Image# 13962847582 PAGE 1 / 218

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

1 Olliw 0	^ -	or Other Tha	an An Autho	rized Committ	ee		Office Use Only	
1. NAME OF COMMITTEE		TYPE OR PRINT	Г₩	Example: If typo	ng, type	12FE4M5		
BORDER HI	EALTH FEI	DERAL PAG						
								1
ADDRESS (numbe	r and street)	612 W. Nolana	a Suite 340					
Chook if	different							
Check if than prev reported.	viously	McAllen				TX _	78504	
2. FEC IDENTI	FICATION NU	MBER ▼	CITY	<u> </u>		STATE A	ZIP CO	DE 🛦
C C0041	5752		3. IS T REF		NEW (N) OR	× (A)	ENDED	
4. TYPE OF F (Choose One) (a) Quarterly		(b) Monthly Report Due On:	Feb 20		May 20 (M5) Jun 20 (M6)		20 (M8)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only)
_			Apr 20	(M4)	Jul 20 (M7)	Oct 2	20 (M10)	Jan 31 (YE)
April Quar	rterly Report (Q	1) (c) 12-D)av	Primary (12	2)	General (12G)	Runoff (12R)
	rterly Report (Q2	PRE	E-Election ort for the:	Convention		Special (
	bber 15 rterly Report (Q3	3)				Y		
Year	iary 31 -End Report (YE	≣)	Election	on	D D /		in the State o	f
Repo Year	31 Mid-Year ort (Non-election Only) (MY)	POS	Day ST-Election ort for the:	General (30	G)	Runoff (3	0R)	Special (30S)
Term (TEF	nination Report R)		Election	on/	D D /	Y	in the State o	f
5. Covering Peri	od 07	/ 01	2012	through	M M M 09	30	2012	
I certify that I have	e examined this	s Report and to	the best of m	y knowledge and	belief it is tru	e, correct and	I complete.	
Type or Print Nam	ne of Treasurer	Ernie Perez						
Signature of Treas	surer <i>Ernie</i>	Perez		[Electronical	ly Filed] D	ate 06	/ 11 /	2013
NOTE: Submission	of false, errone	ous, or incomple	ete information n	nay subject the pe	son signing th	is Report to th	e penalties of 2 l	J.S.C. §437g.
Office Use							FEC FOR Rev. 12/2	
l Only l			1	1	1	1		

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name BORDER HEALTH FEDERAL PAC 2012 09 30 2012 Report Covering the Period: 07 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 991233.52 January 1, 2012 (b) Cash on Hand at 823801.21 Beginning of Reporting Period..... 357445.18 126836.01 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 950637.22 1348678.70 6(a) and 6(c) for Column B)..... 129962.57 528004.05 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 820674.65 820674.65 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00

Schedule C and/or Schedule D)

10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)

Г				1800.00	

For further information contact:

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

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:						
(a) Individuals/Persons Other						
Than Political Committees	445204.04	317037.14				
(i) Itemized (use Schedule A)	115381.81	317037.14				
(ii) Unitemized	11454.20	35408.04				
(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	126836.01	352445.18				
(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)▶	126836.01	352445.18				
Transfers From Affiliated/Other						
Party Committees	0.00	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.)						
(Carry Totals to Line 37, page 5)	0.00	0.00				
Refunds of Contributions Made						
to Federal Candidates and Other						
Political Committees	0.00	5000.00				
Other Federal Receipts						
(Dividends, Interest, etc.)	0.00	0.00				
Transfers from Non-Federal and Levin Funds						
(a) Non-Federal Account	222					
(from Schedule H3)	0.00	0.00				
	0.00	0.00				
(b) Levin Funds (from Schedule H5)	0.00	0.00				
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00				
Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	126836.01	357445.18				
Total Federal Receipts						
(subtract Line 18(c) from Line 19)▶	126836.01	357445.18				

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		
. Operating Expenditures: (a) Allocated Federal/Non-Federal	10001 11101 101100	Calcinaa IGai-to-Date		
Activity (from Schedule H4)	0.00	0.00		
(i) Federal Share	0.00	0.00		
(ii) Non-Federal Share	0.00	0.00		
(b) Other Federal Operating	64962.57	223004.05		
Expenditures(c) Total Operating Expenditures	04902.57	223004.03		
(add 21(a)(i), (a)(ii), and (b))▶	64962.57	223004.05		
Transfers to Affiliated/Other Party	0.00	0.00		
Contributions to	0.00	0.00		
Federal Candidates/Committees and Other Political Committees	65000.00	255000.00		
Independent Expenditures (use Schedule E)	0.00	0.00		
Coordinated Party Expenditures				
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00		
Loan Repayments Made	0.00	0.00		
Loans Made	0.00	0.00		
Refunds of Contributions To: (a) Individuals/Persons Other		0.00		
` Than Political Committees	0.00	0.00		
(b) Political Party Committees	0.00	0.00		
(c) Other Political Committees (such as PACs)	0.00	0.00		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))▶	0.00	0.00		
(add 2.1100 20(a), (b), and (b),				
Other Disbursements	0.00	50000.00		
Federal Election Activity (2 U.S.C. §431(20))				
(a) Allocated Federal Election Activity				
(from Schedule H6) (i) Federal Share	0.00	0.00		
· ·	0.00	0.00		
(ii) "Levin" Share(b) Federal Election Activity Paid Entirely	0.00	0.00		
With Federal Funds	0.00	0.00		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00		
Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	129962.57	E20004 0F		
20, 27, 20, 20, 21, 20(u), 28 and 30(c))	129902.37	528004.05		
Total Federal Disbursements				
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	129962.57	528004.05		

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)	126836.01	352445.18
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	126836.01	352445.18
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	64962.57	223004.05
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	64962.57	223004.05

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

FOR LINE NUMBER:						PAGE	6	OF	. :	218
(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	PAC	
Full Name (Last, First, Middle Initial) Dr. Ziad Abdeen Mailing Address 809-A Savannah #3		Date of Receipt 07 17 2012
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 private investor Aggregate Year-to-Date ▼ 375.00	Transaction ID : SA11AI.19060 Amount of Each Receipt this Period 125.00 contribution
Full Name (Last, First, Middle Initial) Dr. Ziad Abdeen Mailing Address 809-A Savannah #3 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 private investor Aggregate Year-to-Date ▼ 500.00	Date of Receipt 08 24 2012 Transaction ID : SA11AI.18707 Amount of Each Receipt this Period 125.00 contribution
Full Name (Last, First, Middle Initial) Dr. Ziad Abdeen Mailing Address 809-A Savannah #3 City McAllen FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: Primary Other (specify) Other (specify)	State Zip Code TX 78504 C Occupation private investor Aggregate Year-to-Date ▼ 625.00	Date of Receipt 09 27 2012 Transaction ID: SA11AI.19062 Amount of Each Receipt this Period 125.00 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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(check only one)										
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		13		14		15	16	3		17

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) Mr. Riad Aboujamous Mailing Address 1217 Fullerton City McAllen FEC ID number of contributing federal political committee.	State Zip Code TX 78504	Date of Receipt 09 27 2012 Transaction ID : SA11AI.19064 Amount of Each Receipt this Period 25.00
Name of Employer selfemployed Receipt For: Primary General Other (specify)	Occupation private investor Aggregate Year-to-Date ▼ 225.00	contribution
Full Name (Last, First, Middle Initial) Charity Abreu Mailing Address 1619 hertiage lane City	State Zip Code	Date of Receipt 07 17 2012
mission FEC ID number of contributing federal political committee. Name of Employer self-employee Receipt For: Primary General	State Zip Code TX 78572 C Occupation physician Aggregate Year-to-Date ▼	Transaction ID : SA11AI.18375 Amount of Each Receipt this Period 250.00 contribution
Other (specify) ▼ Full Name (Last, First, Middle Initial) Charity Abreu Mailing Address 1619 hertiage lane	1750.00	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. Name of Employer self-employee Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	State Zip Code TX 78572 C Occupation physician Aggregate Year-to-Date ▼ 2000.00	Transaction ID : SA11AI.18709 Amount of Each Receipt this Period 250.00 contribution
SUBTOTAL of Receipts This Page (optional)	>	525.00
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	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) Charity Abreu Mailing Address 1619 hertiage lane		Date of Receipt
City mission	State Zip Code TX 78572	09 27 2012 Transaction ID : SA11AI.19065 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer self-employee Receipt For: Primary General	Occupation physician Aggregate Year-to-Date ▼	- contribution
Other (specify) ▼	2250.00	
Full Name (Last, First, Middle Initial) Ricardo Abreu Mailing Address 200 E. Xenops City	State Zip Code	Date of Receipt 07 17 2012 Transaction ID: SA11AI.18376
McAllen FEC ID number of contributing federal political committee.	TX 78504	Amount of Each Receipt this Period
Name of Employer Self employed Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1050.00	- contribution
Full Name (Last, First, Middle Initial) Ricardo Abreu Mailing Address 200 E. Xenops 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 78504	Amount of Each Receipt this Period
Name of Employer Self employed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1200.00	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

FOR LINE	NUMBER	: PAGE	9	OF 218			
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X 11a	11b	11c	12				
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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	State Zip Code TX 78504	Date of Receipt 09 27 2012 Transaction ID : SA11AI.19066 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) Other	C Occupation physician Aggregate Year-to-Date ▼ 1350.00	150.00 contribution
Full Name (Last, First, Middle Initial) Ruben Abreu Mailing Address 104 augusta square City	State Zip Code	Date of Receipt 07 17 2012 Transaction ID : SA11AI.18377
mcallen FEC ID number of contributing federal political committee. Name of Employer self-employee Receipt For: □ Primary □ General □ Other (specify) ▼	TX 78503 C Occupation physician Aggregate Year-to-Date ▼ 1750.00	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 General Other (specify)	State Zip Code TX 78503 C Occupation physician Aggregate Year-to-Date ▼ 2000.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
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)	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) Ruben Abreu		Date of Receipt
Mailing Address 104 augusta square		09 27 2012
City	State Zip Code	Transaction ID : SA11AI.19067
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
self-employee	physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	riggrogate real to bate v	
Other (specify) ▼	2250.00	
Full Name (Last, First, Middle Initial) Juan Aguilera	•	Date of Receipt
Mailing Address 807 North Cage		07 17 _2012 _
City	State Zip Code	Transaction ID : SA11AI.18703
Pharr	TX 78577	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) ▼	1750.00	
Full Name (Last, First, Middle Initial) Juan Aguilera	·	Date of Receipt
Mailing Address 807 North Cage		M = M / D = D / Y = Y = Y
City	State Zip Code	08 24 2012 Transaction ID : SA11AI.18712
Pharr	TX 78577	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) ▼	2000.00	
Other (specify)	2550.00	
SUBTOTAL of Receipts This Page (optional	al)	750.00
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TOTAL This Period (last page this line nun	nber only)	

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OF

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or for commercial purposes, other than using	nd Statements may not be sold or used by any pel the name and address of any political committee	
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERA	AL PAC	
Full Name (Last, First, Middle Initial) 1. Juan Aguilera		Date of Receipt
Mailing Address 807 North Cage		09 27 2012
City	State Zip Code	Transaction ID : SA11AI.19068
Pharr	TX 78577	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) ▼	2250.00	
Full Name (Last, First, Middle Initial) Michael Alleyn		Date of Receipt
Mailing Address 5505 N. 4th		M = M / D = D / Y = Y = Y
City	Ctata 7th Co. L.	07 17 2012
City	State Zip Code	Transaction ID : SA11AI.18380
mcallen	TX 78501	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer	Occupation	contribution
self-employed	private investor	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1750.00	
Full Name (Last, First, Middle Initial) C. Michael Alleyn		Date of Receipt
Mailing Address 5505 N. 4th		08 24 2012
City	State Zip Code	Transaction ID : SA11AI.18715
mcallen	TX 78501	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer	Occupation	contribution
self-employed	private investor	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General		
Other (specify) ▼	2000.00	
SUBTOTAL of Receipts This Page (optional	I)	750.00
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TOTAL This Period (last page this line num	ber 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) Michael Alleyn Mailing Address 5505 N. 4th		Date of Receipt
City mcallen	State Zip Code TX 78501	09 27 2012 Transaction ID : SA11AI.19071 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 ▼ 2250.00	
Full Name (Last, First, Middle Initial) Ms Alex Ambriz Mailing Address 15253 Heather		Date of Receipt
City Harlingen	State Zip Code TX 78552	09 27 2012 Transaction ID : SA11AI.19072 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	25.00
Name of Employer self-employed	Occupation private investor	- contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	
Full Name (Last, First, Middle Initial) Michael Amyx		Date of Receipt
Mailing Address 2108 Mynah	0	07 17 / Y = Y = Y = Y = Y
City mcallen	State Zip Code TX 78501	Transaction ID : SA11AI.18382 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 ▼ 1750.00	contribution
SUBTOTAL of Receipts This Page (optional).		525.00
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) Michael Amyx Mailing Address 2108 Mynah City mcallen	State Zip Code TX 78501	Date of Receipt 08 24 2012 Transaction ID: SA11AI.18717 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 2000.00	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 ▼ 2250.00	Date of Receipt 9 27 2012 Transaction ID: SA11AI.19073 Amount of Each Receipt this Period 250.00 contribution		
Full Name (Last, First, Middle Initial) Dr. Jumar B. Apolinario Mailing Address 2805 Santa Erica 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 physicain Aggregate Year-to-Date ▼ 300.00	Date of Receipt 09 27 2012 Transaction ID : SA11AI.19074 Amount of Each Receipt this Period 100.00 contribution		
	I	600.00		

FOR LINE NUMBER: PAGE 14 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)	ng the name and address of any political committee	e to solicit contributions from such committee.
BORDER HEALTH FEDERA	AL PAC	
Full Name (Last, First, Middle Initial) Dr. Edwardo Aquino		Date of Receipt
Mailing Address 112 E. Xenops		07 17 2012
City	State Zip Code	Transaction ID : SA11AI.18383
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	physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	1.55.554.5 104.15 24.6 1	1
Other (specify) ▼	800.00	
Full Name (Last, First, Middle Initial) 3. Dr. Edwardo Aquino		Date of Receipt
Mailing Address 112 E. Xenops		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	08 24 2012 Transaction ID : SA11Al.18719	
Mcallen	State Zip Code TX 78504	Amount of Each Receipt this Period
FEC ID number of contributing		Table of East (1888) this i should
federal political committee.	C	50.00
Name of Employer	Occupation	contribution
selfemployed	physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		1
Other (specify) ▼	850.00	
Full Name (Last, First, Middle Initial) Dr. Edwardo Aquino	·	Date of Receipt
Mailing Address 112 E. Xenops		M = M / D = D / Y = Y = Y
City	State Zip Code	09 27 2012
Mcallen	TX 78504	Transaction ID : SA11AI.19075 Amount of Each Receipt this Period
		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) ▼	900.00	
Other (specify)	900.00	
SUBTOTAL of Receipts This Page (option	al)	150.00
Sing Copiloti	,	
TOTAL This Period (last page this line nur	mber only)	

FOR LINE NUMBER: PAGE 15 OF 218 Use separate schedule(s) for each category of the Detailed Summary Page

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		13		14		15		16		17

	e name and address of any political committee to	
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	PAC	
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) Eull Name (Last First Middle Initial)	State Zip Code TX 78504 C Occupation physician Aggregate Year-to-Date ▼ 1750.00	Date of Receipt 07 17 2012 Transaction ID: SA11AI.18384 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 ▼ 2000.00	Date of Receipt 08 24 2012 Transaction ID: SA11AI.18720 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 ▼ 2250.00	Date of Receipt 9 27 2012 Transaction ID: SA11AI.19076 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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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) Daisy Arce Date of Receipt Mailing Address 129 Bluebird 2012 City State Zip Code Transaction ID: SA11AI.18385 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 350.00 Other (specify) Full Name (Last, First, Middle Initial) B. Daisy Arce Date of Receipt Mailing Address 129 Bluebird 80 24 2012 City State Zip Code Transaction ID: SA11AI.18721 TX 78504 Mcallen Amount of Each Receipt this Period FEC ID number of contributing 50.00 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) Daisy Arce		Date of Receipt
Mailing Address 129 Bluebird		09 27 2012
City	State Zip Code	Transaction ID : SA11AI.19077
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	physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	450.00	

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or for commercial purposes, other than using the	statements may not be sold or used by any perse name and address of any political committee to	
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL I	PAC	
Full Name (Last, First, Middle Initial) Dr. Julio Arias-Viaud Mailing Address 2600 Santa Paula		Date of Receipt
	Otata 7. O	08 24 2012
City Mission	State Zip Code TX 78572	Transaction ID : SA11AI.18723
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer	Occupation	contribution
selfemployed	private investor	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
	7	
Full Name (Last, First, Middle Initial) 3. Dr. Julio Arias-Viaud		Date of Receipt
Mailing Address 2600 Santa Paula		M = M / D = D / Y = Y = Y
City	State Zip Code	09 27 2012 Transaction ID : SA11Al.19079
Mission	TX 78572	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	100.00
Name of Employer	Occupation	contribution
selfemployed	private investor	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) C. Alejandro Arizmendi		Date of Receipt
Mailing Address 307 N 'D' Salinas Blvd		09 27 2012
City	State Zip Code	Transaction ID : SA11AI.19080
Donna	TX 78537	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer	Occupation	contribution
selfemployed	physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	225.00	
SUBTOTAL of Receipts This Page (optional)	•	225.00
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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. Pedro Arrazola Mailing Address 5114 N. 10th Street		Date of Receipt
City	State Zip Code	08 24 2012 Transaction ID : SA11Al.18725
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	private investor	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Dr. Pedro Arrazola Mailing Address 5114 N. 10th Street		Date of Receipt
		09 27 2012
City	State Zip Code	Transaction ID : SA11AI.19081
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	private investor	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) Dr. Danilo Asase		Date of Receipt
Mailing Address 5216 Kensington Lane		09 27 2012
City Brownsville	State Zip Code TX 78526	Transaction ID : SA11AI.19082 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) ▼	300.00	
SUBTOTAL of Receipts This Page (optional)	>	300.00
TOTAL This Period (last page this line number	r only)	

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NAME OF COMMITTEE (In Full)	g the name and address of any political committee	e to solicit contributions from such committee.
BORDER HEALTH FEDERA	AL PAC	
Full Name (Last, First, Middle Initial) Dr. Marilyn Assistores		Date of Receipt
Mailing Address 2222 La Condesa Drive		08 24 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.18727
Edinburg	TX 78539	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer	Occupation	contribution
selfemployed	private investor	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	, aggregate real to bate v	
Other (specify) ▼	225.00	
Full Name (Last, First, Middle Initial) Dr. Marilyn Assistores		Date of Receipt
Mailing Address 2222 La Condesa Drive		09 27 2012
City	State Zip Code	Transaction ID : SA11AI.19083
Edinburg	TX 78539	Amount of Each Receipt this Period
FEC ID number of contributing	0	
federal political committee.	C	75.00
Name of Employer	Occupation	contribution
selfemployed	'	
Receipt For:	private investor	
Primary General	Aggregate Year-to-Date ▼	.
Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial)	ı	Date of Receipt
Mailing Address 104 W. 20th Street		M = M / D = D / Y = Y = Y
City	State Zip Code	07 17 2012
Weslaco	TX 78596	Transaction ID : SA11AI.18391
		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	contribution
self-employed	doctor	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	1000.00	1
Other (specify) ▼	1000.00	
SUBTOTAL of Receipts This Page (optiona	ıl)	400.00
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for each category of the 12 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) Dr. Felipe Avila Date of Receipt Mailing Address 104 W. 20th Street 80 2012 24 City State Zip Code Transaction ID: SA11AI.18730 TX Weslaco 78596 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. contribution Name of Employer Occupation self-employed doctor Receipt For: Aggregate Year-to-Date ▼ Primary General 1250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Felipe Avila Date of Receipt Mailing Address 104 W. 20th Street 09 2012 27 City State Zip Code Transaction ID: SA11AI.19085 TX Weslaco 78596 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. contribution Name of Employer Occupation self-employed doctor Receipt For: Aggregate Year-to-Date ▼ Primary General 1500.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Dr. Roberto A, Ayers Date of Receipt Mailing Address 1900 S. Jackson #7 09 27 2012 City State Zip Code Transaction ID: SA11AI.19087 TX McAllen 78501 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 300.00 Other (specify)

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	Statements may not be sold or used by any persone name and address of any political committee to	
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	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 ▼ 2800.00	Date of Receipt 17 2012 Transaction ID: SA11AI.18393 Amount of Each Receipt this Period 400.00 contribution
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 ▼ 3200.00	Date of Receipt 08
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 ▼ 3600.00	Date of Receipt M
SUBTOTAL of Receipts This Page (optional)	>	1200.00
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NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERA	AL PAC	
Full Name (Last, First, Middle Initial) Ms Susan Bajus Mailing Address 5705 North 4th		Date of Receipt
		07 17 7 2012
City	State Zip Code TX 78504	Transaction ID : SA11AI.18394
McAllen	10004	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer	Occupation	contribution
selfemployed	private investor	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00 0	
Other (specify) ▼	270.00	
Full Name (Last, First, Middle Initial) 3. Ms Susan Bajus		Date of Receipt
Mailing Address 5705 North 4th		08 24 _2012 _
City	State Zip Code	08 24 2012 Transaction ID : SA11AI.18734
McAllen	TX 78504	Amount of Each Receipt this Period
FEC ID number of contributing		T
federal political committee.	C	10.00
Name of Employer	Occupation	contribution
selfemployed	private investor	
Receipt For:		\dashv
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	280.00	
Full Name (Last, First, Middle Initial) C. Ms Susan Bajus	'	Date of Receipt
Mailing Address 5705 North 4th		09 27 2012
City	State Zip Code	7 2012 Transaction ID : SA11Al.19089
McAllen	TX 78504	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer	Occupation	contribution
selfemployed	private investor	_
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	290.00	
Other (specify) ▼	290.00	
SUBTOTAL of Receipts This Page (optional	al)	30.00
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TOTAL This Period (last page this line nur.	mber only)	

