι.									

SCHEDULE B (FEC	Form 3X)		. ,	FOR LINE	NUMBER:	:	PAGI	E 184 (OF 188
ITEMIZED DISBURSE	EMENTS		parate schedule(s) a category of the	(check only	one)				
			Summary Page	21b	22 28a	23 28b	24 28c	25 29	26 30b
Any information copied from su	ch Reports and States	nents may	not be sold or us						
or for commercial purposes, oth									
NAME OF COMMITTEE (In	Full)								
$ \: angle$ BORDER HEALTH	FEDERAL PAC								
Full Name (Last, First, Middl	e Initial)			1					
A. RAUL DR RUIZ	o milaly				Date of	f Disburse	ment		
					M = M	/ D	D / Y	YY	Υ
Mailing Address 73373 COU	NTRY CLUB DRIVE #1	904			05	02	2	2012	
City	Ç	State	Zip Code						
PALM DESERT		CA	92260		Trans	saction ID	: SB23.183	32	
Purpose of Disbursement contribution						–			
Candidate Name				011	Amoun	t of Each	Disburseme	ent this F	Period
RAUL DR RUIZ				Category/ Type			-	5000	.00
Office Sought: House	se Disbursen	nent For:	2012	i ype	_		- 1		
Sena		Primary	General						
Presi		Other (sp	ecify) ▼						
State: CA District:	36								
Full Name (Last, First, Middle B. RAUL DR RUIZ	e muai)				Date of	f Disburse	ment		
					M = M	/ D		Y	Υ
Mailing Address 73373 COL	JNTRY CLUB DRIVE #	1904			05	2:		2012	
City		State	Zip Code		Trans	saction ID	: SB23.183	37	
PALM DESERT Purpose of Disbursement		CA	92260						
contribution				011	Amoun	t of Each	Disburseme	ent this F	Period
Candidate Name				Category/				5000	00
RAUL DR RUIZ	Diah	aont Fair	2010	Туре		-		5000	
Office Sought: Hous		nent For: Primary	2012 General						
Presi		Other (sp							
State: CA District:	36		· 						
Full Name (Last, First, Middle	,								
C. TEXAS CONSERV	ATIVES FUND					f Disburse			
Mailing Address 815-A BRAZ	ZOS STREET #575				06	22		2012	Y
City		State TX	Zip Code		Trans	saction ID	: SB23.183	51	
AUSTIN Purpose of Disbursement		1 ^	78701						
contribution				011	Amoun	t of Each	Disburseme	ent this F	Period
Candidate Name	(ATI)/EQ EL 13-15			Category/				100000	00
TEXAS CONSERV		aont For	2040	Type				100000	.50
Office Sought: Hous		nent For: Primary	2012 General						
Presi		Other (sp							
State: District:									
								4405	20
SUBTOTAL of Disbursements	This Page (optional)			·····•				110000	.00
TOTAL This David /lost none	this line number or !!!								
TOTAL This Period (last page	uns me number only)					7			

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 185 OF 188			
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(s) (check only one)	*		
	Detailed Summary Page	21b 27	22 X 23 24 28a 28b 28		
Any information copied from such Reports and Statem					
or for commercial purposes, other than using the name					
NAME OF COMMITTEE (In Full)					
BORDER HEALTH FEDERAL PAC	į				
Full Name (Last, First, Middle Initial)					
A. MARC ALLISON VEASEY				Date of Disbursement	
Mailing Address PO BOX 50084	05 01 _2012 _				
	Note 7th Onlin				
•	State Zip Code TX 76105		Transaction ID : SB23	3.18325	
Purpose of Disbursement					
contribution		011	Amount of Each Disburs	sement this Period	
Candidate Name MARC ALLISON VEASEY		Category/ Type		5000.00	
	nent For: 2012	Турс			
	Primary General				
State: TX District: 33	Other (specify) ▼				
Full Name (Last, First, Middle Initial)					
B.			Date of Disbursement		
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Mailing Address					
City	State Zip Code				
Purpose of Disbursement					
i dipose oi bisbuisement			Amount of Each Disburg	sement this Period	
Candidate Name		Category/			
	_	Type			
Office Sought: House Disbursem	nent For: Primary General				
	Other (specify)				
State: District:					
Full Name (Last, First, Middle Initial) C.	Data of Diahumaamant				
			Date of Disbursement	V V V	
Mailing Address			M M / D D /	Y Y Y Y	
City	State Zip Code				
Purpose of Disbursement					
Candidate Name	Catamanul	Amount of Each Disburs	sement this Period		
		Category/ Type			
Office Sought: House Disburserr			,	,	
	Primary General Other (specify)				
State: District:	Offier (specify)				
210.11011					
SUBTOTAL of Disbursements This Page (optional)		·····		5000.00	
				145000.00	
TOTAL This Period (last page this line number only).				145000.00	