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or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	g the name and address of any political committee	e to solicit contributions from such committee.
BORDER HEALTH FEDERA	AL PAC	
Full Name (Last, First, Middle Initial) Cayetano Barrera		Date of Receipt
Mailing Address 501 Mockingbird Lane		07 17 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.18395
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	Aggregate real-to-bate ▼	
Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initial) Cayetano Barrera		Date of Receipt
Mailing Address 501 Mockingbird Lane		08 24 2012
City	State Zip Code	Transaction ID : SA11AI.18735
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) ▼	400.00	
Full Name (Last, First, Middle Initial) Cayetano Barrera		Date of Receipt
Mailing Address 501 Mockingbird Lane		09 27 2012
City	State Zip Code	Transaction ID : SA11AI.19090
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) ▼	450.00	
SUBTOTAL of Receipts This Page (optiona)	150.00
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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) Mr. Marcos Barrera Mailing Address 3000 Yellowhammer		Date of Receipt
City mcallen	State Zip Code TX 78504	07 17 2012 Transaction ID : SA11AI.18396 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer self-employed	Occupation private investor	- contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 875.00	
Full Name (Last, First, Middle Initial) Mr. Marcos Barrera Mailing Address 3000 Yellowhammer		Date of Receipt
City mcallen	State Zip Code TX 78504	08 24 2012 Transaction ID : SA11AI.18736 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	125.00
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) Mr. Marcos Barrera		Date of Receipt
Mailing Address 3000 Yellowhammer	Old to	09 27 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.19091 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 private investor Aggregate Year-to-Date ▼ 1125.00	. contribution
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	. PAC	
Full Name (Last, First, Middle Initial) A. Ricardo Barrera Mailing Address 420 Frio		Date of Receipt
City mission	State Zip Code TX 78572	7 17 2012 Transaction ID : SA11AI.18397
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 250.00
Name of Employer self-employed Receipt For: Primary General	Occupation physician Aggregate Year-to-Date ▼ 1750.00	contribution
Full Name (Last, First, Middle Initial) Ricardo Barrera Mailing Address 420 Frio	1730.00	Date of Receipt
City mission FEC ID number of contributing federal political committee.	State Zip Code TX 78572	08 24 2012 Transaction ID : SA11AI.18737 Amount of Each Receipt this Period 250.00
Name of Employer self-employed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 2000.00	contribution
Full Name (Last, First, Middle Initial) Ricardo Barrera Mailing Address 420 Frio 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
mission FEC ID number of contributing federal political committee.	TX 78572	Amount of Each Receipt this Period 250.00
Name of Employer self-employed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 2250.00	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	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	PAC	
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	State Zip Code TX 78504 C Occupation physician	Date of Receipt 07 17 2012 Transaction ID: SA11Al.18398 Amount of Each Receipt this Period 400.00 contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2800.00	
Full Name (Last, First, Middle Initial) Dr. Sebrahmanyan Behara Mailing Address 121 Cardinal	State 7in Codo	Date of Receipt 08 24 2012
City mcallen FEC ID number of contributing federal political committee.	State Zip Code TX 78504	Transaction ID : SA11AI.18738 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 ▼ 3200.00	- contribution
Full Name (Last, First, Middle Initial) Dr. Sebrahmanyan Behara Mailing Address 121 Cardinal City	State Zip Code	Date of Receipt M M / D D / Y Y Y Y Y 09 27 2012 Transaction ID: SA11AL19993
mcallen 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 ▼ 3600.00	Transaction ID : SA11AI.19093 Amount of Each Receipt this Period 400.00 contribution
SUBTOTAL of Receipts This Page (optional)	>	1200.00
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NAME OF COMMITTEE (In Full) BORDER HEALTH FEDER	AL PAC	
Full Name (Last, First, Middle Initial) Juan Bernini		Date of Receipt
Mailing Address 2804 Santa Ana		07 17 2012 T
City	State Zip Code	Transaction ID : SA11AI.18399
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
self-employed	physician	
Receipt For:		_
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	1750.00	
Full Name (Last, First, Middle Initial) 3. Juan Bernini	•	Date of Receipt
Mailing Address 2804 Santa Ana		08 24 2012
City	State Zip Code	Transaction ID : SA11AI.18740
mission	TX 78574	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:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	2000.00	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address 2804 Santa Ana		09 27 2012
City	State Zip Code	Transaction ID : SA11AI.19095
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
self-employed	physician	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	Aggregate roar to bate ¥	
Other (specify)	2250.00	
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NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	_ PAC			
Full Name (Last, First, Middle Initial) Sarojini Bose Mailing Address 7007 N 1st Lane		Date of Receipt		
City mcallen	State Zip Code TX 78504	07 17 2012 Transaction ID : SA11AI.18401 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 ▼ 1750.00			
Full Name (Last, First, Middle Initial) Sarojini Bose Mailing Address 7007 N 1st Lane	Sarojini Bose			
City mcallen	State Zip Code TX 78504	7 Transaction ID : SA11AI.18741 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 ▼ 2000.00			
Full Name (Last, First, Middle Initial) Sarojini Bose		Date of Receipt		
Mailing Address 7007 N 1st Lane		09 27 Y 2012		
City mcallen	State Zip Code TX 78504	Transaction ID : SA11AI.19096 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 ▼ 2250.00	_ contribution		
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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) Francisco Bracamontes Mailing Address 2005 Cimarron Court		Date of Receipt
City mission	State Zip Code TX 78572	07 17 2012 Transaction ID : SA11AI.18402 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 ▼ 1900.00	
Full Name (Last, First, Middle Initial) Francisco Bracamontes Mailing Address 2005 Cimarron Court	Otata Zin Onda	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.18742 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) Francisco Bracamontos	2300.00	Data of Receipt
Mailing Address 2005 Cimarron Court		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 mission FEC ID number of contributing	State Zip Code TX 78572	Transaction ID : SA11AI.19097 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 ▼ 2700.00	
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	and Statements may not be sold or used by any peling the name and address of any political committee	
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERA	AL PAC	
Full Name (Last, First, Middle Initial) Dr. Yvonne Bracamontes Mailing Address 2005 Cimarron Court		Date of Receipt
Mailing Address 2005 Cimarron Court		07 17 2012
City	State Zip Code TX 78572	Transaction ID : SA11AI.18403
Mission	10012	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)	350.00	
Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initial) 3. Dr. Yvonne Bracamontes		Date of Receipt
Mailing Address 2005 Cimarron Court		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	08 24 2012
Mission	TX 78572	Transaction ID : SA11AI.18743 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 ▼	7
Primary General	00 0	
Other (specify) ▼	400.00	
Full Name (Last, First, Middle Initial) Dr. Yvonne Bracamontes		Date of Receipt
Mailing Address 2005 Cimarron Court		09 27 2012
City	State Zip Code	Transaction ID : SA11AI.19098
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	450.00	
Other (specify) ▼	450.00	
SUBTOTAL of Receipts This Page (options	al)	150.00
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TOTAL This Period (last page this line nur	mber 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	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) Robert Brace Mailing Address 2000 N. 8th Street		Date of Receipt
City mcallen	State Zip Code TX 78501	07 17 2012 Transaction ID : SA11AI.18404 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 ▼ 2800.00	
Full Name (Last, First, Middle Initial) Robert Brace Mailing Address 2000 N. 8th Street		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.18744 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 ▼ 3200.00	- contribution
Full Name (Last, First, Middle Initial) Dr. Erasto Canales Mailing Address 105 Bluebird City	State Zip Code	Date of Receipt 07 17 2012 Transaction ID: SA11AI.18406
McAllen FEC ID number of contributing federal political committee.	TX 78504	Amount of Each Receipt this Period
Name of Employer self-employed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 250.00	. contribution
SUBTOTAL of Receipts This Page (optional)	<u> </u>	925.00
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. Erasto Canales Mailing Address 105 Bluebird		Date of Receipt
City McAllen	State Zip Code TX 78504	08 24 2012 Transaction ID : SA11AI.18746 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	125.00
Name of Employer self-employed	Occupation physician	- contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) Dr. Erasto Canales Mailing Address 105 Bluebird		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.19100 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	125.00
Name of Employer self-employed	Occupation physician	contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Desi Canals		Date of Receipt
Mailing Address 1912 Trinity	7. 6	09 27 2012
City Mission	State Zip Code TX 78574	Transaction ID : SA11AI.19102 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer Self employed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 225.00	_ contribution
SUBTOTAL of Receipts This Page (optional).	>	275.00
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	. 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	07 17 2012 Transaction ID : SA11AI.18409 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 ▼ 2800.00	- contribution
Full Name (Last, First, Middle Initial) Alonzo Cantu Mailing Address P.O.Box 2673	State Zin Code	Date of Receipt 08 24 2012
City mcallen FEC ID number of contributing federal political committee.	State Zip Code TX 78502	Transaction ID : SA11AI.18749 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 ▼ 3200.00	- contribution
Full Name (Last, First, Middle Initial) Alonzo Cantu Mailing Address P.O.Box 2673 City	State Zip Code	Date of Receipt M M / 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 ▼ 3600.00	contribution
SUBTOTAL of Receipts This Page (optional)	<u> </u>	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) Dr. Leonel Cantu Mailing Address 2102 Deborah		Date of Receipt
City Edinburg	State Zip Code TX 78539	07 17 2012 Transaction ID : SA11AI.18411 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer	Occupation	50.00 contribution
Self employed Receipt For: Primary General Other (specify) ▼	physician Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Dr. Leonel Cantu Mailing Address 2102 Deborah		Date of Receipt 08 24 2012
City Edinburg FEC ID number of contributing	State Zip Code TX 78539	Transaction ID : SA11AI.18751 Amount of Each Receipt this Period
federal political committee. Name of Employer Self employed	Occupation physician	50.00 contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) Dr. Leonel Cantu Mailing Address 2102 Deborah		Date of Receipt
City Edinburg	State Zip Code TX 78539	09 27 2012 Transaction ID : SA11AI.19105 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00 contribution
Name of Employer Self employed Receipt For:	Occupation physician Aggregate Year-to-Date ▼	,
Primary General Other (specify) ▼	450.00	
SUBTOTAL of Receipts This Page (optional).	•	150.00
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) Ms Melissa Cantu Mailing Address 1201 S. Gumwood		Date of Receipt
City	State Zip Code	07 17 2012 Transaction ID : SA11AI.18412
Pharr FEC ID number of contributing federal political committee.	TX 78577	Amount of Each Receipt this Period 50.00
Name of Employer	Occupation	contribution
self-employee Receipt For: Primary General Other (specify) ▼	private investor Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Ms Melissa Cantu Mailing Address 1201 S. Gumwood		Date of Receipt 08 24 2012
City Pharr	State Zip Code TX 78577	08 24 2012 Transaction ID : SA11AI.18752 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer self-employee	Occupation private investor	contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) C. Ms Melissa Cantu		Date of Receipt
Mailing Address 1201 S. Gumwood		09 27 2012
City Pharr	State Zip Code TX 78577	Transaction ID : SA11AI.19106 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 ▼ 450.00	- contribution
SUBTOTAL of Receipts This Page (optional)		150.00
TOTAL This Period (last page this line number	r only)	

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	statements may not be sold or used by any personal particle and address of any political committee to	
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL I	PAC	
Full Name (Last, First, Middle Initial) Dr. Joseph Caporusso Mailing Address 217 E. Yellowhammer City State Zip Code		Date of Receipt 08 24 2012 Transaction ID: SA11AI.18754
McAllen	TX 78504	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00 contribution
Name of Employer	Occupation	
self-employed	physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) 3. Dr. Joseph Caporusso Mailing Address 247 5 M H. J.		Date of Receipt
Mailing Address 217 E. Yellowhammer	I	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	09 27 2012 Transaction ID : SA11AI.19108 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 76304	100.00
Name of Employer	Occupation	contribution
self-employed	physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) Carlos Cardenas		Date of Receipt
Mailing Address 1000 N. Taylor Road		07 17 2012
City	State Zip Code	Transaction ID : SA11AI.18415
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) ▼	2800.00	
SUBTOTAL of Receipts This Page (optional)		600.00
TOTAL This Period (last page this line number	<u> </u>	

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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) Carlos Cardenas Mailing Address 1000 N. Taylor Road		Date of Receipt			
City mcallen	State Zip Code TX 78501	08 24 2012 Transaction ID : SA11AI.18755 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 ▼ 3200.00				
Full Name (Last, First, Middle Initial) Carlos Cardenas Mailing Address 1000 N. Taylor Road		Date of Receipt M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y			
City mcallen	State Zip Code TX 78501	Transaction ID : SA11AI.19109 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 ▼ 3600.00				
Full Name (Last, First, Middle Initial) Jose Carreras		Date of Receipt			
Mailing Address 1016 E. Griffin Parkway		07 17 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.18416 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 ▼ 2800.00	. 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 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) Jose Carreras Mailing Address 1016 E. Griffin Parkway		Date of Receipt				
City mission	State Zip Code TX 78572	08 24 2012 Transaction ID : SA11AI.18756 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 physician Aggregate Year-to-Date ▼ 3200.00	- contribution				
Full Name (Last, First, Middle Initial) 3. Jose Carreras Mailing Address 1016 E. Griffin Parkway	Chata	Date of Receipt 09 27 2012				
City mission FEC ID number of contributing federal political committee.	State Zip Code TX 78572	Transaction ID : SA11AI.19110 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 ▼ 3600.00	- contribution				
Full Name (Last, First, Middle Initial) Marissa Castaneda Mailing Address 5021 Elk Lane City	State Zip Code	Date of Receipt 07 17 2012 Transaction ID: SA11AI.18417				
Edinburg FEC ID number of contributing federal political committee.	TX 78539	Amount of Each Receipt this Period 50.00				
Name of Employer self-employed Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation private investor Aggregate Year-to-Date ▼ 350.00	- contribution				
SUBTOTAL of Receipts This Page (optional)	>	850.00				
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) Marissa Castaneda Mailing Address 5021		Date of Receipt
Mailing Address 5021 Elk Lane	Ctata 7'- 0	08 24 2012
City Edinburg	State Zip Code TX 78539	Transaction ID : SA11Al.18757 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 50.00
Name of Employer	Occupation private investor	contribution
self-employed Receipt For: □ Primary □ General Other (specify) ▼	private investor Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) Marissa Castaneda Mailing Address 5021 Elk Lane City	State Zin Codo	Date of Receipt 09 27 2012
City Edinburg	State Zip Code TX 78539	Transaction ID : SA11AI.19111 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 76339	Amount of Each Receipt this Period
Name of Employer self-employed	Occupation private investor	contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
Full Name (Last, First, Middle Initial) C. Augusto Castrillon		Date of Receipt
Mailing Address 223 Rio Grande Drive		07 17 2012
City mission	State Zip Code TX 78572	Transaction ID : SA11AI.18418 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 ▼ 1750.00	contribution
SUBTOTAL of Receipts This Page (optional)		350.00
TOTAL This Period (last page this line number	· 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) A. Augusto Castrillon		Date of Receipt
Mailing Address 223 Rio Grande Drive		08 24 2012
City	State Zip Code	Transaction ID : SA11AI.18759
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 ▼	1
Primary General	00 0	
Other (specify) ▼	2000.00	
Full Name (Last, First, Middle Initial) Augusto Castrillon		Date of Receipt
Mailing Address 223 Rio Grande Drive		M = M / D = D / Y = Y = Y
City	State Zip Code	09 27 2012
City mission	TX 78572	Transaction ID : SA11AI.19113
	10012	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 ▼	7
Primary General Other (specify) ▼	2250.00	
Full Name (Last, First, Middle Initial) C. Norma Cavazos-Salas		Date of Receipt
Mailing Address 2301 N. Bryan Road		07 17 2012
City	State Zip Code	Transaction ID : SA11AI.18419
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:	Aggregate Year-to-Date ▼	7
Primary General		1
Other (specify) ▼	875.00	
SUBTOTAL of Receipts This Page (optional)	625.00
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TOTAL This Period (last page this line number	ber 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) Norma Cavazos-Salas Mailing Address 2301 N. Bryan Road		Date of Receipt
City mission	State Zip Code TX 78572	08 24 2012 Transaction ID : SA11AI.18760 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00 contribution
Name of Employer self-employed Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Norma Cavazos-Salas Mailing Address 2301 N. Bryan 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 mission FEC ID number of contributing federal political committee.	State Zip Code TX 78572	Transaction ID : SA11AI.19114 Amount of Each Receipt this Period 125.00
Name of Employer self-employed Receipt For:	Occupation physician Aggregate Year-to-Date ▼	contribution
Primary General Other (specify) ▼	1125.00	
Full Name (Last, First, Middle Initial) R. Chandrarasekharan Mailing Address 1210 East 8th street suite 1 City	State Zip Code TX 78591	Date of Receipt 07 17 2012 Transaction ID : SA11AI.18421
weslaco FEC ID number of contributing federal political committee.	TX 78591	Amount of Each Receipt this Period 125.00
Name of Employer self-employed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 875.00	contribution
SUBTOTAL of Receipts This Page (optional)	<u> </u>	375.00
TOTAL This Period (last page this line number	or 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) 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) Eull Name (Last, First, Middle Initial)	State Zip Code TX 78591 C Occupation physician Aggregate Year-to-Date ▼ 1000.00	Date of Receipt 08 24 2012 Transaction ID: SA11AI.18761 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 General Other (specify) Other (specify)	State Zip Code TX 78591 C Occupation physician Aggregate Year-to-Date ▼ 1125.00	Date of Receipt 09 27 2012 Transaction ID: SA11AI.19115 Amount of Each Receipt this Period 125.00 contribution
Full Name (Last, First, Middle Initial) Mr. Roel Contreras Mailing Address 1609 Harvey City McAllen FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: Primary Other (specify) Other (specify)	State Zip Code TX 78501 C Occupation private investor Aggregate Year-to-Date ▼ 225.00	Date of Receipt M M M / D D / Y D Y 2012 Transaction ID: SA11AI.19116 Amount of Each Receipt this Period 25.00 contribution
SUBTOTAL of Receipts This Page (optional)	>	275.00
TOTAL This Period (last page this line number	er only)	

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Any information copied from such Reports and or for commercial purposes, other than using to	I Statements may not be sold or used by any per the name and address of any political committee to	son for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	- PAC	
Full Name (Last, First, Middle Initial) Dr. Virah Cooper Mailing Address 1801 South 5th Street suite	7	Date of Receipt
		07 17 2012
City	State Zip Code	Transaction ID : SA11AI.18423
McAllen	TX 78503	_ 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) ▼	700.00	
Full Name (Last, First, Middle Initial) 3. Dr. Virah Cooper		Date of Receipt
Mailing Address 1801 South 5th Street suite		08 24 2012
City	State Zip Code	Transaction ID : SA11AI.18763
McAllen	TX 78503	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) ▼	800.00	
Full Name (Last, First, Middle Initial) Dr. Virah Cooper		Date of Receipt
Mailing Address 1801 South 5th Street suite		09 27 2012
City	State Zip Code	Transaction ID : SA11AI.19117
McAllen	TX 78503	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	100.00
Name of Employer	Occupation	_ contribution
self-employee	physician	_
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	900.00	
SUBTOTAL of Receipts This Page (optional).		300.00
TOTAL This Period (last page this line numb	<u>^</u>	

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

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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	PAC	
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	07 17 2012 Transaction ID : SA11AI.18424 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00 contribution
Name of Employer Self employed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 700.00	
Full Name (Last, First, Middle Initial) Dr. Oscar Cortez Mailing Address 4101 South Burns Drive	Choto 77-0	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.18764 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 ▼ 800.00	contribution
Full Name (Last, First, Middle Initial) Dr. Oscar Cortez Mailing Address 4101 South Burns Drive		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.19118 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 ▼ 900.00	contribution
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number	<u>·</u>	300.00
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 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	07 17 2012 Transaction ID : SA11AI.18425
mcallen FEC ID number of contributing federal political committee.	TX 78504	Amount of Each Receipt this Period 200.00
Name of Employer self-employed	Occupation physician	- contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1230.60	
Full Name (Last, First, Middle Initial) Diana Cortinas Mailing Address 1400 Northgate Lane		Date of Receipt 08 24 2012
City mcallen	State Zip Code TX 78504	Transaction ID : SA11AI.18765 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	200.00
Name of Employer self-employed	Occupation physician	contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.60	
Full Name (Last, First, Middle Initial) Diana Cortinas		Date of Receipt
Mailing Address 1400 Northgate Lane	7. 6	09 27 2012
City mcallen	State Zip Code TX 78504	Transaction ID : SA11AI.19119 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer self-employed Receipt For: Primary General Other (specify)	Occupation physician Aggregate Year-to-Date ▼ 1630.60	_ contribution
SUBTOTAL of Receipts This Page (optional).	• • • • • • • • • • • • • • • • • • •	600.00
TOTAL This Period (last page this line numb	er only)	7

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 to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	- PAC	
Full Name (Last, First, Middle Initial) Guillermo Cortinas Mailing Address 1224 Northgate Lane		Date of Receipt
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 ▼ 949.07	Transaction ID : SA11AI.18426 Amount of Each Receipt this Period 50.00 contribution
Full Name (Last, First, Middle Initial) Guillermo Cortinas Mailing Address 1224 Northgate Lane City mcallen FEC ID number of contributing	State Zip Code TX 78504	Date of Receipt M
federal political committee. Name of Employer self-employed Receipt For: Primary General Other (specify)	Occupation physician Aggregate Year-to-Date ▼	50.00 contribution
Full Name (Last, First, Middle Initial) Guillermo Cortinas Mailing Address 1224 Northgate Lane City mcallen	State Zip Code TX 78504	Date of Receipt M = M / D = D / Y = Y = Y 09
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 ▼ 1049.07	Amount of Each Receipt this Period 50.00 contribution
SUBTOTAL of Receipts This Page (optional).		150.00
TOTAL This Period (last page this line numb	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) Javier Cortinas Mailing Address 1400 Northgate		Date of Receipt
City mcallen FEC ID number of contributing	State Zip Code TX 78504	07 17 2012 Transaction ID : SA11AI.18427 Amount of Each Receipt this Period 250.00
federal political committee. Name of Employer self-employed Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1750.00	contribution
Full Name (Last, First, Middle Initial) Javier Cortinas Mailing Address 1400 Northgate City	State Zip Code	Date of Receipt M M / D D / Y Y Y Y Y 08 24 2012
mcallen FEC ID number of contributing federal political committee. Name of Employer	TX 78504	Transaction ID : SA11AI.18767 Amount of Each Receipt this Period 250.00 contribution
self-employed Receipt For: Primary General Other (specify) ▼	physician Aggregate Year-to-Date ▼ 2000.00	
Full Name (Last, First, Middle Initial) Javier Cortinas Mailing Address 1400 Northgate		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. Name of Employer self-employed Receipt For:	State Zip Code TX 78504 C Occupation physician Aggregate Year-to-Date ▼	Transaction ID : SA11AI.19121 Amount of Each Receipt this Period 250.00 contribution
Primary	2250.00	750.00
TOTAL This Period (last page this line number	r only)	

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Use separate schedule(s) for each category of the	(check only one)	
Detailed Summary Page	X 11a 11b	11c 12
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Full Name (Last, First, Middle Initial) Dr. Hildegardo Costa Mailing Address 129 Bluebird City	- 1 // 0	Date of Receipt
Mailing Address 129 Bluebird City		Date of Receipt
•		M = M / D = D / Y = Y = Y
Moollon	State Zip Code	07 17 2012 Transaction ID : SA11AI.18428
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 Receipt For:	physician	_
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) . Dr. Hildegardo Costa		Date of Receipt
Mailing Address 129 Bluebird		08 24 _2012 _
City	State Zip Code	Transaction ID : SA11AI.18768
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	physician	_
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) . Dr. Hildegardo Costa		Date of Receipt
Mailing Address 129 Bluebird		09 27 _2012 _
City	State Zip Code	Transaction ID : SA11AI.19122
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	physician	
Receipt For: Primary General	Aggregate Year-to-Date ▼	.
Other (specify)	450.00	
	_1	
SUBTOTAL of Receipts This Page (optional).	.	150.00

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) James Darling Mailing Address 1225 E Peking		Date of Receipt
City mcallen	State Zip Code TX 78501	07 17 2012 Transaction ID : SA11AI.18429 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 150.00
Name of Employer selfemployed	Occupation private investor	- contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1050.00	
Full Name (Last, First, Middle Initial) James Darling Mailing Address 1225 E Peking		Date of Receipt
City mcallen	State Zip Code TX 78501	7 Transaction ID : SA11AI.18769 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	150.00
Name of Employer selfemployed	Occupation private investor	contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	
Full Name (Last, First, Middle Initial) James Darling		Date of Receipt
Mailing Address 1225 E Peking	Charles	09 27 2012
City mcallen	State Zip Code TX 78501	Transaction ID : SA11AI.19124 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	150.00
Name of Employer selfemployed Receipt For: Primary General Other (specify) ▼	Occupation private investor Aggregate Year-to-Date ▼ 1350.00	contribution
SUBTOTAL of Receipts This Page (optional)		450.00
TOTAL This Period (last page this line number	er only)	

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or for commercial purposes, other than using	and Statements may not be sold or used by any pering 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. David Deanda		Date of Receipt
Mailing Address 2408 Dorado		07 17 2012
City	State Zip Code	Transaction ID : SA11AI.18431
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
self-employed	private investor	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General	00 0	
Other (specify) ▼	1750.00	
Full Name (Last, First, Middle Initial) 3. David Deanda		Date of Receipt
Mailing Address 2408 Dorado		M M / D D / Y Y Y Y Y
City	State Zip Code	08 24 2012 Transaction ID : \$A11A1 18771
mission	TX 78574	Transaction ID : SA11AI.18771 Amount of Each Receipt this Period
		Amount of Lacif neceipt 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 ▼	
Primary General Other (specify) ▼	2000.00	
Full Name (Last, First, Middle Initial) David Deanda	<u> </u>	Date of Receipt
Mailing Address 2408 Dorado		09 27 2012
City	State Zip Code	Transaction ID : SA11AI.19126
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
self-employed	private investor	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	2250.00	
SUBTOTAL of Receipts This Page (option	al)	750.00
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or for commercial purposes, other than usin	and Statements may not be sold or used by any peng the name and address of any political committee	
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERA	AL PAC	
Full Name (Last, First, Middle Initial) Dr. Carlos De Juana Mailing Address 1105 Zinnia		Date of Receipt
	Chat. 7: 0 1	07 17 2012
City McAllen	State Zip Code TX 78504	Transaction ID : SA11AI.18432 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer	Occupation	contribution
self-employee Receipt For: Primary General	physician Aggregate Year-to-Date ▼	-
Other (specify)	875.00	
Full Name (Last, First, Middle Initial) Dr. Carlos De Juana		Date of Receipt
Mailing Address 1105 Zinnia		08 242012
City	State Zip Code	08 24 2012 Transaction ID : SA11AI.18772
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 (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) C. Dr. Carlos De Juana		Date of Receipt
Mailing Address 1105 Zinnia		09 27 2012
City McAllen	State Zip Code TX 78504	Transaction ID : SA11AI.19127 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	Aggregate Year-to-Date ▼	
Other (specify) ▼	1125.00	
SUBTOTAL of Receipts This Page (ontions	al)	375.00
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TOTAL This Period (last page this line nur.	mber 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	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	State Zip Code TX 78501	7 17 2012 Transaction ID : SA11AI.18433 Amount of Each Receipt this Period
federal political committee. Name of Employer self-employed	Occupation physician	50.00 contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) 3. Dr. Andrew De La Garza Mailing Address 708 South H Street		Date of Receipt 08 24 2012
City McAllen FEC ID number of contributing	State Zip Code TX 78501	Transaction ID : SA11AI.18773 Amount of Each Receipt this Period 50.00
federal political committee. Name of Employer self-employed Receipt For: Primary General	Occupation physician Aggregate Year-to-Date ▼	contribution
Other (specify) ▼ Full Name (Last, First, Middle Initial)	400.00	
Dr. Andrew De La Garza Mailing Address 708 South H Street		Date of Receipt 09 27 2012
City McAllen	State Zip Code TX 78501	Transaction ID : SA11AI.19128 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00 contribution
Name of Employer self-employed Receipt For: Primary General	Occupation physician Aggregate Year-to-Date ▼	
Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)	450.00	150.00
TOTAL This Period (last page this line number	<u></u>	

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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) Jorge De La Garza Mailing Address 120 Condor		Date of Receipt
City	State Zip Code	07 17 2012
City mcallen	State Zip Code TX 78504	Transaction ID : SA11Al.18434 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) ▼	1750.00	
Full Name (Last, First, Middle Initial) 3. Jorge De La Garza		Date of Receipt
Mailing Address 120 Condor		M = M / D = D / Y = Y = Y
City	State Zip Code	08 24 2012 Transaction ID : SA11AI.18774
mcallen	TX 78504	Transaction ID : SA11AI.18774 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 ▼ 2000.00	
Full Name (Last, First, Middle Initial) C. Jorge De La Garza	· · · · · · · · · · · · · · · · · · ·	Date of Receipt
Mailing Address 120 Condor		09 27 2012
City	State Zip Code	Transaction ID : SA11AI.19129
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 ▼	
Primary General Other (specify) ▼	2250.00	
SUBTOTAL of Receipts This Page (ontional		750.00
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TOTAL This Period (last page this line num	nber only)	40

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NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERA	L PAC	
Full Name (Last, First, Middle Initial) Luis Delgado Jr.		Date of Receipt
Mailing Address 5128 N. 10th		07 17 2012
City	State Zip Code	Transaction ID : SA11AI.18436
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: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	
Full Name (Last, First, Middle Initial) Luis Delgado Jr. Mailing Address 5128 N. 10th		Date of Receipt
Maining Address 5128 N. 10th		08 24 _ 2012 _
City	State Zip Code	Transaction ID : SA11AI.18776
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: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1400.00	
Full Name (Last, First, Middle Initial) Luis Delgado Jr.		Date of Receipt
Mailing Address 5128 N. 10th		09 27 2012
City	State Zip Code	Transaction ID : SA11AI.19131
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: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	1550.00	
SUBTOTAL of Receipts This Page (optional	l) >	450.00
TOTAL This Period (last page this line num	ber only)	

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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	AL PAC	
Full Name (Last, First, Middle Initial) Mr. Ted Disque		Date of Receipt
Mailing Address 501 Iris		09 27 2012
City	State Zip Code	Transaction ID : SA11AI.19133
McAllen	TX 78501	_ 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) ▼	225.00	
Full Name (Last, First, Middle Initial) 3. Ms Oneida Elizondo		Date of Receipt
Mailing Address 2411 Durango Drive		M = M / D = D / Y = Y = Y
City	State Zin Code	09 27 2012
City	State Zip Code TX 78572	Transaction ID : SA11AI.19134
Mission	TX 78572	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	25.00
Name of Employer	Occupation	contribution
selfemployed	private investor	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	55 5	
Other (specify) ▼	225.00	
Full Name (Last, First, Middle Initial) . Kotthegal Eshwar		Date of Receipt
Mailing Address 108 Yellow Hammer		07 17 2012
City	State Zip Code	Transaction ID : SA11AI.18440
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	physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	350.00	
SUBTOTAL of Receipts This Page (optional	l)	100.00
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TOTAL This Period (last page this line num	ber 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	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 FEC ID number of contributing	State Zip Code TX 78504	Date of Receipt 08 24 2012 Transaction ID : SA11AI.18781 Amount of Each Receipt this Period			
federal political committee. Name of Employer selfemployed Receipt For: Primary General Other (specify)	Occupation physician Aggregate Year-to-Date 400.00	contribution			
Full Name (Last, First, Middle Initial) Kotthegal Eshwar Mailing Address 108 Yellow Hammer	State 7in Code	Date of Receipt M M / D D / Y Y Y Y Y 09 27 2012 Transaction ID : \$A11A1 10125			
City mcallen FEC ID number of contributing federal political committee. Name of Employer selfemployed Beceipt For:	State Zip Code TX 78504 C Occupation physician	Transaction ID : SA11AI.19135 Amount of Each Receipt this Period 50.00 contribution			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00				
Full Name (Last, First, Middle Initial) Antonio Esparza Mailing Address 136 W. Yucca City mcallent	State Zip Code TX 78504	Date of Receipt 07 17 2012 Transaction ID : SA11AI.18441 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 ▼ 1750.00	Amount of Each Receipt this Period 250.00 contribution			
SUBTOTAL of Receipts This Page (optional)		350.00			
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 to	
NAME OF COMMITTEE (IN Full) BORDER HEALTH FEDERAL	_ PAC	
Full Name (Last, First, Middle Initial) A. Antonio Esparza		Date of Receipt
Mailing Address 136 W. Yucca		08 24 2012
City	State Zip Code	Transaction ID : SA11AI.18782
mcallent	TX 78504	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 ▼ 2000.00	
Full Name (Last, First, Middle Initial) Antonio Esparza		Date of Receipt
Mailing Address 136 W. Yucca		09 27 _ 2012 _
City	State Zip Code	09 27 2012 Transaction ID : SA11AI.19136
mcallent	TX 78504	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: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2250.00	
Full Name (Last, First, Middle Initial) C. Antonio Falcon		Date of Receipt
Mailing Address 2768 Pharmacy Road		08 24 2012
City	State Zip Code	Transaction ID : SA11AI.18783
rio grande city	TX 78582	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	contribution
self-employed	physician	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	300.00	
SUBTOTAL of Receipts This Page (optional)	······	600.00
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Use separate schedule(s) for each category of the Detailed Summary Page

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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) Antonio Falcon Mailing Address 2768 Pharmacy Road		Date of Receipt
City	State Zip Code	09 27 2012 Transaction ID : SA11AI.19137
rio grande city	TX 78582	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	contribution
self-employed	physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) Maria Elena Falcon Mailing Address 2212 Westway	Date of Receipt	
		07 17 2012
City	State Zip Code	Transaction ID : SA11AI.18443
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: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1750.00	
Full Name (Last, First, Middle Initial) Maria Elena Falcon		Date of Receipt
Mailing Address 2212 Westway		08 24 2012
City mcallen	State Zip Code TX 78504	Transaction ID : SA11AI.18784 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) ▼	2000.00	
SUBTOTAL of Receipts This Page (optional)	>	600.00
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) Maria Elena Falcon Mailing Address 2212 Westway		Date of Receipt
City mcallen FEC ID number of contributing federal political committee. Name of Employer	State Zip Code TX 78504 C Occupation	7 2012 Transaction ID : SA11AI.19138 Amount of Each Receipt this Period 250.00 contribution
self-employed Receipt For: Primary General Other (specify)	physician Aggregate Year-to-Date ▼ 2250.00	
Full Name (Last, First, Middle Initial) Dr. Alexander Feigl Mailing Address 110 E. Savannah #101	Date of Receipt 07 17 2012	
City McAllen FEC ID number of contributing federal political committee.	State Zip Code TX 78503	Transaction ID : SA11AI.18705 Amount of Each Receipt this Period 250.00
Name of Employer self-employed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 250.00	- contribution
Full Name (Last, First, Middle Initial) Dr. Alexander Feigl Mailing Address 110 E. Savannah #101 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	TX 78503 C Occupation	Transaction ID : SA11AI.18785 Amount of Each Receipt this Period 250.00 contribution
self-employed Receipt For: Primary General Other (specify) ▼	physician Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)	>	750.00
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Use separate schedule(s) for each category of the Detailed Summary Page

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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) Dr. Alexander Feigl Mailing Address 110 E. Savannah #101		Date of Receipt
City McAllen	State Zip Code TX 78503	09 27 2012 Transaction ID : SA11AI.19139 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 ▼ 750.00	
Full Name (Last, First, Middle Initial) Alberto Felici Mailing Address 2309 W. Greenbriar Square	Date of Receipt 07 172012	
City mcallen	State Zip Code TX 78504	7 17 2012 Transaction ID : SA11AI.18444 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer self-employed	Occupation physician	contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 764.65	
Full Name (Last, First, Middle Initial) Alberto Felici		Date of Receipt
Mailing Address 2309 W. Greenbriar Square	01.1	08 24 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.18786 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 ▼ 864.65	- contribution
SUBTOTAL of Receipts This Page (optional)		450.00
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) Alberto Felici Mailing Address 2309 W. Greenbriar Square		Date of Receipt
City mcallen	State Zip Code TX 78504	09 27 2012 Transaction ID : SA11AI.19140
FEC ID number of contributing federal political committee.	C 78504	Amount of Each Receipt this Period
Name of Employer self-employed	Occupation physician	contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 964.65	
Full Name (Last, First, Middle Initial) Marco Flores Mailing Address 320 Primrose		Date of Receipt
City mcallen	State Zip Code TX 78504	7 17 2012 Transaction ID : SA11AI.18445 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 ▼ 1747.61	
Full Name (Last, First, Middle Initial) Marco Flores		Date of Receipt
Mailing Address 320 Primrose		08 24 2012
City mcallen	State Zip Code TX 78504	Transaction ID : SA11AI.18787 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 ▼ 1997.61	- contribution
SUBTOTAL of Receipts This Page (optional)		600.00
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) Marco Flores Mailing Address 320 Primrose		Date of Receipt
City mcallen	State Zip Code TX 78504	09 27 2012 Transaction ID : SA11AI.19141
FEC ID number of contributing federal political committee.	C	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 ▼ 2247.61	
Full Name (Last, First, Middle Initial) Ms Melissa P. Flores Mailing Address 4420 East Mile 17 1/2		Date of Receipt
City Edinburg	State Zip Code TX 78542	09 27 2012 Transaction ID : SA11AI.19143 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer self-employee	Occupation private investor	contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	
Full Name (Last, First, Middle Initial) Mr. Raymond Franklin		Date of Receipt
Mailing Address 3212 Nightingale Court		07 17 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.18448 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 ▼ 350.00	- contribution
SUBTOTAL of Receipts This Page (optional)		325.00
TOTAL This Period (last page this line number	r only)	

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		te name and address of any political committee to	
	NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	PAC	
A .	Full Name (Last, First, Middle Initial) Mr. Raymond Franklin		Date of Receipt
	Mailing Address 3212 Nightingale Court		08 24 2012
	City	State Zip Code	Transaction ID : SA11AI.18790
	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:	Aggregate Year-to-Date ▼	
	Primary General	Aggregate real to Bate V	
	Other (specify) ▼	400.00	
В.	Full Name (Last, First, Middle Initial) Mr. Raymond Franklin		Date of Receipt
	Mailing Address 3212 Nightingale Court		09 27 2012
	City	State Zip Code	Transaction ID : SA11AI.19144
	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 ▼ 450.00	
<u>-</u>	Full Name (Last, First, Middle Initial) Eugenio Galindo		Date of Receipt
•	Mailing Address 5936 N. Cynthia		07 17 2012
	City	State Zip Code	Transaction ID : SA11AI.18449
	mcallen	TX 78504	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	400.00
	Name of Employer	Occupation	contribution
	self-employed	physician	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General	Aggregate real-to-Date ¥	
	Other (specify) ▼	2800.00	
	SUBTOTAL of Receipts This Page (optional)	<u>·</u> _	500.00

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NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	PAC	
Full Name (Last, First, Middle Initial) Leugenio Galindo Mailing Address 5936 N. Cynthia City	State Zip Code	Date of Receipt 08 24 2012 Transaction ID : SA11AI.18791
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 ▼ 3200.00	Amount of Each Receipt this Period 400.00 contribution
Full Name (Last, First, Middle Initial) Eugenio Galindo Mailing Address 5936 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 ▼ 3600.00	Date of Receipt 99 27 2012 Transaction ID : SA11AI.19145 Amount of Each Receipt this Period 400.00 contribution
Full Name (Last, First, Middle Initial) Elvin Garcia Mailing Address 2800 Santa Teresa 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 78572 C Occupation physician Aggregate Year-to-Date ▼ 1750.00	Date of Receipt O7 17 2012 Transaction ID: SA11AI.18451 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	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) A. Elvin Garcia Mailing Address 2800 Santa Teresa		Date of Receipt
City	State Zip Code	08 24 2012 Transaction ID : SA11AI.18792
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 Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	
Full Name (Last, First, Middle Initial) 8. Elvin Garcia		Date of Receipt
Mailing Address 2800 Santa Teresa	Chata 7' C. I	09 27 2012
City mission	State Zip Code TX 78572	Transaction ID : SA11AI.19146
		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 ▼ 2250.00	
Full Name (Last, First, Middle Initial) . Hiram Garcia		Date of Receipt
Mailing Address 2712 E Mile 5 Road		07 17 2012
City Mission	State Zip Code TX 78574	Transaction ID : SA11AI.18452 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) ▼	1750.00	
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) A. Hiram Garcia Mailing Address 2712 E Mile 5 Road		Date of Receipt
City	State Zip Code	08 24 2012 Transaction ID : SA11AI.18793
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 ▼ 2000.00	
Full Name (Last, First, Middle Initial) Hiram Garcia Mailing Address 2712 E Mile 5 Road		Date of Receipt
City	Stata 7in Cod-	09 27 2012
City Mission	State Zip Code TX 78574	Transaction ID : SA11AI.19147 Amount of Each Receipt this Period
		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 ▼ 2250.00	
Full Name (Last, First, Middle Initial) Dr. Oscar Garcia		Date of Receipt
Mailing Address 1717 Palazzo		07 17 2012
City Mission	State Zip Code TX 78572	Transaction ID : SA11AI.18454 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	400.00
Name of Employer	Occupation	contribution
self-employed	physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	2440.00	
SUBTOTAL of Receipts This Page (optional)		900.00
TOTAL This Period (last page this line number	r only)	

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NAME OF COMMITTEE (In Full)	the name and address of any political committee to	5 Solicit contributions from such committee.
BORDER HEALTH FEDERA	L PAC	
Full Name (Last, First, Middle Initial) Dr. Oscar Garcia Mailing Address 1717 Palazzo		Date of Receipt
City	State Zip Code	08 24 2012 Transaction ID : SA11Al.18795
Mission	TX 78572	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer	Occupation	- contribution
self-employed Receipt For:	physician	_
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2840.00	
Full Name (Last, First, Middle Initial) 3. Dr. Oscar Garcia		Date of Receipt
Mailing Address 1717 Palazzo		09 27 2012
City	State Zip Code	Transaction ID : SA11AI.19149
Mission	TX 78572	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 ▼ 3240.00	
Full Name (Last, First, Middle Initial) Dr. Ricardo Garcia		Date of Receipt
Mailing Address 6108 North 5th Street		08 24 2012
City McAllen	State Zip Code TX 78504	Transaction ID : SA11AI.19018 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer	Occupation	contribution
self-employed	physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	
SUBTOTAL of Receipts This Page (optional)	>	875.00