SCHEDULE B (FEC Form 3X)	Llea congrata cohedula(a)	FOR LINE N	VOIVIDEIT.	86 OF 18	
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b		23 24 25 26	
	Detailed Suffilliary Page	27	28a 28b 28c 🗙	29 30	
Any information copied from such Reports and Staten or for commercial purposes, other than using the nam					
NAME OF COMMITTEE (In Full)					
angle BORDER HEALTH FEDERAL PAC)				
Full Name (Last, First, Middle Initial)			Date of Disbursement		
 Basilica of Our Lady of San Juan D 	Basilica of Our Lady of San Juan Del Valle			YY	
Mailing Address P.O.Box 747			05 10 2012		
•	State Zip Code		Transaction ID : SB29.18359		
San Juan Purpose of Disbursement	TX 78589		1141134041011115 : 0520:10003		
donation to church		012	Amount of Each Disbursement	this Period	
Candidate Name		Category/		5000.00	
Office Sought: House Disbursen	nent For:	Туре			
	Primary General				
State: District:	Other (specify) ▼				
Full Name (Last, First, Middle Initial)					
•		Date of Disbursement			
Mailing Address		M M / D D / Y Y	Y		
Mailing Address					
City	State Zip Code				
Purpose of Disbursement					
Candidate Name			Amount of Each Disbursement this Period		
Candidate Name		Category/ Type			
Office Sought: House Disbursen	nent For:				
	Primary General Other (specify) ▼				
State: District:	Other (specify)				
Full Name (Last, First, Middle Initial)					
		Date of Disbursement			
Mailing Address			M = M / D = D / Y = Y	YY	
City	State Zip Code				
Purpose of Disbursement					
Candidate Name	Amount of Each Disbursement	this Period			
Candidate Name		Category/ Type			
Office Sought: House Disbursen			7		
	Primary General Other (specify) ▼				
State: District:	oution (opcomy) ▼				
				5000.00	
SUBTOTAL of Disbursements This Page (optional)		······•		5000.00	
				5000.00	

SCHEDULE D (FEC Form 3X) **DEBTS AND OBLIGATIONS**

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE 187 OF 188 FOR LINE NUMBER: (check only one)

9 **X** 10

BO	ME OF COMMITTEE (In Full) ORDER HEALTH FEDERAL PAC			,
	 A. Full Name (Last, First, Middle Initial) of Debtor AC Rentals 	Nature of Debt (Purpose): rental space		
	Mailing Address PO Box 2673			
- 1	City State McAllen	Zip Code TX	78502	
	Outstanding Balance Beginning This Period 900.00			Transaction ID : SD10.9553
	Amount Incurred This Period	Paym	ent This Period	Outstanding Balance at Close of This Period
	0.00		0.00	900.00
	B. Full Name (Last, First, Middle Initial) of Debtor AC Rentals	Nature of Debt (Purpose): rental space		
	Mailing Address PO Box 2673			
- 1	City State McAllen	Zip Code TX	78502	
	Outstanding Balance Beginning This Period 900.00			Transaction ID: SD10.10053
	Amount Incurred This Period 0.00	Paym	ent This Period 0.00	Outstanding Balance at Close of This Period 900.00
	C. Full Name (Last, First, Middle Initial) of Debtor	Nature of Debt (Purpose):		
	Mailing Address	- Nature of Best (Fulpose).		
	City	State	Zip Code	
	Outstanding Balance Beginning This Period			
	Amount Incurred This Period	Paym	ent This Period	Outstanding Balance at Close of This Period
1)	SUBTOTALS This Period This Page (optional)			1800.00
2)	TOTALS This Period (last page this line number	only)		1800.00
٥)				0.00
3)	TOTAL OUTSTANDING LOANS from Schedule C	C (last page only)	0.00

1mage# 12954224670 PAGE 188 / 188

: 97 'A = G7 9 @ G B9 CI G'H9 LH F 9 @ 5 H9 8 'HC '5 'F 9 DC F HZ G7 < 98 I @ 'C F '+ H9 A = N5 H= C B

Form/Schedule: SD10 Transaction ID: SD10.9553

rent expenditure for office for 1st quarter of 2009 incurred but not paid.

Form/Schedule: SD10

Transaction ID: SD10.10053

rent expenditure for office for 1st quarter of 2009 incurred but not paid.