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or	for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL F	PAC	
Α.	Full Name (Last, First, Middle Initial) Dr. Ricardo Garcia Mailing Address 6108 North 5th Street		Date of Receipt
	City McAllen	State Zip Code TX 78504	09 27 2012 Transaction ID : SA11AI.19151 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	75.00
	Name of Employer self-employed Receipt For: Primary General Other (specify)	Occupation physician Aggregate Year-to-Date ▼ 300.00	contribution
В.	Full Name (Last, First, Middle Initial) Dr. Samuel Garcia Mailing Address 137 E. Guardenia		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. Name of Employer	State Zip Code TX 78501 C Occupation	Transaction ID: SA11AI.18797 Amount of Each Receipt this Period 100.00 contribution
	self-employed Receipt For: Primary General Other (specify) ▼	physician Aggregate Year-to-Date ▼ 300.00	
C.	Full Name (Last, First, Middle Initial) Dr. Samuel Garcia Mailing Address 137 E. Guardenia 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 78501	Amount of Each Receipt this Period 100.00 contribution
	Name of Employer self-employed Receipt For: Primary General Other (specify)	Occupation physician Aggregate Year-to-Date ▼ 400.00	Contribution
s	SUBTOTAL of Receipts This Page (optional)		275.00
т	OTAL This Period (last page this line number of	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) Dr. Carlos Garcia-Cantu Mailing Address 4121 N. 10th #240		Date of Receipt				
		07 17 2012				
City Mcallen	State Zip Code TX 78504	Transaction ID : SA11AI.18450				
	10004	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) ▼	1450.00					
Full Name (Last, First, Middle Initial) 3. Dr. Carlos Garcia-Cantu	<u> </u>	Date of Receipt				
Mailing Address 4121 N. 10th #240		M = M / D = D / Y = Y = Y				
City	State Zip Code	08 24 2012				
Mcallen	TX 78504	Transaction ID : SA11AI.18798 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) ▼	1700.00					
Full Name (Last, First, Middle Initial) Dr. Carlos Garcia-Cantu		Date of Receipt				
Mailing Address 4121 N. 10th #240		09 27 2012				
City	State Zip Code	Transaction ID : SA11AI.19153				
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				
selfemployed	physician					
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	1950.00					
SUBTOTAL of Receipts This Page (optional)		750.00				
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	Statements may not be sold or used by any pers ne name and address of any political committee to			
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	PAC			
Full Name (Last, First, Middle Initial) Ms Anna Garza Mailing Address 3212 S Boyce Circle		Date of Receipt		
		09 27 2012		
City Donna	State Zip Code TX 78557	Transaction ID : SA11AI.19155 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	25.00		
Name of Employer selfemployed Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation private investor Aggregate Year-to-Date ▼ 225.00	contribution		
Full Name (Last, First, Middle Initial) 3. Dr. James Garza Mailing Address 2821 Lakeshore Drive		Date of Receipt		
City Edinburg FEC ID number of contributing federal political committee.	State Zip Code TX 78539	07 17 2012 Transaction ID : SA11AI.18461 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 ▼ 2800.00	contribution		
Full Name (Last, First, Middle Initial) Dr. James Garza Mailing Address 2821 Lakeshore Drive City	State Zip Code	Date of Receipt M = M		
Edinburg FEC ID number of contributing	TX 78539	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 ▼ 3200.00			
SUBTOTAL of Receipts This Page (optional)	.	825.00		
TOTAL This Period (last page this line numbe	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. James Garza Mailing Address 2821 Lakeshore Drive		Date of Receipt
City Edinburg	State Zip Code TX 78539	09 27 2012 Transaction ID : SA11AI.19156 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 ▼ 3600.00	
Full Name (Last, First, Middle Initial) Rene Garza Mailing Address 5404 N. 1st street		Date of Receipt 07 17 2012
City mcallen FEC ID number of contributing federal political committee.	State Zip Code TX 78504	Transaction ID : SA11AI.18462 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 ▼ 2050.00	contribution
Full Name (Last, First, Middle Initial) Rene Garza Mailing Address 5404 N. 1st street City	State Zip Code	Date of Receipt 08 24 2012
mcallen FEC ID number of contributing federal political committee.	TX 78504	Transaction ID : SA11AI.18803 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 ▼ 2450.00	contribution
SUBTOTAL of Receipts This Page (optional)	>	1200.00
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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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) A. Rene Garza Mailing Address 5404 N. 1st street		Date of Receipt
City mcallen	State Zip Code TX 78504	09 27 2012 Transaction ID : SA11AI.19158
FEC ID number of contributing federal political committee.	C	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 ▼ 2850.00	contribution
Full Name (Last, First, Middle Initial) 3. Dr. Ayda Garza-Montalvo Mailing Address 2311 Silvardo North City	State Zip Code	Date of Receipt M
Palmhurst FEC ID number of contributing federal political committee.	TX 78539	Transaction ID : SA11AI.18459 Amount of Each Receipt this Period 125.00
Name of Employer selfemployed Receipt For: Primary General Other (specify) ▼	Occupation self-employee physician Aggregate Year-to-Date ▼ 875.00	contribution
Full Name (Last, First, Middle Initial) Dr. Ayda Garza-Montalvo Mailing Address 2311 Silvardo North City	State Zip Code	Date of Receipt 08 24 2012 Transaction ID: SA11AL18804
Palmhurst FEC ID number of contributing federal political committee.	TX 78539	Amount of Each Receipt this Period
Name of Employer selfemployed Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation self-employee physician Aggregate Year-to-Date ▼ 1000.00	contribution
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

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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. Ayda Garza-Montalvo Mailing Address 2311 Silvardo North		Date of Receipt M - M / D - D / Y - Y - Y - Y - Y - Y - Y - Y - Y - Y
City Palmhurst FEC ID number of contributing federal political committee.	State Zip Code TX 78539	Transaction ID : SA11AI.19159 Amount of Each Receipt this Period 125.00 contribution
Name of Employer selfemployed Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation self-employee physician Aggregate Year-to-Date ▼ 1125.00	
Full Name (Last, First, Middle Initial) Dr. Jesus Garza-Tamez Mailing Address 1400 W. Gardenia	State 7:- Code	Date of Receipt 08 24 2012
City McAllen FEC ID number of contributing federal political committee. Name of Employer	State Zip Code TX 78501 C Occupation	Transaction ID : SA11AI.18805 Amount of Each Receipt this Period 100.00 contribution
self-employed Receipt For: Primary General Other (specify) ▼	physician Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Dr. Jesus Garza-Tamez Mailing Address 1400 W. Gardenia		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 self-employed Receipt For:	State Zip Code TX 78501 C Occupation physician Aggregate Year-to-Date ▼	Transaction ID : SA11AI.19160 Amount of Each Receipt this Period 100.00 contribution
Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)	<u></u>	325.00
TOTAL This Period (last page this line numbe	r only)	

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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) Lawrence Gelman Mailing Address 3900 Sundown Drive		Date of Receipt
	<u>-</u>	07 17 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.18463
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 Other (specify) ▼	2800.00	
Full Name (Last, First, Middle Initial) 3. Lawrence Gelman		Date of Receipt
Mailing Address 3900 Sundown Drive		M = M / D = D / Y = Y = Y
City	State Zip Code	08
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 ▼	1
Primary General Other (specify) ▼	3200.00	
Full Name (Last, First, Middle Initial) Lawrence Gelman	1	Date of Receipt
Mailing Address 3900 Sundown Drive		09 27 2012
City	State Zip Code	Transaction ID : SA11AI.19161
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 Other (specify) ▼	3600.00	
SUBTOTAL of Receipts This Page (optional)		1200.00
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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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NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL F	PAC	
Full Name (Last, First, Middle Initial) Dr. Sathiyaraj George Mailing Address 2607 Solera		Date of Receipt
City	State Zip Code	07 17 2012 Transaction ID : SA11AI.18465
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 ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Sathiyaraj George Mailing Address 2007 Salare		Date of Receipt
Mailing Address 2607 Solera City	State Zip Code	08 24 2012 Transaction ID : SA11Al.18807
Mission	TX 78572	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 ▼ 750.00	
Full Name (Last, First, Middle Initial) Dr. Sathiyaraj George		Date of Receipt
Mailing Address 2607 Solera		09 27 2012
City Mission	State Zip Code TX 78572	Transaction ID : SA11AI.19162 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	
SUBTOTAL of Receipts This Page (optional)		750.00
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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or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	he name and address of any political committee . PAC	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) A. Dr. Richard Gillett Mailing Address 54 South 10th 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 ▼ 700.00	Date of Receipt 17 2012 Transaction ID: SA11AI.18467 Amount of Each Receipt this Period 100.00 contribution
Full Name (Last, First, Middle Initial) Dr. Richard Gillett Mailing Address 54 South 10th City McAllen FEC ID number of contributing federal political committee. Name of Employer self-employee Receipt For: Primary General Other (specify) Other (specify)	State Zip Code TX 78504 C Occupation physician Aggregate Year-to-Date ▼ 800.00	Date of Receipt M M O8 24 2012 Transaction ID: SA11AI.18809 Amount of Each Receipt this Period 100.00 contribution
Full Name (Last, First, Middle Initial) Dr. Richard Gillett Mailing Address 54 South 10th 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 ▼	Date of Receipt M M M
SUBTOTAL of Receipts This Page (optional). TOTAL This Period (last page this line number		300.00

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	State Zip Code TX 78504	07 17 2012 Transaction ID : SA11AI.18468
mcallen FEC ID number of contributing federal political committee.	C 78504	Amount of Each Receipt this Period
Name of Employer selfemployed	Occupation physician	- contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	
Full Name (Last, First, Middle Initial) Alvaro Giraldo Mailing Address 106 W. Flamingo		Date of Receipt
City mcallen	State Zip Code TX 78504	7 Transaction ID : SA11Al.18810 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 ▼ 800.00	
Full Name (Last, First, Middle Initial) Alvaro Giraldo		Date of Receipt
Mailing Address 106 W. Flamingo		09 27 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.19165 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	100.00
Name of Employer selfemployed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 900.00	- contribution
SUBTOTAL of Receipts This Page (optional).		300.00
TOTAL This Period (last page this line number	er only)	

FOR LINE NUMBER: PAGE 78 OF 218 Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)	ng the name and address of any political committee	to solicit contributions from such committee.
BORDER HEALTH FEDER	AL PAC	
Full Name (Last, First, Middle Initial) Dr. Juan Pablo Gomez		Date of Receipt
Mailing Address 113 Canary		07 17 2012 .
City	State Zip Code	Transaction ID : SA11AI.18471
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	Aggregate real to-bate ¥	
Other (specify) ▼	400.00	
Full Name (Last, First, Middle Initial) B. Dr. Juan Pablo Gomez	•	Date of Receipt
Mailing Address 113 Canary		08 24 _2012 _
City	State Zip Code	Transaction ID : SA11AI.18812
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 Other (specify) ▼	600.00	
Full Name (Last, First, Middle Initial) Dr. Juan Pablo Gomez		Date of Receipt
Mailing Address 113 Canary		09 27 2012
City	State Zip Code	Transaction ID : SA11AI.19167
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		
Other (specify) ▼	800.00	
SUBTOTAL of Receipts This Page (option	al)	600.00
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EMIZED RECEIPTS	for each category of the Detailed Summary Page	`	11a 13	11b	11c		12 16		17
ny information copied from such Reports and Statements ma	ay not be sold or used by any pe	rson f	or the p	urpose o	f solicit	ng c	ontribu	tions	

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 FEDERA	L PAC	
Full Name (Last, First, Middle Initial) Mr. Marco Gomez Mailing Address 2705 Biltmore		Date of Receipt
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 ▼ 225.00	Transaction ID : SA11AI.19168 Amount of Each Receipt this Period 25.00 contribution
Full Name (Last, First, Middle Initial) Mr. Michael Gonzales Mailing Address 204 Valenca City Weslaco FEC ID number of contributing federal political committee. Name of Employer selfemployed	State Zip Code TX 78596 C Occupation private investor	Date of Receipt M
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 203.28	
Full Name (Last, First, Middle Initial) Ada Gonzalez Mailing Address P.O. Box 9817 City alamo FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: Primary General Other (specify)	State Zip Code TX 78516 C Occupation private investor Aggregate Year-to-Date ▼ 525.00	Date of Receipt M M M / D D / 2012 Transaction ID : SA11AI.18474 Amount of Each Receipt this Period 75.00 contribution
SUBTOTAL of Receipts This Page (optional))	125.00
TOTAL This Period (last page this line number	per only)	

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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) Ada Gonzalez Date of Receipt Mailing Address P.O. Box 9817 2012 24 City State Zip Code Transaction ID: SA11AI.18817 TX alamo 78516 Amount of Each Receipt this Period FEC ID number of contributing C 75.00 federal political committee. contribution Name of Employer Occupation selfemployed private investor Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ada Gonzalez Date of Receipt Mailing Address P.O. Box 9817 09 27 2012 City State Zip Code Transaction ID: SA11AI.19172 TX 78516 alamo Amount of Each Receipt this Period FEC ID number of contributing 75.00 federal political committee. contribution Name of Employer Occupation selfemployed private investor Receipt For: Aggregate Year-to-Date ▼ Primary General

Other (specify) ▼	675.00	
Full Name (Last, First, Middle Initial) C. Jaime Gonzalez Mailing Address 3511 Plazas del Lago		Date of Receipt 07 17 2012
City edinburg	State Zip Code TX 78539	Transaction ID : SA11AI.18479 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer	Occupation	contribution
selfemployed	private investor	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1750.00	

675.00

FEC Schedule A (Form 3X) Rev. 02/2003

400.00

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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) Jaime Gonzalez Mailing Address 3511 Plazas del Lago		Date of Receipt
City edinburg FEC ID number of contributing	State Zip Code TX 78539	08 24 2012 Transaction ID : SA11AI.18821 Amount of Each Receipt this Period
federal political committee. Name of Employer	Occupation private investor	250.00 contribution
selfemployed Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	
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 Y Y Y Y Y Y
City edinburg FEC ID number of contributing federal political committee.	State Zip Code TX 78539	Transaction ID : SA11AI.19176 Amount of Each Receipt this Period 250.00
Name of Employer selfemployed Receipt For:	Occupation private investor Aggregate Year-to-Date ▼	contribution
Primary General Other (specify) ▼	2250.00	
Full Name (Last, First, Middle Initial) Juan Gonzalez-Dickson Mailing Address 1501 Meadwood		Date of Receipt 07 17 2012
City weslaco	State Zip Code TX 78596	Transaction ID : SA11AI.18473 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 ▼ 1750.00	- CONTRIBUTION
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number	•	750.00
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contribution

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) Juan Gonzalez-Dickson Date of Receipt Mailing Address 1501 Meadwood 2012 08 24 City State Zip Code Transaction ID: SA11AI.18822 TX weslaco 78596 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. contribution Name of Employer Occupation self-employed physician Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Juan Gonzalez-Dickson Date of Receipt Mailing Address 1501 Meadwood 09 27 2012 City State Zip Code Transaction ID: SA11AI.19177 TX weslaco 78596 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. contribution Name of Employer Occupation self-employed physician Receipt For: Aggregate Year-to-Date ▼ Primary General 2250.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Verley Gordon Date of Receipt Mailing Address 1700 E. Mile 3 Road 07 17 2012 City State Zip Code Transaction ID: SA11AI.18480 TX mission 78574 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee.

1562.56

Occupation

Aggregate Year-to-Date ▼

physician

Name of Employer

Primary

Other (specify)

General

selfemployed

Receipt For:

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) Verley Gordon Mailing Address 1700 E. Mile 3 Road		Date of Receipt
City mission	State Zip Code TX 78574	Transaction ID : SA11AI.18823
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 ▼ 1812.56	
Full Name (Last, First, Middle Initial) Verley Gordon Mailing Address 1700 E. Mile 3 Road		Date of Receipt 09 27 2012
City mission	State Zip Code TX 78574	Transaction ID : SA11AI.19178 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 ▼ 2062.56	
Full Name (Last, First, Middle Initial) Enrique Griego		Date of Receipt
Mailing Address 905 Inspiratin Drive	0	07 17 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.18481 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 ▼ 2800.00	- contribution
SUBTOTAL of Receipts This Page (optional)		900.00
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 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) Enrique Griego Mailing Address 905 Inspiratin Drive		Date of Receipt
City pharr EEC ID number of contributing	State Zip Code TX 78577	08 24 2012 Transaction ID : SA11AI.18824 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer	Occupation	400.00 - contribution
selfemployed Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	physician Aggregate Year-to-Date ▼ 3200.00	
Full Name (Last, First, Middle Initial) 3. Enrique Griego Mailing Address 905 Inspiratin Drive		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.19179 Amount of Each Receipt this Period 400.00
Name of Employer selfemployed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 3600.00	contribution
Full Name (Last, First, Middle Initial) Dr. Maria Ruby Guajardo Mailing Address 2603 Santa Laura City	State Zip Code	Date of Receipt 07 17 2012 Transaction ID: SA11AI.18482
Mission FEC ID number of contributing federal political committee.	TX 78572	Amount of Each Receipt this Period 50.00
Name of Employer self-employee Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 350.00	- contribution
SUBTOTAL of Receipts This Page (optional)		850.00
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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	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. Maria Ruby Guajardo Mailing Address 2603 Santa Laura		Date of Receipt M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
City Mission	State Zip Code TX 78572	Transaction ID : SA11AI.18825 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
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) Dr. Maria Ruby Guajardo Mailing Address 2603 Santa Laura		Date of Receipt
City Mission	State Zip Code TX 78572	09 27 2012 Transaction ID : SA11AI.19180 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer self-employee	Occupation physician	contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
Full Name (Last, First, Middle Initial) Daniel Guerra		Date of Receipt
Mailing Address 101 S. Broadway	0	07 17 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.18484 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 ▼ 850.00	_ contribution
SUBTOTAL of Receipts This Page (optional)		200.00
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) Daniel Guerra Mailing Address 101 S. Broadway		Date of Receipt
City Mcallen	State Zip Code TX 78501	08 24 2012 Transaction ID : SA11Al.18827
FEC ID number of contributing federal political committee.	C 78501	Amount of Each Receipt this Period
Name of Employer self-employed	Occupation physician	- contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 950.00	
Full Name (Last, First, Middle Initial) Daniel Guerra Mailing Address 101 S. Broadway		Date of Receipt 09 27 2012
City Mcallen	State Zip Code TX 78501	Transaction ID : SA11AI.19181 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 ▼ 1050.00	
Full Name (Last, First, Middle Initial) Marcy Guerra		Date of Receipt
Mailing Address 13337 Borolo Drive	0:	07 17 2012
City edinburg	State Zip Code TX 78541	Transaction ID : SA11AI.18486 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 ▼ 1750.00	- contribution
SUBTOTAL of Receipts This Page (optional)		450.00
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 to	solicit contributions from such committee.
NAME OF COMMITTEE (IN FUII) 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	08 24 2012 Transaction ID : SA11AI.18829 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 ▼ 2000.00	CONTRIBUTION
Full Name (Last, First, Middle Initial) Marcy Guerra Mailing Address 13337 Borolo Drive		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.19183 Amount of Each Receipt this Period 250.00
Name of Employer selfemployed Receipt For: □ Primary □ General □ Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 2250.00	- contribution
Full Name (Last, First, Middle Initial) Rodolfo Guerrero Mailing Address 1402 E. 8th Street		Date of Receipt 07 17 2012
City weslaco FEC ID number of contributing	State Zip Code TX 78596	Transaction ID : SA11AI.18487 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 ▼ 1526.09	contribution
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line numb	<u>·</u>	750.00
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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. Rodolfo Guerrero		Date of Receipt
Mailing Address 1402 E. 8th Street		08 24 2012
City	State Zip Code	Transaction ID : SA11AI.18830
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: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1776.09	
Full Name (Last, First, Middle Initial) Rodolfo Guerrero Mailing Address 1402 E. 8th Street		Date of Receipt
City	State 7in Code	09 27 2012
City weslaco	State Zip Code TX 78596	Transaction ID : SA11AI.19184
	1000	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 ▼ 2026.09	
Full Name (Last, First, Middle Initial) Alberto Gutierrez		Date of Receipt
Mailing Address 6020 Wisconsin		07 17 2012
City	State Zip Code	Transaction ID : SA11AI.18489
edinburg	TX 78539	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	Aggregate Year-to-Date ▼	
Other (specify) ▼	1750.00	
SUBTOTAL of Receipts This Page (optional)	750.00
TOTAL This Period (last page this line number	ber 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) A. Alberto Gutierrez Mailing Address 6020 Wisconsin		Date of Receipt
City edinburg	State Zip Code TX 78539	08 24 2012 Transaction ID : SA11AI.18832 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 ▼ 2000.00	CONTRIBUTION
Full Name (Last, First, Middle Initial) Alberto Gutierrez Mailing Address 6020 Wisconsin		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.19186 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) ▼	2250.00	
Full Name (Last, First, Middle Initial) Marco Gutierrez Mailing Address 511 N. Depot Road		Date of Receipt 07 17 2012
City edinburg	State Zip Code TX 78541	Transaction ID : SA11AI.18490 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 ▼ 2800.00	contribution
SUBTOTAL of Receipts This Page (optional)	· · · · · · · · · · · · · · · · · · ·	900.00
TOTAL This Period (last page this line number	r only)	

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NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL I	PAC	
Full Name (Last, First, Middle Initial) Marco Gutierrez Mailing Address 511 N. Depot Road		Date of Receipt
<u> </u>	Chata Zin Cr. 1-	08 24 2012
City edinburg	State Zip Code TX 78541	Transaction ID : SA11AI.18833 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 ▼ 3200.00	
Full Name (Last, First, Middle Initial) Marco Gutierrez Mailing Address 511 N. Depot Road		Date of Receipt
		09 27 2012
City edinburg	State Zip Code TX 78541	Transaction ID : SA11AI.19187
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 ▼ 3600.00	
Full Name (Last, First, Middle Initial)		Data of Descint
Mailing Address 224 Lindberg		Date of Receipt 07 17 2012
City mcallen	State Zip Code TX 78501	Transaction ID : SA11AI.18491
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 250.00
Name of Employer	Occupation	contribution
selfemployed	physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1750.00	
SUBTOTAL of Receipts This Page (optional)		1050.00
TOTAL This Period (last page this line number		

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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) Miguel Gutierrez Mailing Address 224 Lindberg		Date of Receipt
City mcallen	State Zip Code TX 78501	08 24 2012 Transaction ID : SA11AI.18834 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00 contribution
Name of Employer selfemployed Receipt For:	Occupation physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	
Full Name (Last, First, Middle Initial) 3. Miguel Gutierrez Mailing Address 224 Lindberg		Date of Receipt
City mcallen	State Zip Code TX 78501	09 27 2012 Transaction ID : SA11AI.19188 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 ▼ 2250.00	
Full Name (Last, First, Middle Initial) Dr. Edwardo Guzman		Date of Receipt
Mailing Address 2308 Highway 83 suite f	0	07 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Penitas	State Zip Code TX 78573	Transaction ID : SA11AI.18492 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 physician Aggregate Year-to-Date ▼ 350.00	. contribution
SUBTOTAL of Receipts This Page (optional)		550.00
TOTAL This Period (last page this line number	· only)	

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or for commercial purposes, other than using 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) Dr. Edwardo Guzman		Date of Receipt
Mailing Address 2308 Highway 83 suite f		08 24 2012
City	State Zip Code	Transaction ID : SA11AI.18835
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		
Other (specify) ▼	400.00	
Full Name (Last, First, Middle Initial) Dr. Edwardo Guzman	·	Date of Receipt
Mailing Address 2308 Highway 83 suite f		09 27 2012
City	State Zip Code	Transaction ID : SA11AI.19189
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 Other (specify) ▼	450.00	
Full Name (Last, First, Middle Initial)	1	Date of Receipt
Mailing Address 4008 Burns Drive South		07 17 2012
City	State Zip Code	Transaction ID : SA11AI.18493
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 Other (specify) ▼	2800.00	
SUBTOTAL of Receipts This Page (optiona)	500.00
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TOTAL This Period (last page this line num	iber 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	. PAC	
Full Name (Last, First, Middle Initial) Victor Haddad Mailing Address 4008 Burns Drive South		Date of Receipt
City mcallen FEC ID number of contributing federal political committee.	State Zip Code TX 78503	Transaction ID : SA11AI.18836 Amount of Each Receipt this Period 400.00
Name of Employer selfemployed Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 3200.00	- contribution
Full Name (Last, First, Middle Initial) Victor Haddad Mailing Address 4008 Burns Drive South		Date of Receipt 09 27 2012
City mcallen FEC ID number of contributing federal political committee.	State Zip Code TX 78503	Transaction ID : SA11AI.19190 Amount of Each Receipt this Period 400.00
Name of Employer selfemployed Receipt For: □ Primary □ General □ Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 3600.00	- contribution
Full Name (Last, First, Middle Initial) Thomas Hausle Mailing Address 701 South J City	State Zip Code	Date of Receipt 07 17 2012 Transaction ID : SA11AI.18494
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 ▼ 525.00	Amount of Each Receipt this Period 75.00 contribution
SUBTOTAL of Receipts This Page (optional).	•	875.00
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) Thomas Hausle Mailing Address 701 South J		Date of Receipt 08 24 2012
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 ▼ 600.00	Transaction ID : SA11AI.18837 Amount of Each Receipt this Period 75.00 contribution
Full Name (Last, First, Middle Initial) Thomas Hausle Mailing Address 701 South J 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 ▼ 675.00	Date of Receipt 09 27 2012 Transaction ID: SA11AI.19191 Amount of Each Receipt this Period 75.00 contribution
Full Name (Last, First, Middle Initial) Robert Helbing Mailing Address 820 Tamarack 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 private investor Aggregate Year-to-Date ▼ 650.00	Date of Receipt 07 17 2012 Transaction ID: SA11AI.18495 Amount of Each Receipt this Period 50.00 contribution
SUBTOTAL of Receipts This Page (optional).		200.00
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) Robert Helbing Mailing Address 820 Tamarack 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 private investor Aggregate Year-to-Date ▼	Date of Receipt 08 24 2012 Transaction ID: SA11AI.18838 Amount of Each Receipt this Period 50.00 contribution
Other (specify) ▼ Full Name (Last, First, Middle Initial) 3. Robert Helbing	700.00	Date of Receipt
Mailing Address 820 Tamarack City mcallen	State Zip Code TX 78501	Date of Receipt 09 27 2012 Transaction ID : SA11AI.19192 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 ▼ 750.00	50.00 contribution
Full Name (Last, First, Middle Initial) Mr. Blake Hensler Mailing Address 3414 Pricess Street City	State Zip Code	Date of Receipt 09 27 2012 Transaction ID : SA11AI.19193
Edinburg FEC ID number of contributing federal political committee. Name of Employer self-employed Receipt For: Primary General Other (specify)	TX 78539 C Occupation private investor Aggregate Year-to-Date ▼ 225.00	Amount of Each Receipt this Period 25.00 contribution
SUBTOTAL of Receipts This Page (optional)	>	125.00
TOTAL This Period (last page this line number	r only)	

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Ar 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) Ms Monica Hensler Date of Receipt Mailing Address 3414 Princess Street 2012 27 City State Zip Code Transaction ID: SA11AI.19194 TX 78539 Edinburg Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. contribution Name of Employer Occupation selfemployed private investor Receipt For: Aggregate Year-to-Date ▼ Primary General 225.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ambrosio Hernandez Date of Receipt Mailing Address 2000 Dana 07 17 2012 City State Zip Code Transaction ID: SA11AI.18500 TX Pharr 78577 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. contribution Name of Employer Occupation selfemployed physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1750.00 Other (specify) Full Name (Last, First, Middle Initial) c. Ambrosio Hernandez Date of Receipt Mailing Address 2000 Dana 2012 80 24 Zip Code City State Transaction ID: SA11AI.18841 TX Pharr 78577 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. contribution Name of Employer Occupation selfemployed physician Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) 525.00 SUBTOTAL of Receipts This Page (optional)..... 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) Ambrosio Hernandez Mailing Address 2000 Dana		Date of Receipt
		09 27 2012
City	State Zip Code	Transaction ID : SA11AI.19195
Pharr	TX 78577	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 ▼ 2250.00	
Full Name (Last, First, Middle Initial) Maximiliano Hernandez Mailing Address, 301 Byron Nelson Drive		Date of Receipt
Mailing Address 301 Byron Nelson Drive #40 Villas Jardin	I	07 17 _2012 _
City	State Zip Code	Transaction ID : SA11AI.18499
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 ▼ 1750.00	
Full Name (Last, First, Middle Initial) Maximiliano Hernandez		Date of Receipt
Mailing Address 301 Byron Nelson Drive #40 Villas Jardin		08 24 2012
City mcallen	State Zip Code TX 78503	Transaction ID : SA11AI.18843 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) ▼	2000.00	
SUBTOTAL of Receipts This Page (optional)	•	750.00
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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	PAC	
Full Name (Last, First, Middle Initial) Maximiliano Hernandez Mailing Address 301 Byron Nelson Drive #40 Villas Jardin		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 ▼ 2250.00	Transaction ID : SA11AI.19197 Amount of Each Receipt this Period 250.00 contribution
Full Name (Last, First, Middle Initial) Maria Hoffman Mailing Address 802 Inspiration Road City pharr	State Zip Code TX 78577	Date of Receipt O7 17 2012 Transaction ID : SA11AI.18483 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 ▼ 1750.00	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 ▼ 2000.00	Date of Receipt 08
SUBTOTAL of Receipts This Page (optional)	>	750.00
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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) Maria Hoffman Mailing Address 802 Inspiration Road		Date of Receipt
City pharr	State Zip Code TX 78577	09 27 2012 Transaction ID : SA11AI.19198 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 ▼ 2250.00	- contribution
Full Name (Last, First, Middle Initial) Dr. Jacobo Hohenstein Mailing Address 800 East Dove suite L City	State Zip Code	Date of Receipt 07 17 2012 Transaction ID: SA11AL18501
McAllen FEC ID number of contributing federal political committee.	TX 78504	Transaction ID : SA11AI.18501 Amount of Each Receipt this Period 200.00 contribution
Name of Employer self-employee Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1400.00	
Full Name (Last, First, Middle Initial) Dr. Jacobo Hohenstein Mailing Address 800 East Dove suite L	State 7in Code	Date of Receipt 08 24 2012
City McAllen FEC ID number of contributing federal political committee.	State Zip Code TX 78504	Transaction ID : SA11AI.18845 Amount of Each Receipt this Period 200.00 contribution
Name of Employer self-employee Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1600.00	
SUBTOTAL of Receipts This Page (optional)	>	650.00
TOTAL This Period (last page this line number	only)	

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NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	the name and address of any political committee - PAC	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Dynio Honrubia Mailing Address 5600 North Cynthia 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 ▼ 350.00	Date of Receipt 07 17 2012 Transaction ID : SA11AI.18502 Amount of Each Receipt this Period 50.00 contribution
Full Name (Last, First, Middle Initial) Dr. Dynio Honrubia Mailing Address 5600 North Cynthia City McAllen FEC ID number of contributing federal political committee. Name of Employer self-employee Receipt For: Primary General Other (specify) Other (specify)	State Zip Code TX 78504 C Occupation physician Aggregate Year-to-Date ▼ 400.00	Date of Receipt 08 24 2012 Transaction ID : SA11AI.18846 Amount of Each Receipt this Period 50.00 contribution
Full Name (Last, First, Middle Initial) Dr. Dynio Honrubia Mailing Address 5600 North Cynthia 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 ▼ 450.00	Date of Receipt Mark
SUBTOTAL of Receipts This Page (optional).	>	150.00

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) Vincent Honrubia Mailing Address 204 Rio Grande		Date of Receipt
City mission	State Zip Code TX 78572	07 17 2012 Transaction ID : SA11AI.18503 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 ▼ 1750.00	
Full Name (Last, First, Middle Initial) Vincent Honrubia Mailing Address 204 Rio Grande		Date of Receipt 08 24 2012
City mission	State Zip Code TX 78572	7 Transaction ID : SA11AI.18847 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 ▼ 2000.00	
Full Name (Last, First, Middle Initial) Vincent Honrubia		Date of Receipt
Mailing Address 204 Rio Grande		09 27 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.19200 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 ▼ 2250.00	contribution
SUBTOTAL of Receipts This Page (optional).		750.00
TOTAL This Period (last page this line numb	er only)	

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NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERA	the name and address of any political committee	to contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Syed Husain Mailing Address 7020 N. 1st 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 ▼ 700.00	Date of Receipt 07 17 2012 Transaction ID : SA11AI.18504 Amount of Each Receipt this Period 100.00 contribution
Full Name (Last, First, Middle Initial) Dr. Syed Husain Mailing Address 7020 N. 1st 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 ▼ 800.00	Date of Receipt 08 24 2012 Transaction ID : SA11AI.18848 Amount of Each Receipt this Period 100.00 contribution
Full Name (Last, First, Middle Initial) Dr. Syed Husain Mailing Address 7020 N. 1st City McAllen FEC ID number of contributing federal political committee. Name of Employer self-employee Receipt For: Primary Other (specify)	State Zip Code TX 78504 C Occupation physician Aggregate Year-to-Date ▼ 900.00	Date of Receipt 9 27 2012 Transaction ID : SA11AI.19201 Amount of Each Receipt this Period 100.00 contribution
SUBTOTAL of Receipts This Page (optional)) >	300.00

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NAME OF COMMITTEE (IN Full) BORDER HEALTH FEDERAL	_ PAC	
Full Name (Last, First, Middle Initial) Dr. Norma Iglesias Mailing Address 712 S. Cage City Pharr FEC ID number of contributing federal political committee. Name of Employer self-employed Receipt For: Primary General Other (specify)	State Zip Code TX 78577 C Occupation physician Aggregate Year-to-Date ▼ 2800.00	Date of Receipt O7 17 2012 Transaction ID : SA11AI.18505 Amount of Each Receipt this Period 400.00 contribution
Full Name (Last, First, Middle Initial) Dr. Jose E. Igoa Mailing Address 3716 S 'J' Street 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 78503 C Occupation physician Aggregate Year-to-Date ▼ 400.00	Date of Receipt 07 17 2012 Transaction ID : SA11AI.18686 Amount of Each Receipt this Period 400.00 contribution
Full Name (Last, First, Middle Initial) Dr. Jose E. Igoa Mailing Address 3716 S 'J' Street 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 ▼	Date of Receipt Mark 24 2012 Transaction ID : SA11AI.18851 Amount of Each Receipt this Period 400.00 contribution
SUBTOTAL of Receipts This Page (optional)		1200.00

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NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL F	PAC	
Full Name (Last, First, Middle Initial) Dr. Jose E. Igoa Mailing Address 3716 S 'J' Street		Date of Receipt
	77.0.1	09 27 2012
City McAllen	State Zip Code TX 78503	Transaction ID : SA11AI.19202
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 ▼ 1200.00	
Full Name (Last, First, Middle Initial) Ms Marina Jacobson Mailing Address 4555 Published		Date of Receipt
Mailing Address 1505 Doherty City	State Zip Code	09 27 2012 Transaction ID : \$A11A119203
Mission	TX 78572	Transaction ID : SA11AI.19203 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer selfemployed	Occupation private investor	contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	
Full Name (Last, First, Middle Initial) Donna Joule		Date of Receipt
Mailing Address 708 S H Street		09 27 2012
City mcallen	State Zip Code TX 78501	Transaction ID : SA11AI.19206 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer selfemployed	Occupation physician	contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	
SUBTOTAL of Receipts This Page (optional)		450.00
TOTAL This Period (last page this line number of	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. NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL PAC Full Name (Last, First, Middle Initial) Nelson Kalaf Date of Receipt Mailing Address 5401 N. 8th Street 07 2012 City State Zip Code Transaction ID: SA11AI.18510 TX mcAllen 78504 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. contributon Name of Employer Occupation selfemployed physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1750.00 Other (specify) Full Name (Last, First, Middle Initial) B. Nelson Kalaf Date of Receipt Mailing Address 5401 N. 8th Street 08 24 2012 City State Zip Code Transaction ID: SA11AI.18856 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 2000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Nelson Kalaf Date of Receipt Mailing Address 5401 N. 8th Street 09 27 2012 City State Zip Code Transaction ID: SA11AI.19207 TX mcAllen 78504 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. contributon Name of Employer Occupation selfemployed physician Receipt For: Aggregate Year-to-Date ▼ Primary General 2250.00 Other (specify) 750.00 SUBTOTAL of Receipts This Page (optional).....

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NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	PAC	
Full Name (Last, First, Middle Initial) Gauri Kanhere Mailing Address 2548 Palm Circle		Date of Receipt
City rio grande city	State Zip Code TX 78582	07 17 2012 Transaction ID : SA11AI.18512 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 ▼ 1750.00	- CONTRIBUTION
Full Name (Last, First, Middle Initial) Gauri Kanhere Mailing Address 2548 Palm Circle	State 7'- O-1-	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City rio grande city FEC ID number of contributing federal political committee.	State Zip Code TX 78582	Transaction ID : SA11AI.18857 Amount of Each Receipt this Period 250.00
Name of Employer selfemployed Receipt For: Primary General	Occupation physician Aggregate Year-to-Date ▼	contribution
Other (specify) ▼ Full Name (Last, First, Middle Initial) Cauri Kanhere Mailing Address 2548 Palm Circle	2000.00	Date of Receipt 09 27 2012
City rio grande city FEC ID number of contributing federal political committee.	State Zip Code TX 78582	Transaction ID : SA11AI.19208 Amount of Each Receipt this Period 250.00
Name of Employer selfemployed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 2250.00	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	the name and address of any political committee	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Adolfo Kaplan Mailing Address 7902 N. 2th Street 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 ▼ 400.00	Date of Receipt 07 17 2012 Transaction ID : SA11AI.18511 Amount of Each Receipt this Period 200.00 contribution
Full Name (Last, First, Middle Initial) Dr. Adolfo Kaplan Mailing Address 7902 N. 2th Street 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 ▼ 600.00	Date of Receipt M
Full Name (Last, First, Middle Initial) Dr. Adolfo Kaplan Mailing Address 7902 N. 2th Street 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 ▼ 800.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	>	600.00

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NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	L PAC			
Full Name (Last, First, Middle Initial) Gholam Kiani Mailing Address 213 e. Xenops	Date of Receipt			
City	07 17 2012 Transaction ID : SA11AI.18517			
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 ▼ 1750.00			
Full Name (Last, First, Middle Initial) Gholam Kiani Mailing Address 213 e. Xenops	Date of Receipt			
City mcallen	State Zip Code TX 78504	7 Transaction ID : SA11Al.18861 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 ▼ 2000.00			
Full Name (Last, First, Middle Initial) Cholam Kiani		Date of Receipt		
Mailing Address 213 e. Xenops				
City mcallen	State Zip Code TX 78504	Transaction ID : SA11AI.19213 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 ▼ 2250.00	- contribution		
SUBTOTAL of Receipts This Page (optional)	>	750.00		
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NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERA	AL PAC	
Full Name (Last, First, Middle Initial) Mary Elizabeth Klenz Mailing Address 5111 N. 10th Street		Date of Receipt
		07 17 2012
City	State Zip Code TX 78504	Transaction ID : SA11AI.18519
mcallen	1/00/04	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 Other (specify) ▼	1550.00	
Full Name (Last, First, Middle Initial) 3. Mary Elizabeth Klenz		Date of Receipt
Mailing Address 5111 N. 10th Street		08 24 2012
City	State Zip Code	Transaction ID : SA11AI.18863
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: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1700.00	
Full Name (Last, First, Middle Initial) C. Mary Elizabeth Klenz	'	Date of Receipt
Mailing Address 5111 N. 10th Street		09 27 _2012 _
City	State Zip Code	Transaction ID : SA11AI.19215
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 Other (specify) ▼	1850.00	
SUBTOTAL of Receipts This Page (options	al)	450.00
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NAME OF COMMITTEE (In Full) BORDER HEALTH FEDER	AL PAC				
Full Name (Last, First, Middle Initial) Jorge Kutugata		Date of Receipt			
Mailing Address Rt 2 Box 522-K		07 17 2012			
City	State Zip Code	Transaction ID : SA11AI.18520			
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 ▼	1			
Primary General	00 0				
Other (specify) ▼	1750.00				
Full Name (Last, First, Middle Initial) 3. Jorge Kutugata		Date of Receipt			
Mailing Address Rt 2 Box 522-K		08 24 2012			
City	State Zip Code	Transaction ID : SA11AI.18864			
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) ▼	2000.00				
Full Name (Last, First, Middle Initial) Jorge Kutugata	I	Date of Receipt			
Mailing Address Rt 2 Box 522-K		09 27 2012			
City	State Zip Code	Transaction ID : SA11AI.19217			
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) ▼	2250.00				
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NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	PAC	
Full Name (Last, First, Middle Initial) Dr. Hossein Lahiji Mailing Address 801 E. Nolana #20		Date of Receipt
		07 17 2012
City McAllen	State Zip Code TX 78504	Transaction ID : SA11AI.18696
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 ▼ 400.00	
Full Name (Last, First, Middle Initial) 3. Dr. Hossein Lahiji Mailing Address 801 F Nolana #20		Date of Receipt
Mailing Address 801 E. Nolana #20 City McAllen	State Zip Code TX 78504	08 24 2012 Transaction ID : SA11AI.18865 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00 contribution
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) Dr. Hossein Lahiji		Date of Receipt
Mailing Address 801 E. Nolana #20		09 27 2012
City McAllen	State Zip Code TX 78504	Transaction ID : SA11AI.19218 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	Aggregate Year-to-Date ▼	
Other (specify) ▼	1200.00	
SUBTOTAL of Receipts This Page (optional)		1200.00
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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) Dr. Raul Ledesma Mailing Address 5508 N. 1st Street		Date of Receipt
City McAllen	State Zip Code TX 78504	08 24 2012 Transaction ID : SA11AI.18867 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 ▼ 300.00	
Full Name (Last, First, Middle Initial) Dr. Raul Ledesma Mailing Address 5508 N. 1st Street		Date of Receipt 09 27 2012
City McAllen	State Zip Code TX 78504	09 27 2012 Transaction ID : SA11AI.19220 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) Dr. Rick Lin		Date of Receipt
Mailing Address 5112 N. 10th Street		09 27 Y 2012
City McAllen	State Zip Code TX 78504	Transaction ID : SA11AI.19222 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer self-employee Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 225.00	_ contribution
SUBTOTAL of Receipts This Page (optional)	_	225.00
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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) Dr. Enrique Linan Mailing Address 3003 Santo Olivia	State Zin Code	Date of Receipt 09 27 2012
City Mission FEC ID number of contributing federal political committee. Name of Employer self-employee Receipt For:	State Zip Code TX 78572 C Occupation physician Aggregate Year-to-Date ▼	Transaction ID : SA11AI.19223 Amount of Each Receipt this Period 25.00 contribution
Primary General Other (specify) ▼	225.00	
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) Street Middle Initial)	State Zip Code TX 78703 C Occupation private investor Aggregate Year-to-Date ▼ 2800.00	Date of Receipt 07 17 2012 Transaction ID: SA11AI.18526 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) Other (specify)	State Zip Code TX 78703 C Occupation private investor Aggregate Year-to-Date ▼ 3200.00	Date of Receipt 08 24 2012 Transaction ID: SA11AI.18871 Amount of Each Receipt this Period 400.00 contribution
SUBTOTAL of Receipts This Page (optional).	>	825.00
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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 federal political committee. Name of Employer self-employed Receipt For: Primary General Other (specify) Eull Name (Last First Middle Initial)	State Zip Code TX 78703 C Occupation private investor Aggregate Year-to-Date ▼ 3600.00	Date of Receipt 99 27 2012 Transaction ID : SA11AI.19224 Amount of Each Receipt this Period 400.00 contribution
Full Name (Last, First, Middle Initial) Dr. Linette Linsangan Mailing Address 105 E. Yellowhammer 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 ▼ 300.00	Date of Receipt 08 24 2012 Transaction ID: SA11AI.18872 Amount of Each Receipt this Period 100.00 contribution
Full Name (Last, First, Middle Initial) Dr. Linette Linsangan Mailing Address 105 E. Yellowhammer 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 ▼ 400.00	Date of Receipt Mark
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TOTAL This Period (last page this line number	only)	

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	Statements may not be sold or used by any pers he name and address of any political committee to	
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	. PAC	
Full Name (Last, First, Middle Initial) Ms Lisa Longoria Mailing Address 716 South Excalibur Street		Date of Receipt
City	State Zip Code	07 17 2012 Transaction ID : SA11AI.18529
Edinburg FEC ID number of contributing federal political committee. Name of Employer self-employee Receipt For:	C Occupation private investor	Amount of Each Receipt this Period 50.00 contribution
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 307.45	
Full Name (Last, First, Middle Initial) Ms Lisa Longoria Mailing Address 716 South Excalibur Street		Date of Receipt 08 24 2012
City Edinburg	State Zip Code TX 78539	Transaction ID : SA11Al.18874 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 General Other (specify) ▼	Aggregate Year-to-Date ▼ 357.45	
Full Name (Last, First, Middle Initial) C. Ms Lisa Longoria		Date of Receipt
Mailing Address 716 South Excalibur Street		09 / D / 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.19227 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 General Other (specify) ▼	Aggregate Year-to-Date ▼ 407.45	
SUBTOTAL of Receipts This Page (optional).		150.00
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) Alfredo Lopez Mailing Address 7609 N. 24th Circle		Date of Receipt
City mcallen	State Zip Code TX 78504	07 17 2012 Transaction ID : SA11AI.18531 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 ▼ 450.00	
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.18876 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 ▼ 550.00	
Full Name (Last, First, Middle Initial) Alfredo Lopez		Date of Receipt
Mailing Address 7609 N. 24th Circle	0	09 / 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.19229 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	100.00
Name of Employer selfemployed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 650.00	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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	Statements may not be sold or used by any pers 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. Sergio Lozano Mailing Address 2309 Spicewood Drive		Date of Receipt
Mailing Address 2309 Spicewood Drive		09 27 2012
City	State Zip Code TX 78596	Transaction ID : SA11AI.19231
Weslaco	10090	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer	Occupation	contribution
selfemployed	physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	225.00	
Full Name (Last, First, Middle Initial) Salil Mangi		Date of Receipt
Mailing Address 3801 Sundown Court East		M = M / D = D / Y = Y = Y = Y
City	State Zip Code	07 17 2012
mcallen	TX 78503	Transaction ID : SA11AI.18535 Amount of Each Receipt this Period
FEC ID number of contributing	. 5555	
federal political committee.	C	250.00
Name of Employer	Occupation	contribution
selfemployed	physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1750.00	
Full Name (Last, First, Middle Initial) C. Salil Mangi		Date of Receipt
Mailing Address 3801 Sundown Court East		08 24 2012
City	State Zip Code	Transaction ID : SA11AI.18880
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 ▼	
Primary General Other (specify) ▼	2000.00	
SUBTOTAL of Receipts This Page (optional)		525.00
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for each category of the 12 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) Salil Mangi Date of Receipt Mailing Address 3801 Sundown Court East 2012 27 City State Zip Code Transaction ID: SA11AI.19233 TX mcallen 78503 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. contribution Name of Employer Occupation selfemployed physician Receipt For: Aggregate Year-to-Date ▼ Primary General 2250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Roberto M. Mangoo-Karim Date of Receipt Mailing Address 3817 Sundown Ct 07 17 2012 City State Zip Code Transaction ID: SA11AI.18697 TX McAllen 78503 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. contribution Name of Employer Occupation selfemployed physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Roberto M. Mangoo-Karim Date of Receipt Mailing Address 3817 Sundown Ct 80 24 2012 City State Zip Code Transaction ID: SA11AI.18881 TX McAllen 78503 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. contribution Name of Employer Occupation selfemployed physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 750.00 SUBTOTAL of Receipts This Page (optional).....

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	statements may not be sold or used by any persecution and address of any political committee to	
NAME OF COMMITTEE (IN Full) BORDER HEALTH FEDERAL I	PAC	
Full Name (Last, First, Middle Initial) Dr. Roberto M. Mangoo-Karim Mailing Address 3817 Sundown Ct		Date of Receipt
	- O	09 27 / 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.19234
FEC ID number of contributing federal political committee.	C 78503	Amount of Each Receipt this Period 250.00
Name of Employer	Occupation physician	contribution
selfemployed Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) Carlos Manrique Mailing Address 116 Cardinal		Date of Receipt
City mcallen	State Zip Code TX 78504	07 17 2012 Transaction ID : SA11AI.18536 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	Convention	400.00
Name of Employer selfemployed	Occupation physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2800.00	
Full Name (Last, First, Middle Initial) Carlos Manrique		Date of Receipt
Mailing Address 116 Cardinal		08 24 2012
City mcallen	State Zip Code TX 78504	Transaction ID : SA11AI.18882 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	400.00
Name of Employer	Occupation	contribution
selfemployed	physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	3200.00	
SUBTOTAL of Receipts This Page (optional)		1050.00
TOTAL This Period (last page this line number	<u> </u>	

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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) Carlos Manrique Date of Receipt Mailing Address 116 Cardinal 2012 27 City State Zip Code Transaction ID: SA11AI.19235 TX mcallen 78504 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 3600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Agustin Martinez Date of Receipt Mailing Address 7603 N. 2nd Lane 07 2012 17 City State Zip Code Transaction ID: SA11AI.18537 TX mcallen 78504 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 2800.00 Other (specify) Full Name (Last, First, Middle Initial) c. Agustin Martinez Date of Receipt Mailing Address 7603 N. 2nd Lane 2012 80 24 City State Zip Code Transaction ID: SA11AI.18883 TX mcallen 78504 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 3200.00 Other (specify) 1200.00 SUBTOTAL of Receipts This Page (optional).....

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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) Agustin Martinez Mailing Address 7603 N. 2nd Lane City	State Zip Code	Date of Receipt 09 27 2012 Transaction ID : SA11AI.19236
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 ▼ 3600.00	Amount of Each Receipt this Period 400.00 contribution
Full Name (Last, First, Middle Initial) Ricardo Martinez Mailing Address 1903 W. Smith City edinburg FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: Primary General Other (specify) Other (specify)	State Zip Code TX 78539 C Occupation physician Aggregate Year-to-Date ▼ 1750.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Ricardo Martinez Mailing Address 1903 W. Smith 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 physician Aggregate Year-to-Date ▼ 2000.00	Date of Receipt 08 24 2012 Transaction ID: SA11AI.18884 Amount of Each Receipt this Period 250.00 contribution
SUBTOTAL of Receipts This Page (optional).	>	900.00
TOTAL This Period (last page this line number	er 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) Ricardo Martinez		Date of Receipt
Mailing Address 1903 W. Smith		09 27 2012
City	State Zip Code	Transaction ID : SA11AI.19237
edinburg	TX 78539	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 rear-to-Date ▼	
Other (specify) ▼	2250.00	
Full Name (Last, First, Middle Initial) Dr. Robert Martinez		Date of Receipt
Mailing Address 2809 Santa Lydia		07 17 2012
City	State Zip Code	Transaction ID : SA11AI.18539
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
self-employee	physician	
Receipt For:	Aggregate Year-to-Date ▼	_
Primary General Other (specify) ▼	700.00	
Full Name (Last, First, Middle Initial) Dr. Robert Martinez	1	Date of Receipt
Mailing Address 2809 Santa Lydia		08 24 2012
City	State Zip Code	Transaction ID : SA11AI.18885
Mission	TX 78572	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
federal political committee. Name of Employer	Occupation	100.00 contribution
federal political committee. Name of Employer self-employee		
federal political committee. Name of Employer self-employee Receipt For:	Occupation	
federal political committee. Name of Employer self-employee	Occupation physician	
federal political committee. Name of Employer self-employee Receipt For: Primary General	Occupation physician Aggregate Year-to-Date ▼ 800.00	

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) Dr. Robert Martinez Mailing Address 2809 Santa Lydia		Date of Receipt
City Mission	State Zip Code TX 78572	7 Transaction ID : SA11AI.19238 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 ▼ 900.00	
Full Name (Last, First, Middle Initial) Santos Martinez Mailing Address 125 East Yucca		Date of Receipt 07 17 2012
City mcallen	State Zip Code TX 78504	7 17 2012 Transaction ID : SA11AI.18540 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 ▼ 1659.52	
Full Name (Last, First, Middle Initial) Santos Martinez		Date of Receipt
Mailing Address 125 East Yucca	0	08 24 2012
City mcallen	State Zip Code TX 78504	Transaction ID : SA11AI.18886 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 ▼ 1909.52	- 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)	g the name and address of any political committee	e to solicit contributions from such committee.
Full Name (Last, First, Middle Initial)	AL PAU	
Santos Martinez		Date of Receipt
Mailing Address 125 East Yucca		09 27 2012
City	State Zip Code	Transaction ID : SA11AI.19239
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 ▼	
Primary General		1
Other (specify) ▼	2159.52	
Full Name (Last, First, Middle Initial) Dr. Nelson Mata	'	Date of Receipt
Mailing Address 1705 Palazzo		08 24 2012 _
City	State Zip Code	Transaction ID : SA11AI.18888
Mission	TX 78572	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	100.00
Name of Employer	Occupation	contribution
self-employed	physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial)	I	Data of Bassist
Dr. Nelson Mata		Date of Receipt
Mailing Address 1705 Palazzo		09 27 _ 2012 _
City	State Zip Code	Transaction ID : SA11AI.19241
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
self-employed	physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	400.00	
SUBTOTAL of Receipts This Page (options	al)	450.00
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TOTAL This Period (last page this line nur	nher 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) Ms Kimberely McNutt Mailing Address 7716 N. 27th		Date of Receipt
City McAllen	State Zip Code TX 78504	09 27 2012 Transaction ID : SA11AI.19243 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer	Occupation	25.00 contribution
self-employed Receipt For: Primary General	occupation private investor Aggregate Year-to-Date ▼	
Other (specify) ▼	225.00	
Full Name (Last, First, Middle Initial) Bertha Medina Mailing Address 1300 1 1/2 Street		Date of Receipt 07 17 2012
City mcallen	State Zip Code TX 78501	Transaction ID : SA11AI.18545 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer	Occupation	400.00 contribution
Name of Employer selfemployed Receipt For:	Occupation physician Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	Aggregate fear-to-bate \$\frac{2800.00}{3}	
Full Name (Last, First, Middle Initial) Bertha Medina		Date of Receipt
Mailing Address 1300 1 1/2 Street	State 7th Coult	08 24 2012
City mcallen	State Zip Code TX 78501	Transaction ID : SA11AI.18892 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	400.00
Name of Employer selfemployed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 3200.00	_ contribution
SUBTOTAL of Receipts This Page (optional).	>	825.00
TOTAL This Period (last page this line number	er 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) Bertha Medina Mailing Address 1300 1 1/2 Street City mcallen FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For:	State Zip Code TX 78501 C Occupation physician Aggregate Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	3600.00	
Mailing Address 602 McColl Circle		Date of Receipt 07 17 2012
City McAllen FEC ID number of contributing federal political committee.	State Zip Code TX 78501	Transaction ID : SA11AI.18547 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 ▼ 2800.00	contribution
Full Name (Last, First, Middle Initial) 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.18894 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 ▼ 3200.00	contribution
SUBTOTAL of Receipts This Page (optional)	•	1200.00
TOTAL This Period (last page this line number	r only)	

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NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	the name and address of any political committee PAC	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Carlos Mego Mailing Address 602 McColl Circle City McAllen FEC ID number of contributing federal political committee. Name of Employer self-employed Receipt For: Primary General Other (specify) Other (specify)	State Zip Code TX 78501 C Occupation physician Aggregate Year-to-Date ▼ 3600.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Manuel Mercado Mailing Address 3002 Santa Susana 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 ▼ 1743.11	Date of Receipt M
Full Name (Last, First, Middle Initial) Manuel Mercado Mailing Address 3002 Santa Susana 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 ▼ 1993.11	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional).	<u> </u>	900.00

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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) Manuel Mercado Mailing Address 3002 Santa Susana		Date of Receipt
City mission	State Zip Code TX 78572	09 27 2012 Transaction ID : SA11AI.19252 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 ▼ 2243.11	
Full Name (Last, First, Middle Initial) Scott Meyer Mailing Address 2100 School Lane		Date of Receipt 07 17 2012
City Mission FEC ID number of contributing federal political committee.	State Zip Code TX 78572	Transaction ID : SA11AI.18552 Amount of Each Receipt this Period 25.00
Name of Employer selfemployed Receipt For: Primary General	Occupation private investor Aggregate Year-to-Date ▼	contribution
Other (specify) ▼ Full Name (Last, First, Middle Initial) Scott Meyer Mailing Address 2100 School Lane	366.41	Date of Receipt
City Mission	State Zip Code TX 78572	08 24 2012 Transaction ID : SA11AI.18899 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer	Occupation	25.00 contribution
selfemployed Receipt For: Primary General Other (specify)	private investor Aggregate Year-to-Date ▼ 391.41	
SUBTOTAL of Receipts This Page (optional)		300.00
TOTAL This Period (last page this line number	r only)	

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NAME OF COMMITTEE (In Full)	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) Scott Meyer		Date of Receipt		
Mailing Address 2100 School Lane		09 27 2012		
City	State Zip Code	Transaction ID : SA11AI.19253		
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	Aggregate rear-to-Date \			
Other (specify) ▼	416.41			
Full Name (Last, First, Middle Initial) Dr. Fausto Meza	·	Date of Receipt		
Mailing Address 4914 Edinburg Road		07 17 2012 _		
City	State Zip Code	Transaction ID : SA11AI.18553		
Edinburg	TX 78539	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С	25.00		
Name of Employer	Occupation	contribution		
selfemployed	private investor			
Receipt For:		-		
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 252.98			
Full Name (Last, First, Middle Initial)		Date of Receipt		
Mailing Address 4914 Edinburg Road		08 24 2012		
City	State Zip Code	Transaction ID : SA11AI.18900		
Edinburg	TX 78539	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	25.00		
Name of Employer	Name of Employer Occupation			
selfemployed	private investor			
Receipt For:	Aggregate Year-to-Date ▼			
Primary General Other (specify) ▼	277.98			
SUBTOTAL of Receipts This Page (optiona	I) >	75.00		
TOTAL This Period (last page this line num	ber 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. Fausto Meza Mailing Address 4914 Edinburg Road City Edinburg FEC ID number of contributing federal political committee.	State Zip Code TX 78539	Date of Receipt 09 27 2012 Transaction ID : SA11AI.19254 Amount of Each Receipt this Period
Name of Employer selfemployed Receipt For: □ Primary □ General □ Other (specify) ▼	Occupation private investor Aggregate Year-to-Date ▼ 302.98	contribution
Full Name (Last, First, Middle Initial) Dr. Emil Milano Mailing Address 225 E. Cornell City	State Zip Code	Date of Receipt 07 17 2012
McAllen FEC ID number of contributing federal political committee. Name of Employer selfemployed	TX 78504 C Occupation	Transaction ID : SA11AI.18554 Amount of Each Receipt this Period 100.00 contribution
Receipt For: Primary General Other (specify) ▼	private investor Aggregate Year-to-Date ▼ 700.00	
Full Name (Last, First, Middle Initial) Dr. Emil Milano Mailing Address 225 E. Cornell City McAllen	State Zip Code TX 78504	Date of Receipt 08 24 2012 Transaction ID : SA11AI.18901 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: Primary General Other (specify) Other	C Occupation private investor Aggregate Year-to-Date ▼	Amount of Each Receipt this Period 100.00 contribution
SUBTOTAL of Receipts This Page (optional)		225.00
TOTAL This Period (last page this line number	r only)	7

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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 FEDERA	L PAC	
Full Name (Last, First, Middle Initial) Dr. Emil Milano Mailing Address 225 E. Cornell		Date of Receipt
City McAllen FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For:	State Zip Code TX 78504 C Occupation private investor	09 27 2012 Transaction ID : SA11AI.19255 Amount of Each Receipt this Period 100.00 contribution
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	
Full Name (Last, First, Middle Initial) Carlos N Mohamed Jr. Mailing Address 2821 Michael Angelo		Date of Receipt 07 17 2012
City Edinburg FEC ID number of contributing federal political committee.	State Zip Code TX 78539	Transaction ID : SA11AI.18555 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 ▼ 700.00	- contribution
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	08 24 2012 Transaction ID : SA11AI.18902 Amount of Each Receipt this Period
Name of Employer self-employed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 800.00	contribution
SUBTOTAL of Receipts This Page (optional)		300.00
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Use separate schedule(s) for each category of the Detailed Summary Page

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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.

NAME OF COMMITTEE (In Full)

BORDER HEALTH FEDERAL PAC

Full Name (Last, First, Middle Initial)

\angle			
Α.	Full Name (Last, First, Middle Initial) Carlos N Mohamed Jr.		Date of Receipt
	Mailing Address 2821 Michael Angelo	09 27 2012 _	
	City	State Zip Code	Transaction ID : SA11AI.19256
	Edinburg	TX 78539	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	100.00
	Name of Employer	Occupation	contribution
	self-employed	physician	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	900.00	
В.	Full Name (Last, First, Middle Initial) Dr. Ruben Mohme		Date of Receipt
	Mailing Address 7309 N. 4th Street		08 24 2012
	City	State Zip Code	Transaction ID : SA11AI.18904
	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
	self-employed	physician	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
С .	Full Name (Last, First, Middle Initial) Dr. Ruben Mohme		Date of Receipt
	Mailing Address 7309 N. 4th Street		09 27 2012
	City	State Zip Code	Transaction ID : SA11AI.19259
	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-employed	physician	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
H	SUBTOTAL of Receipts This Page (optional)	<u>^</u>	300.00
1	TOTAL This Period (last page this line number	only)	

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NAME OF COMMITTEE (In Full)	g the name and address of any political committee	to solicit contributions from such committee.		
BORDER HEALTH FEDER	AL PAC			
Full Name (Last, First, Middle Initial) Dr. Armando Moncada		Date of Receipt		
Mailing Address 1421 North 2nd Street		07 17 2012		
City	State Zip Code	Transaction ID : SA11AI.18557		
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		
self-employee	physician			
Receipt For:	Aggregate Year-to-Date ▼			
Primary General	Aggregate rear-to-bate •			
Other (specify) ▼	2800.00			
Full Name (Last, First, Middle Initial) 3. Dr. Armando Moncada	•	Date of Receipt		
Mailing Address 1421 North 2nd Street		08 242012 _		
City	State Zip Code	Transaction ID : SA11AI.18905		
McAllen	TX 78504	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С	400.00		
Name of Employer	Occupation	contribution		
self-employee	physician			
Receipt For:	Aggregate Year-to-Date ▼			
Primary General Other (specify) ▼	3200.00			
Full Name (Last, First, Middle Initial) 2. Dr. Armando Moncada	<u> </u>	Date of Receipt		
Mailing Address 1421 North 2nd Street		09 27 2012		
City	State Zip Code	Transaction ID : SA11AI.19260		
McAllen	TX 78504	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	400.00		
Name of Employer	contribution			
self-employee	physician			
Receipt For:	Aggregate Year-to-Date ▼			
Primary General Other (specify) ▼	3600.00			
SUBTOTAL of Receipts This Page (optional	al)	1200.00		
TOTAL This Period (last page this line num	nber 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 Morales Mailing Address 3325 Kent Lane	Carlos Morales						
City mcallen FEC ID number of contributing federal political committee.	State Zip Code TX 78503	7 17 2012 Transaction ID : SA11AI.18558 Amount of Each Receipt this Period 400.00					
Name of Employer selfemployed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 2800.00	contribution					
Full Name (Last, First, Middle Initial) Carlos Morales Mailing Address 3325 Kent Lane City	Carlos Morales Mailing Address 3325 Kent Lane						
mcallen FEC ID number of contributing federal political committee.	State Zip Code TX 78503	Transaction ID : SA11AI.18906 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 ▼ 3200.00						
Full Name (Last, First, Middle Initial) Carlos Morales Mailing Address 3325 Kent 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 mcallen FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For:	State Zip Code TX 78503 C Occupation physician Aggregate Year-to-Date ▼	Transaction ID : SA11AI.19261 Amount of Each Receipt this Period 400.00 contribution					
Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)	3600.00	1200.00					
TOTAL This Period (last page this line number	r only)						

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NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERA	L PAC	
Full Name (Last, First, Middle Initial) Leonel Moreno Mailing Address 1608 Woods 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 ▼ 1750.00	Date of Receipt 07 17 2012 Transaction ID : SA11AI.18560 Amount of Each Receipt this Period 250.00 contribution
Full Name (Last, First, Middle Initial) Leonel Moreno Mailing Address 1608 Woods 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 ▼ 2000.00	Date of Receipt M M
Full Name (Last, First, Middle Initial) Leonel Moreno Mailing Address 1608 Woods 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 ▼ 2250.00	Date of Receipt 9 27 2012 Transaction ID : SA11AI.19263 Amount of Each Receipt this Period 250.00 contribution
SUBTOTAL of Receipts This Page (optional)	· • • • • • • • • • • • • • • • • • • •	750.00

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	the name and address of any political committee	
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	L PAC	
Full Name (Last, First, Middle Initial) Dr. Jesse Naranjo Mailing Address 2304 N. Cynthio Long		Date of Receipt
Mailing Address 3301 N. Cynthia Lane		08 24 7 2012
City	State Zip Code	Transaction ID : SA11AI.18911
McAllen FEO. ID and the second in the second	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-employed	physician	_
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial) 3. Dr. Jesse Naranjo		Date of Receipt
Mailing Address 3301 N. Cynthia Lane		M = M / D = D / Y = Y = Y
City	State Zip Code	09 27 2012 Transaction ID : \$A11A1 19265
McAllen	TX 78504	Transaction ID : SA11AI.19265 Amount of Each Receipt this Period
FEC ID number of contributing	1000	
federal political committee.	C	100.00
Name of Employer	Occupation	contribution
self-employed	physician	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General Other (specify) ▼	400.00	
Full Name (Last, First, Middle Initial) Lauren Naylor		Date of Receipt
Mailing Address 3020 Melinda Drive		07 17 2012
City	State Zip Code	Transaction ID : SA11AI.18564
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:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
SUBTOTAL of Receipts This Page (ontional)		250.00
TOTAL This Period (last page this line numb	per only)	

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	the name and address of any political committee	
BORDER HEALTH FEDERA	L PAC	
Full Name (Last, First, Middle Initial) Lauren Naylor		Date of Receipt
Mailing Address 3020 Melinda Drive		08 24 2012
City	State Zip Code	Transaction ID : SA11AI.18912
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:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	400.00	
Full Name (Last, First, Middle Initial) 3. Lauren Naylor	1	Date of Receipt
Mailing Address 3020 Melinda Drive		09 27 2012
City	State Zip Code	Transaction ID : SA11AI.19266
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 Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
Full Name (Last, First, Middle Initial) Dr. William O'Callaghan		Date of Receipt
Mailing Address 111 NE Augusta Square		08 24 2012
City	State Zip Code	Transaction ID : SA11AI.18913
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-employed	physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	
SUBTOTAL of Receipts This Page (optional)		200.00
TOTAL This Period (last page this line numb	per 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) Dr. William O'Callaghan Mailing Address 111 NE Augusta Square		Date of Receipt
City McAllen FEC ID number of contributing	State Zip Code TX 78504	7 2012 Transaction ID : SA11AI.19268 Amount of Each Receipt this Period
federal political committee. Name of Employer self-employed Receipt For:	Occupation physician Aggregate Year-to-Date ▼	100.00 contribution
Primary General Other (specify) ▼	400.00	
Full Name (Last, First, Middle Initial) Dr. Alfonso Ochoa Mailing Address 1901 W. 18th Street		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 Weslaco	State Zip Code TX 78596	Transaction ID : SA11AI.18914 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer self-employed Receipt For:	Occupation physician	contribution
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Dr. Alfonso Ochoa		Date of Receipt
Mailing Address 1901 W. 18th Street City	State Zip Code	09 27 2012
Weslaco	TX 78596	Transaction ID : SA11AI.19269 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer self-employed	Occupation physician	contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
SUBTOTAL of Receipts This Page (optional)	· · · · · · · · · · · · · · · · · · ·	300.00
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or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	· · · · · · · · · · · · · · · · · · ·	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Victor Ogunlana Mailing Address 2604 Santa Teresa City Mission FEC ID number of contributing federal political committee. Name of Employer self-employed Receipt For: Primary General Other (specify) Other (specify)	State Zip Code TX 78572 C Occupation doctor Aggregate Year-to-Date ▼ 350.00	Date of Receipt O7 17 2012 Transaction ID: SA11AI.18567 Amount of Each Receipt this Period 50.00 contribution
Full Name (Last, First, Middle Initial) Dr. Victor Ogunlana Mailing Address 2604 Santa Teresa 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 78572 C Occupation doctor Aggregate Year-to-Date ▼ 400.00	Date of Receipt M
Full Name (Last, First, Middle Initial) Dr. Victor Ogunlana Mailing Address 2604 Santa Teresa City Mission FEC ID number of contributing federal political committee. Name of Employer self-employed Receipt For: Primary General Other (specify) Other (specify)	State Zip Code TX 78572 C Occupation doctor Aggregate Year-to-Date ▼ 450.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional).	>	150.00

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for each category of the 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) Dr. Noel Olveira Date of Receipt Mailing Address 9917 Bentsen Road 07 2012 City State Zip Code Transaction ID: SA11AI.18568 TX McAllen 78504 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. contribution Name of Employer Occupation selfemployed physician Receipt For: Aggregate Year-to-Date ▼ Primary General 700.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Noel Olveira Date of Receipt Mailing Address 9917 Bentsen Road 08 24 2012 City State Zip Code Transaction ID: SA11AI.18916 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 800.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Noel Olveira Date of Receipt Mailing Address 9917 Bentsen Road 09 27 2012 City State Zip Code Transaction ID: SA11AI.19271 TX McAllen 78504 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. contribution Name of Employer Occupation selfemployed physician Receipt For: Aggregate Year-to-Date ▼ Primary General 900.00 Other (specify) 300.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	PAC	
Full Name (Last, First, Middle Initial) Dr. Athanaji Orfanos Mailing Address 3013 Lakeshore Drive		Date of Receipt O7 17 2012
City Edinburg	State Zip Code TX 78539	Transaction ID : SA11AI.18569 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00 contribution
Name of Employer selfemployed	Occupation private investor	SSIMIBUION
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	
Full Name (Last, First, Middle Initial) Dr. Athanaji Orfanos Mailing Address 3013 Lakeshore Drive		Date of Receipt
City Edinburg	State Zip Code TX 78539	08 24 2012 Transaction ID : SA11AI.18917 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer selfemployed	Occupation private investor	contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	
Full Name (Last, First, Middle Initial) Dr. Athanaji Orfanos		Date of Receipt
Mailing Address 3013 Lakeshore Drive		09 27 / 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.19272 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 ▼ 900.00	contribution
SUBTOTAL of Receipts This Page (optional)		300.00
TOTAL This Period (last page this line number	r only)	

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NAME OF COMMITTEE (In Full)	g the name and address of any political committee	to solicit contributions from such committee.
BORDER HEALTH FEDER	AL PAC	
Full Name (Last, First, Middle Initial) Mr. Jose Ortega		Date of Receipt
Mailing Address 2504 Xanthisma		07 17 7 2012
City	State Zip Code	Transaction ID : SA11AI.18571
mcallen	TX 78504	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer	Occupation	contribution
self-employed	private investor	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	Ayyreyate rear-to-Date ▼	
Other (specify) ▼	440.45	
Full Name (Last, First, Middle Initial) B. Mr. Jose Ortega		Date of Receipt
Mailing Address 2504 Xanthisma		08 24 2012 _
City	State Zip Code	Transaction ID : SA11AI.18919
mcallen	TX 78504	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	20.00
Name of Employer	Occupation	contribution
self-employed	private investor	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	460.45	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address 2504 Xanthisma		09 27 _2012 _
City	State Zip Code	Transaction ID : SA11AI.19274
mcallen	TX 78504	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer	Occupation	contribution
self-employed	private investor	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	480.45	
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SUBTOTAL of Receipts This Page (optional	al)	60.00
TOTAL This Period (last page this line nun	nber only)	

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12 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) Armando Osio Date of Receipt Mailing Address 600 Tulip 07 2012 City State Zip Code Transaction ID: SA11AI.18573 TX mcallen 78504 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. contribution Name of Employer Occupation selfemployed physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1750.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Armando Osio Date of Receipt Mailing Address 600 Tulip 08 2012 24 City State Zip Code Transaction ID: SA11AI.18921 TX mcallen 78504 Amount of Each Receipt this Period FEC ID number of contributing 250.00 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) c. Armando Osio Date of Receipt Mailing Address 600 Tulip 09 27 2012 City Zip Code State Transaction ID: SA11AI.19276 TX mcallen 78504 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. contribution Name of Employer Occupation selfemployed physician Receipt For: Aggregate Year-to-Date ▼ Primary General 2250.00 Other (specify) 750.00 SUBTOTAL of Receipts This Page (optional).....

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	ng the name and address of any political committee	to solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDER	AL PAC				
Full Name (Last, First, Middle Initial) Carmen Osorio-Castillo		Date of Receipt			
Mailing Address 1601 Sebastian Drive		07 17 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.18574			
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	private investor				
Receipt For:	Aggregate Year-to-Date ▼				
Primary General Other (specify) ▼	350.00				
Full Name (Last, First, Middle Initial)	, ,				
3. Carmen Osorio-Castillo		Date of Receipt			
Mailing Address 1601 Sebastian Drive		08 24 2012			
City	State Zip Code	Transaction ID : SA11AI.18922			
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	private investor				
Receipt For:	Aggregate Year-to-Date ▼				
Primary General Other (specify) ▼	400.00				
Full Name (Last, First, Middle Initial) Carmen Osorio-Castillo	l	Date of Receipt			
Mailing Address 1601 Sebastian Drive		09 27 2012			
City	State Zip Code	Transaction ID : SA11AI.19277			
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	private investor				
Receipt For:	Aggregate Year-to-Date ▼	7			
Primary General					
Other (specify) ▼	450.00				
SUBTOTAL of Receipts This Page (option	nal)	150.00			
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TOTAL This Period (last page this line nu	mber 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. Name of Employer selfemployed Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial)	State Zip Code TX 78501 C Occupation physician Aggregate Year-to-Date ▼ 1750.00	Date of Receipt 07 17 2012 Transaction ID: SA11AI.18575 Amount of Each Receipt this Period 250.00 contribution
Mailing Address 121 E. Quamasia #148 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 08 24 2012 Transaction ID : SA11AI.18923 Amount of Each Receipt this Period 250.00 contribution
Full Name (Last, First, Middle Initial) Fernando Otero Mailing Address 121 E. Quamasia #148 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 ▼ 2250.00	Date of Receipt 9 27 2012 Transaction ID: SA11AI.19278 Amount of Each Receipt this Period 250.00 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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Full Name (Last, First, Middle Initial) Kip Owen Mailing Address 2305 Red River		
City mcallen 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 ▼ 575.00	Date of Receipt M
Full Name (Last, First, Middle Initial) Kip Owen Mailing Address 2305 Red River City mcallen	State Zip Code TX 78572	Date of Receipt 08 24 2012 Transaction ID : SA11AI.18924 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 ▼ 675.00	contribution
Full Name (Last, First, Middle Initial) Kip Owen Mailing Address 2305 Red River City mcallen 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 ▼	Date of Receipt 09 27 2012 Transaction ID : SA11AI.19279 Amount of Each Receipt this Period 100.00 contribution
SUBTOTAL of Receipts This Page (optional)	300.00

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Detailed Summary Page	×	11a		11b		11c		12	_	
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NAME OF COMMITTEE (In Full)	ng the name and address of any political committee	e to solicit contributions from such committee.
BORDER HEALTH FEDER.	AL PAC	
Full Name (Last, First, Middle Initial) Mr. Esteban Palacios Jr.		Date of Receipt
Mailing Address P.O. Box 3669		07 17 2012
City	State Zip Code	Transaction ID : SA11AI.18577
Edinburg	TX 78540	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:	Aggregate Year-to-Date ▼	
Primary General	Aggregate real-to-Date ▼	
Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initial) Mr. Esteban Palacios Jr.	'	Date of Receipt
Mailing Address P.O. Box 3669		08 24 2012
City	State Zip Code	Transaction ID : SA11AI.18925
Edinburg	TX 78540	Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.	C	50.00
	Occupation	contribution
Name of Employer selfemployed	Occupation	
	private investor	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	400.00	
Full Name (Last, First, Middle Initial) Mr. Esteban Palacios Jr.		Date of Receipt
Mailing Address P.O. Box 3669		M = M / D = D / Y = Y = Y
City	State Zip Code	09 27 2012
Edinburg	TX 78540	Transaction ID : SA11AI.19280 Amount of Each Receipt this Period
		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00 contribution
Name of Employer	Occupation	Contribution
selfemployed	private investor	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	450.00	
SUBTOTAL of Receipts This Page (ontion	al)	150.00
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NAME OF COMMITTEE (In Full)	the name and address of any political committee t	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. Name of Employer selfemployed Receipt For: Primary Other (specify) General Other (specify)	State Zip Code TX 78504 C Occupation physician Aggregate Year-to-Date ▼ 1750.00	Date of Receipt 07 17 2012 Transaction ID: SA11AI.18578 Amount of Each Receipt this Period 250.00 contribution
Full Name (Last, First, Middle Initial) Prakash Palimar Mailing Address 121 Canary 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 08 24 2012 Transaction ID : SA11AI.18926 Amount of Each Receipt this Period 250.00 contribution
Full Name (Last, First, Middle Initial) Prakash Palimar Mailing Address 121 Canary 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 78504 C Occupation physician Aggregate Year-to-Date ▼ 2250.00	Date of Receipt M
SUBTOTAL of Receipts This Page (optional)	>	750.00

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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) Umesh Pathak Mailing Address 2004 Alexander Drive		Date of Receipt
City	State Zip Code	08 24 2012 Transaction ID : SA11AI.18927
weslaco FEC ID number of contributing	TX 78596	Amount of Each Receipt this Period
federal political committee. Name of Employer	Occupation	contribution
selfemployed Receipt For:	physician Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) 3. Umesh Pathak Mailing Address 2004 Alexander Drive		Date of Receipt
City	State Zip Code	09 27 2012 Transaction ID : SA11AI.19283
weslaco	TX 78596	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) Dr. Guillermo Pechero		Date of Receipt
Mailing Address 2312 La Condesa		07 17 2012
City Edinburg	State Zip Code TX 78539	Transaction ID : SA11AI.18580 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	Occupation physician Aggregate Year-to-Date ▼	- contribution
Other (specify)	2500.00	
SUBTOTAL of Receipts This Page (optional)	>	450.00
TOTAL This Period (last page this line number	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	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
Edinburg	TX 78539	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer	Occupation	250.00 contribution
self-employed	physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2750.00	
Full Name (Last, First, Middle Initial) Dr. Guillermo Pechero Mailing Address 2010 L. October		Date of Receipt
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 ▼ 3000.00	Transaction ID : SA11AI.19284 Amount of Each Receipt this Period 250.00 contribution
Full Name (Last, First, Middle Initial) Eduardo Peguero Mailing Address P.O.Box 5959		Date of Receipt
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 78502 C Occupation physcian Aggregate Year-to-Date ▼ 1050.00	Transaction ID : SA11AI.18581 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	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 FEDERAL	_ PAC	
Full Name (Last, First, Middle Initial) Eduardo Peguero Mailing Address P.O.Box 5959 City McAllen FEC ID number of contributing federal political committee. Name of Employer Self-employed	State Zip Code TX 78502 C Occupation physcian	Date of Receipt 08 24 2012 Transaction ID : SA11Al.18929 Amount of Each Receipt this Period 150.00 contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	
Full Name (Last, First, Middle Initial) B. Eduardo Peguero Mailing Address P.O.Box 5959 City McAllen FEC ID number of contributing	State Zip Code TX 78502	Date of Receipt 09 27 2012 Transaction ID : SA11AI.19285 Amount of Each Receipt this Period
Receipt For: Primary Other (specify) ▼ Name of Employer Self-employed General	Occupation physcian Aggregate Year-to-Date ▼ 1350.00	contribution
Full Name (Last, First, Middle Initial) Dr. Alberto Pena Mailing Address 3716 Tigris City Edinburg FEC ID number of contributing federal political committee. Name of Employer self-employed Receipt For: Primary General Other (specify) Other (specify)	State Zip Code TX 78539 C Occupation doctor Aggregate Year-to-Date ▼ 314.90	Date of Receipt M
SUBTOTAL of Receipts This Page (optional).	>	350.00
TOTAL This Period (last page this line number	er 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. Alberto Pena Date of Receipt Mailing Address 3716 Tigris 08 2012 24 City State Zip Code Transaction ID: SA11AI.18930 TX Edinburg 78539 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. contribution Name of Employer Occupation self-employed doctor Receipt For: Aggregate Year-to-Date ▼ Primary General 364.90 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Alberto Pena Date of Receipt Mailing Address 3716 Tigris 09 2012 27 City State Zip Code Transaction ID: SA11AI.19286 TX Edinburg 78539 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. contribution Name of Employer Occupation self-employed doctor Receipt For: Aggregate Year-to-Date ▼ Primary General 414.90 Other (specify) Full Name (Last, First, Middle Initial) c. Jose Pena Date of Receipt Mailing Address 100 Bluebird 07 17 2012 City State Zip Code Transaction ID: SA11AI.18583 TX mcallen 78504 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 2800.00 Other (specify) 500.00 SUBTOTAL of Receipts This Page (optional).....

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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) Jose Pena Mailing Address 100 Bluebird	Jose Pena			
City mcallen	State Zip Code TX 78504	08 24 2012 Transaction ID : SA11AI.18931 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee. Name of Employer	Occupation	400.00 contribution		
selfemployed Receipt For: Primary General Other (specify) ▼	physician Aggregate Year-to-Date ▼ 3200.00			
Full Name (Last, First, Middle Initial) 3. Jose Pena Mailing Address 100 Bluebird	Date of Receipt 09 27 2012			
City mcallen FEC ID number of contributing federal political committee.	State Zip Code TX 78504	Transaction ID : SA11AI.19287 Amount of Each Receipt this Period 400.00		
Name of Employer selfemployed Receipt For: □ Primary □ General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 3600.00	contribution		
Full Name (Last, First, Middle Initial) Juan Pena Mailing Address 905 S. Huisache Court	Full Name (Last, First, Middle Initial) Juan Pena			
City pharr FEC ID number of contributing federal political committee.	State Zip Code TX 78577	Transaction ID : SA11AI.18584 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 ▼ 2800.00	contribution		
SUBTOTAL of Receipts This Page (optional)	<u>·</u>	1200.00		
TOTAL This Period (last page this line numbe	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) Juan Pena Mailing Address 905 S. Huisache Court	Juan Pena			
City	State Zip Code	08 24 2012 Transaction ID : SA11AI.18932		
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 private investor Aggregate Year-to-Date ▼ 3200.00	contribution		
Full Name (Last, First, Middle Initial) Juan Pena Mailing Address 905 S. Huisache Court City	Date of Receipt 09 27 2012 Transaction ID : SA11AL10288			
pharr FEC ID number of contributing federal political committee.	State Zip Code TX 78577	Transaction ID : SA11AI.19288 Amount of Each Receipt this Period 400.00 contribution		
Name of Employer self-employed Receipt For: Primary General Other (specify) ▼	Occupation private investor Aggregate Year-to-Date ▼ 3600.00	Contribution		
Full Name (Last, First, Middle Initial) Dr. Raul Pena Mailing Address 3500 San Clemente	State Zip Code	Date of Receipt 07 17 2012		
City Mission FEC ID number of contributing federal political committee.	TX 78572	Transaction ID : SA11AI.18585 Amount of Each Receipt this Period 125.00		
Name of Employer self-employed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 250.00	contribution		
SUBTOTAL of Receipts This Page (optional)	<u> </u>	925.00		
TOTAL This Period (last page this line numbe	r 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) Dr. Raul Pena Mailing Address 3500 San Clemente		Date of Receipt				
City Mission	City State Zip Code					
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 ▼ 375.00					
Full Name (Last, First, Middle Initial) Dr. Raul Pena Mailing Address 3500 San Clemente		Date of Receipt				
City Mission	State Zip Code TX 78572	09 27 2012 Transaction ID : SA11AI.19289 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	325.00				
Name of Employer self-employed	Occupation physician	- contribution				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00					
Full Name (Last, First, Middle Initial) Dr. Nicholas Pereira		Date of Receipt				
Mailing Address 7005 North Cynthia		07 17 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.18586 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 ▼ 850.00	- contribution				
SUBTOTAL of Receipts This Page (optional)		550.00				
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) Ernie Perez Mailing Address P.O. Box 5360		Date of Receipt	
City	State Zip Code	09 27 2012 Transaction ID : SA11AI.19290	
mcallen	TX 78502	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	25.00	
Name of Employer	Occupation private investor	contribution	
self-employed Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 225.00		
Full Name (Last, First, Middle Initial) Dr. Florencia Perez Mailing Address 4600 Victoria	Date of Receipt		
City McAllen	City State Zip Code		
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period 200.00	
Name of Employer selfemployed	Occupation private investor	contribution	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1196.10		
Full Name (Last, First, Middle Initial) Claudia Pierson		Date of Receipt	
Mailing Address 6912 N. Peking		07 17 _ 2012 _	
City mcallen	State Zip Code TX 78501	Transaction ID : SA11AI.18591 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	180.00	
Name of Employer selfemployed	Occupation physician	contribution	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1235.11		
SUBTOTAL of Receipts This Page (optional)		405.00	
TOTAL This Period (last page this line number	only)		

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	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1595.11	
C.	Full Name (Last, First, Middle Initial) Mr. Francisco Pina Mailing Address 129 E. Jones		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	State Zip Code TX 78577	Transaction ID : SA11AI.19294
	Pharr FEC ID number of contributing federal political committee.	TX 78577	Amount of Each Receipt this Period 25.00 contribution
	Name of Employer	Occupation	CONTIDUTION
	selfemployed	private investor	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

physician

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385.00

selfemployed

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NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL F	PAC	
Full Name (Last, First, Middle Initial) Ms Jessica Porras Mailing Address 5128 North 10th Street		Date of Receipt
City	State Zip Code	09 27 2012 Transaction ID : SA11AI.19295
McAllen	TX 78504	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	25.00
Name of Employer self-employee	Occupation private investor	contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	
Full Name (Last, First, Middle Initial) 3. Sergio Preciado Mailing Address 521 F. Bluebird	Date of Receipt	
Mailing Address 521 E. Bluebird City mcallen	State Zip Code TX 78504	07 17 2012 Transaction ID : SA11AI.18595 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00 contribution
Name of Employer selfemployed	Occupation physician	COTHEDUTION
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1553.88	
Full Name (Last, First, Middle Initial) Sergio Preciado		Date of Receipt
Mailing Address 521 E. Bluebird		08 24 2012
City mcallen	State Zip Code TX 78504	Transaction ID : SA11AI.18941 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 ▼ 1803.88	
SUBTOTAL of Receipts This Page (optional)		525.00
TOTAL This Period (last page this line number	only)	

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NAME OF COMMITTEE (In Full)	ng the name and address of any political committee	e to solicit contributions from such committee.
BORDER HEALTH FEDERA	AL PAC	
Full Name (Last, First, Middle Initial) Sergio Preciado		Date of Receipt
Mailing Address 521 E. Bluebird		09 27 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.19296
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
selfemployed	physician	
Receipt For:		
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	2053.88	
Full Name (Last, First, Middle Initial) B. Dr. Ernesto Ramirez		Date of Receipt
Mailing Address P.O.Box 720298		08 24 2012 _
City	State Zip Code	Transaction ID : SA11AI.18943
McAllen	TX 78502	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 ▼	
Full Name (Last, First, Middle Initial)		
c. Dr. Ernesto Ramirez		Date of Receipt
Mailing Address P.O.Box 720298		09 27 2012 _
City	State Zip Code	Transaction ID : SA11AI.19299
McAllen	TX 78502	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) ▼	400.00	
SUBTOTAL of Receipts This Page (option	al)	450.00
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TOTAL This Period (last page this line nur	mber only)	

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	Statements may not be sold or used by any pers he 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 Ramirez		Date of Receipt
Mailing Address 1608 Woods Drive		07 17 2012
City mission	State Zip Code TX 78572	Transaction ID : SA11AI.18598 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 ▼ 1750.00	- contribution
Full Name (Last, First, Middle Initial) Sergio Ramirez Mailing Address 1608 Woods Drive		Date of Receipt
City mission	State Zip Code TX 78572	7 Transaction ID : SA11AI.18945 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 ▼ 2000.00	
Full Name (Last, First, Middle Initial) C. Sergio Ramirez		Date of Receipt
Mailing Address 1608 Woods Drive		09 27 2012
City mission	State Zip Code TX 78572	Transaction ID : SA11AI.19301 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	contribution
selfemployed Receipt For: □ Primary □ General □ Other (specify) ▼	physician Aggregate Year-to-Date ▼ 2250.00	
SUBTOTAL of Receipts This Page (optional).		750.00
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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) Gustavo Ramos Mailing Address 1301 S. Perking		Date of Receipt
City mcallen	State Zip Code TX 78501	07 17 2012 Transaction ID : SA11AI.18599 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 ▼ 2800.00	
Full Name (Last, First, Middle Initial) Gustavo Ramos Mailing Address 1301 S. Perking		Date of Receipt 08 24 2012
City mcallen FEC ID number of contributing federal political committee.	State Zip Code TX 78501	Transaction ID : SA11AI.18946 Amount of Each Receipt this Period 400.00
Name of Employer selfemployed Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation physicain Aggregate Year-to-Date ▼ 3200.00	contribution
Full Name (Last, First, Middle Initial) Gustavo Ramos Mailing Address 1301 S. Perking		Date of Receipt 09 27 2012
City mcallen	State Zip Code TX 78501	Transaction ID : SA11AI.19302 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer	Occupation	400.00 contribution
selfemployed Receipt For: Primary General Other (specify)	physicain Aggregate Year-to-Date ▼ 3600.00	
SUBTOTAL of Receipts This Page (optional)		1200.00
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 t	
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	_ PAC	
Full Name (Last, First, Middle Initial) Mr. Mario Rangel Mailing Address 3213 Lance Lot Lane		Date of Receipt
	01-11-	07 17 2012
City Edinburg	State Zip Code TX 78539	Transaction ID : SA11AI.18601
FEC ID number of contributing federal political committee.	C 76559	Amount of Each Receipt this Period 25.00
Name of Employer	Occupation	contribution
selfemployed	private investor	4
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 253.28	
Full Name (Last, First, Middle Initial) 3. Mr. Mario Rangel		Date of Receipt
Mailing Address 3213 Lance Lot Lane		M M / D D / Y Y Y Y Y Y
City	State Zip Code	08 24 2012 Transaction ID : SA11AI.18949
Edinburg	TX 78539	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	25.00
Name of Employer	Occupation	contribution
selfemployed	private investor	4
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 278.28	
Full Name (Last, First, Middle Initial) C. Mr. Mario Rangel		Date of Receipt
Mailing Address 3213 Lance Lot Lane		09 27 2012
City	State Zip Code	Transaction ID : SA11AI.19305
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	1
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	303.28	
SUBTOTAL of Receipts This Page (optional)		75.00
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) Ms Soraya Rangel Mailing Address 2010 S. Cynthia Ste 110		Date of Receipt
City	State Zip Code	09 27 2012 Transaction ID : SA11AI.19307
McAllen	TX 78503	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer selfemployed	Occupation private investor	contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 206.56	
Full Name (Last, First, Middle Initial) R.V. Reddy Mailing Address 1500 Southland Drive		Date of Receipt
Mailing Address 1500 Southland Drive City weslaco	State Zip Code TX 78596	07 17 2012 Transaction ID : SA11AI.18603 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 70030	125.00
Name of Employer selfemployed	Occupation physician	contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 875.00	
Full Name (Last, First, Middle Initial) R.V. Reddy		Date of Receipt
Mailing Address 1500 Southland Drive		08 24 2012
City weslaco	State Zip Code TX 78596	Transaction ID : SA11AI.18951 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer selfemployed	Occupation physician	contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)	· · · · · · · · · · · · · · · · · · ·	275.00
TOTAL This Period (last page this line number	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) R.V. Reddy Mailing Address 1500 Southland Drive		Date of Receipt
City	State Zip Code	09 27 2012 Transaction ID : SA11AI.19308
weslaco	TX 78596	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer selfemployed Receipt For:	Occupation physician	contribution
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1125.00	
Full Name (Last, First, Middle Initial) 3. Dr. Manuel Reinoso Mailing Address 1400 F Bidge quite 7		Date of Receipt
Mailing Address 1400 E Ridge suite 7 City	State Zip Code	09 27 2012 Transaction ID : SA11AI.19309
McAllen	TX 78503	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer self-employee	Occupation physician	contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	
Full Name (Last, First, Middle Initial) William Restrepo		Date of Receipt
Mailing Address 1117 S. Cynthia		07 17 2012
City mcallen	State Zip Code TX 78504	Transaction ID : SA11AI.18605 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 ▼ 1750.00	
SUBTOTAL of Receipts This Page (optional)		400.00
TOTAL This Period (last page this line number	only)	

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NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	PAC	
Full Name (Last, First, Middle Initial) William Restrepo Mailing Address 4447 S. Cupthia		Date of Receipt
Mailing Address 1117 S. Cynthia		08 24 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.18953
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
selfemployed	physician	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	00 0	
Other (specify) ▼	2000.00	
Full Name (Last, First, Middle Initial) William Restrepo		Date of Receipt
Mailing Address 1117 S. Cynthia		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	09 27 2012 Transaction ID : \$A11 At 19310
mcallen	TX 78504	Transaction ID : SA11AI.19310 Amount of Each Receipt this Period
		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) ▼	2250.00	
Full Name (Last, First, Middle Initial) . Homero Rivas		Date of Receipt
Mailing Address 100 E. Houston		07 17 2012
City	State Zip Code	Transaction ID : SA11AI.18607
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) ▼	1730.92	
SUBTOTAL of Receipts This Page (optional)		750.00
TOTAL This Period (last page this line number	er only)	

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Full Name (Last, First, Middle Initial)	. FAC	
Homero Rivas Mailing Address 100 E. Houston		Date of Receipt
City	State Zip Code	08 24 2012 Transaction ID : SA11AI.18955
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	Aggregate Year-to-Date ▼	
Other (specify) ▼	1980.92	
Full Name (Last, First, Middle Initial) Homero Rivas	•	Date of Receipt
Mailing Address 100 E. Houston		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	09 27 2012 Transaction ID : SA11Al.19312
mcallen	TX 78501	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: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2230.92	
Full Name (Last, First, Middle Initial)	1	Date of Descipt
Benjamin Robalino Mailing Address 1217 S. Cynthia		Date of Receipt 07 17 2012
City mcallen	State Zip Code TX 78501	Transaction ID : SA11AI.18608 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
	Occupation	contribution
Name of Employer		1
selfemployed	physcian	
selfemployed Receipt For:	physcian Aggregate Year-to-Date ▼	
selfemployed	1, ,	
selfemployed Receipt For: Primary General	Aggregate Year-to-Date ▼ 1750.00	750.00

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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) Benjamin Robalino Date of Receipt Mailing Address 1217 S. Cynthia 80 2012 24 City State Zip Code Transaction ID: SA11AI.18956 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 selfemployed physcian Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Benjamin Robalino Date of Receipt Mailing Address 1217 S. Cynthia 09 27 2012 City State Zip Code Transaction ID: SA11AI.19313 TX mcallen 78501 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. contribution Name of Employer Occupation selfemployed physcian Receipt For: Aggregate Year-to-Date ▼ Primary General 2250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Martin Rocha Date of Receipt Mailing Address P.O. Box 662 07 17 2012 City Zip Code State Transaction ID: SA11AI.18609 TX Santa Rosa 78593 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. contribution Name of Employer Occupation selfemployed private investor Receipt For: Aggregate Year-to-Date ▼ Primary General 309.85 Other (specify)

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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) Mr. Martin Rocha Mailing Address P.O. Box 662	Date of Receipt	
City Santa Rosa FEC ID number of contributing federal political committee.	State Zip Code TX 78593	08 24 2012 Transaction ID : SA11AI.18957 Amount of Each Receipt this Period 50.00
Name of Employer selfemployed Receipt For: □ Primary □ General □ Other (specify) ▼	Occupation private investor Aggregate Year-to-Date ▼ 359.85	contribution
Full Name (Last, First, Middle Initial) Mr. Martin Rocha Mailing Address P.O. Box 662	State 7in Cod-	Date of Receipt 09 27 2012
City Santa Rosa FEC ID number of contributing federal political committee.	State Zip Code TX 78593	Transaction ID : SA11AI.19314 Amount of Each Receipt this Period 50.00
Name of Employer selfemployed Receipt For: Primary General Other (specify) ▼	Occupation private investor Aggregate Year-to-Date ▼ 409.85	contribution
Full Name (Last, First, Middle Initial) Paulette Saca Mailing Address 109 Condor 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 self-employed Receipt For: Primary General Other (specify)	TX 78504 C Occupation private investor Aggregate Year-to-Date ▼ 525.00	Transaction ID : SA11AI.18613 Amount of Each Receipt this Period 75.00 contribution
SUBTOTAL of Receipts This Page (optional)		175.00
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) A. Paulette Saca Mailing Address 109 Condor		Date of Receipt
City mcallen	State Zip Code TX 78504	08 24 2012 Transaction ID : SA11AI.18962
FEC ID number of contributing federal political committee.	C 78504	Amount of Each Receipt this Period 75.00
Name of Employer self-employed	Occupation private investor	- contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) Paulette Saca Mailing Address 109 Condor		Date of Receipt
City mcallen	State Zip Code TX 78504	09 27 2012 Transaction ID : SA11AI.19319 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	75.00
Name of Employer self-employed Receipt For:	Occupation private investor	- contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 675.00	
Full Name (Last, First, Middle Initial) Javier Saenz		Date of Receipt
Mailing Address 2308 Monaco Drive		07 17 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.18614 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 ▼ 2800.00	- contribution
SUBTOTAL of Receipts This Page (optional)		550.00
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) Javier Saenz Mailing Address 2308 Monaco Drive City mission FEC ID number of contributing	State Zip Code TX 78574	Date of Receipt 08 24 2012 Transaction ID : SA11AI.18963 Amount of Each Receipt this Period
federal political committee. Name of Employer selfemployed Receipt For: Primary General Other (specify)	Occupation physician Aggregate Year-to-Date ▼ 3200.00	400.00 contribution
Full Name (Last, First, Middle Initial) 3. Javier Saenz Mailing Address 2308 Monaco Drive		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. Name of Employer selfemployed Receipt For: Primary General Other (specify) ▼	State Zip Code TX 78574 C Occupation physician Aggregate Year-to-Date ▼ 3600.00	Transaction ID : SA11Al.19320 Amount of Each Receipt this Period 400.00 contribution
Full Name (Last, First, Middle Initial) JJ Saenz Mailing Address 2400 S.E. Augusta Square 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 ▼ 1750.00	Date of Receipt 07 17 2012 Transaction ID : SA11Al.18615 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	only)	

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NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL I	PAC	
Full Name (Last, First, Middle Initial) JJ Saenz Mailing Address 2400 S.E. Augusta Square		Date of Receipt
City	State Zip Code	08 24 2012 Transaction ID : SA11AI.18964
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 ▼ 2000.00	
Full Name (Last, First, Middle Initial) 3. JJ Saenz Mailing Address 2400 S.E. Augusta Square		Date of Receipt
City	State 7in Codo	09 27 2012
City mcallen	State Zip Code TX 78503	Transaction ID : SA11AI.19321
FEC ID number of contributing federal political committee.	C 78503	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 ▼ 2250.00	
Full Name (Last, First, Middle Initial) C. Larry Safir		Date of Receipt
Mailing Address 3300 S. 2nd suite 10		07 17 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.18616
FEC ID number of contributing federal political committee.	C 78503	Amount of Each Receipt this Period 400.00
Name of Employer	Occupation	contribution
self-employed	private investor	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	2800.00	
SUBTOTAL of Receipts This Page (optional)		900.00
TOTAL This Period (last page this line number	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) Larry Safir Mailing Address 2200 S. 2nd		Date of Receipt
Mailing Address 3300 S. 2nd suite 10		08 24 2012
City	State Zip Code	Transaction ID : SA11AI.18965
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
self-employed	private investor	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	3200.00	
Full Name (Last, First, Middle Initial) Larry Safir		Date of Receipt
Mailing Address 3300 S. 2nd		M = M / D = D / Y = Y = Y
suite 10	State 7% Cada	09 27 2012
City	State Zip Code TX 78503	Transaction ID : SA11AI.19322
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
self-employed	private investor	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	3600.00	
Full Name (Last, First, Middle Initial) Juan Salazar		Date of Receipt
Mailing Address 801 E Nolana Loop		07 17 2012
City	State Zip Code	Transaction ID : SA11AI.18617
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
selfemployed	physician	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General		
Other (specify) ▼	1750.00	
SUBTOTAL of Receipts This Page (optional)	>	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) Juan Salazar Mailing Address 801 E Nolana Loop		Date of Receipt 08 24 2012
City McAllen FEC ID number of contributing federal political committee.	State Zip Code TX 78504	Transaction ID : SA11AI.18966 Amount of Each Receipt this Period 250.00
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) Juan Salazar Mailing Address 801 E Nolana Loop City	State Zip Code	Date of Receipt 09 27 2012
McAllen FEC ID number of contributing federal political committee.	TX 78504	Transaction ID : SA11AI.19323 Amount of Each Receipt this Period 250.00
Name of Employer selfemployed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 2250.00	contribution
Full Name (Last, First, Middle Initial) Dr. Mariano Salinas Mailing Address 2203 Red River City	State Zip Code	Date of Receipt M
mission FEC ID number of contributing federal political committee.	TX 78572	Amount of Each Receipt this Period 100.00 contribution
Name of Employer selfemployed Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 300.00	
SUBTOTAL of Receipts This Page (optional)		600.00
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 Full) BORDER HEALTH FEDERAL	. PAC	
Full Name (Last, First, Middle Initial) Dr. Mariano Salinas Mailing Address 2203 Red River		Date of Receipt
City mission	State Zip Code TX 78572	7 2012 Transaction ID : SA11AI.19325 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) B. Elisa Garza Sanchez Mailing Address 3509 N. Glasscock		Date of Receipt 07 17 2012
City Mission	State Zip Code TX 78574	Transaction ID : SA11AI.18620 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 ▼ 875.00	
Full Name (Last, First, Middle Initial) Elisa Garza Sanchez		Date of Receipt
Mailing Address 3509 N. Glasscock City	State Zip Code	08 24 2012
Mission	State Zip Code TX 78574	Transaction ID : SA11AI.18969 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 ▼ 1000.00	- contribution
SUBTOTAL of Receipts This Page (optional)		350.00
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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	he name and address of any political committee to	
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	PAC	
Full Name (Last, First, Middle Initial) A. Elisa Garza Sanchez Mailing Address 3509		Date of Receipt
N. Glasscock		09 27 2012
City	State Zip Code	Transaction ID: SA11AI.19326
Mission	TX 78574	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 ▼ 1125.00	
Full Name (Last, First, Middle Initial) Manuel Sanchez Mailing Address 2804 Santa Lydia		Date of Receipt
City	State Zip Code	08 24 2012
City mission	State Zip Code TX 78572	Transaction ID : SA11AI.18970 Amount of Each Receipt this Period
		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 ▼ 300.00	
Full Name (Last, First, Middle Initial) Manuel Sanchez		Date of Receipt
Mailing Address 2804 Santa Lydia		09 27 2012
City	State Zip Code	Transaction ID : SA11AI.19327
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) ▼	400.00	
SUBTOTAL of Receipts This Page (optional)		325.00
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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NAME OF COMMITTEE (in Full) BORDER HEALTH FEDERAL PAC Full Name (Last, First, Middle Initial) Mr. Victor Sanchez Mailing Address P.O. Box 1868 City State Zip Code TX 78503 Aggregate Year-to-Date ▼ City State Zip Code Transaction ID : SA11AL18822 Amount of Each Receipt this Period Contribution Full Name (Last, First, Middle Initial) Mr. Victor Sanchez Mailing Address P.O. Box 1868 City State Zip Code TX 78503 Full Name (Last, First, Middle Initial) Mr. Victor Sanchez Mailing Address P.O. Box 1868 City State Zip Code TX 78503 Full Name (Last, First, Middle Initial) Mr. Victor Sanchez Mailing Address P.O. Box 1868 City Primary General Other (specify) ▼ State Zip Code TX 78503 Date of Receipt TX 78503 Contribution Date of Receipt Transaction ID : SA11AL18921 Amount of Each Receipt this Period Contribution Contribution Contribution Date of Receipt Transaction ID : SA11AL18921 Amount of Each Receipt this Period Contribution Contribution Contribution Full Name (Last, First, Middle Initial) Mr. Victor Sanchez Mailing Address P.O. Box 1868 City State Zip Code TX 78503 Full Name (Last, First, Middle Initial) Mr. Victor Sanchez Mailing Address P.O. Box 1868 City State Zip Code TX 78503 Full Name (Last, First, Middle Initial) Mr. Victor Sanchez Mailing Address P.O. Box 1868 City State Zip Code TX 78503 Full Name (Last, First, Middle Initial) Mr. Victor Sanchez Aggregate Year-to-Date ▼ Other (specify) ▼ Cocupation private investor Aggregate Year-to-Date ▼ Other (specify) ▼ Cocupation private investor Aggregate Year-to-Date ▼ Other (specify) ▼ Cocupation State Zip Code TX 78503 Amount of Each Receipt this Period Transaction ID : SA11AL18921 Amount of Each Receipt this Period Transaction ID : SA11AL18921 Amount of Each Receipt this Period Transaction ID : SA11AL18921 Amount of Each Receipt this Period Transaction ID : SA11AL18921 Amount of Each Receipt this Period Transaction ID : SA11AL18921 Amount of Each Receipt this Period Transaction ID	or for commercial purposes, other than using	g the name and address of any political committee t	
Milling Address P.O. Box 1868 City State Zip Code TX 78503 Amount of Each Receipt 197 2012 Transaction ID: \$A11A1.18622 Amount of Each Receipt 197 2010 Contribution Contribution Cocupation private investor Receipt For: QRailing Address P.O. Box 1868 City State Zip Code TX 78503 Amount of Each Receipt this Period Contribution Contribu		\L PAC	
Transaction D : SA11Al.18622 McAllen TX 78503 Transaction D : SA11Al.18622 Amount of Each Receipt this Period EC ID number of contributing federal political committee. C Cucupation private investor Receipt For: Primary General Other (specify) ▼ Transaction D : SA11Al.18622 Amount of Each Receipt this Period TX 78503 Transaction D : SA11Al.18622 Amount of Each Receipt this Period Contribution Transaction D : SA11Al.18622 Amount of Each Receipt this Period TX 78503 Date of Receipt Transaction D : SA11Al.18622 Amount of Each Receipt this Period TX 78503 Date of Receipt Transaction D : SA11Al.18622 Amount of Each Receipt this Period TX 78503 Transaction D : SA11Al.18621 Transaction D : SA11Al.18621 TX 78503 Date of Receipt Transaction D : SA11Al.18621 TX 78503 Transaction D : SA11Al.18621 Transaction D : SA11Al.18621 TX 78503 Transaction D : SA11Al.18621 Transa	Mr. Victor Sanchez		╡ '
McAllen TX 78503 Amount of Each Receipt this Period C	City	State 7in Code	
FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Occupation Primary General Occupa		•	
Name of Employer Selfemployed Primary General Other (specify) ▼	FEC ID number of contributing		250.00
Receipt For:	Name of Employer	Occupation	- contribution
Primary General 1750.00	. ,	private investor	_
Full Name (Last, First, Middle Initial) Mr. Victor Sanchez Mailing Address P.O. Box 1868 City State Zip Code TX 78503 Amount of Each Receipt this Period C Cocupation private investor Receipt For: Primary General Other (specify) ▼ State Zip Code TX 78503 Aggregate Year-to-Date ▼ City Mailing Address P.O. Box 1868 City Aggregate Year-to-Date ▼ City City State Zip Code TX 78503 Date of Receipt Contribution Date of Receipt Transaction ID : SA11Al.18971 Amount of Each Receipt this Period Contribution Contribution Date of Receipt Contribution Contribution Date of Receipt Contribution Contribution Contribution Contribution Contribution Contribution Contribution Contribution Date of Receipt City State Zip Code TX 78503 Amount of Each Receipt this Period City City State Zip Code TX 78503 Amount of Each Receipt this Period Contribution Contribution Contribution Contribution Contribution Transaction ID : SA11Al.19328 Amount of Each Receipt this Period Contribution Contribution Transaction ID : SA11Al.19328 Amount of Each Receipt this Period Contribution Transaction ID : SA15Al.19328 Amount of Each Receipt this Period Contribution Transaction ID : SA15Al.19328 Amount of Each Receipt this Period Contribution	Primary General	00 0	
Mr. Victor Sanchez Mailing Address P.O. Box 1868 City State Zip Code TX 78503 FEC ID number of contributing federal political committee. Cocupation private investor Feceipt For: Primary General Other (specify) ▼ State Zip Code TX 78503 Full Name (Last, First, Middle Initial) Mr. Victor Sanchez Mailing Address P.O. Box 1868 City State Zip Code TX 78503 Fel Date of Receipt Transaction ID: SA11AL18971 Date of Receipt Transaction ID: SA11AL19328 Amount of Each Receipt this Period Full Name (Last, First, Middle Initial) Mr. Victor Sanchez Mailing Address P.O. Box 1868 City State Zip Code TX 78503 FEC ID number of contributing federal political committee. C State Zip Code TX 78503 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. C State Zip Code TX 78503 Amount of Each Receipt this Period C State Sign Code TX 78503 Amount of Each Receipt this Period C State Sign Code TX 78503 Amount of Each Receipt Transaction ID: SA11AL19328 Amount of Each Receipt this Period C State TX 78503 Amount of Each Receipt This Period TX 78503 Amount of Each Receipt This Period C State TX 78503 Amount of Each Receipt This Period TX 78503 Amount of Each Receipt This Period TX 78503 TY 78503	<u> </u>		
City State Zip Code TX 78503 FEC ID number of contributing federal political committee. Name of Employer selfemployed private investor Receipt For: Primary General Other (specify) ▼ 2000.00 FEUII Name (Last, First, Middle Initial) Mr. Victor Sanchez Mailing Address P.O. Box 1868 City State Zip Code McAllen TX 78503 Date of Receipt Transaction ID: SA11AL18971 Amount of Each Receipt this Period contribution Date of Receipt Transaction ID: SA11AL18971 Amount of Each Receipt this Period contribution Date of Receipt Transaction ID: SA11AL189328 Amount of Each Receipt this Period City State Zip Code Transaction ID: SA11AL19328 Amount of Each Receipt this Period contribution Contribution Date of Receipt Transaction ID: SA11AL189328 Amount of Each Receipt this Period contribution Contribution Contribution	Mr. Victor Sanchez		Date of Receipt
City State Zip Code TX 78503	Mailing Address P.O. Box 1868		
McAllen TX 78503 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Date of Receipt Tx 78503 Date of Receipt Transaction ID : SA11AI.19328 Amount of Each Receipt this Period contribution Date of Receipt Transaction ID : SA11AI.19328 Amount of Each Receipt this Period Coupation Primary General Other (specify) ▼ Occupation Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Date of Receipt Transaction ID : SA11AI.19328 Amount of Each Receipt this Period Coupation Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Transaction ID : SA11AI.19328 Amount of Each Receipt this Period Transaction ID : SA11AI.19328 Amount of Each Receipt this Period Transaction ID : SA11AI.19328 Amount of Each Receipt this Period Transaction ID : SA11AI.19328 Transaction ID : SA11AI.19328 Amount of Each Receipt this Period Transaction ID : SA11AI.19328 Transaction ID : SA11A	City	State Zip Code	
FEC ID number of contributing federal political committee. Name of Employer selfemployed private investor Receipt For: Primary General Other (specify) ▼ City State Zip Code TX 78503 FEC ID number of contributing federal political committee. Name of Employer Selfemployed Receipt For: Primary General Other (specify) ▼ City State Zip Code TX 78503 FEC ID number of contributing federal political committee. C C Cocupation private investor Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary General Other (specify) Type Other (specify) Typ		<u> </u>	
Receipt For: Primary General Other (specify) City State Zip Code TX 78503 FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: Primary General Other (specify) Aggregate Year-to-Date Date of Receipt Mailing Address P.O. Box 1868 City State Zip Code TX 78503 FEC ID number of contributing federal political committee. Name of Employer Selfemployed Receipt For: Primary General Other (specify) Aggregate Year-to-Date Aggregate Year-to-Date Aggregate Year-to-Date Aggregate Year-to-Date Aggregate Year-to-Date T50.00		C	250.00
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼	, ,	Occupation	contribution
Primary General Other (specify) ▼ 2000.00 Full Name (Last, First, Middle Initial) Mr. Victor Sanchez Mailing Address P.O. Box 1868 City State Zip Code TX 78503 FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Subtotal of Receipts This Page (optional)	• •	private investor	_
Mr. Victor Sanchez Mailing Address P.O. Box 1868 City State Zip Code TX 78503 FEC ID number of contributing federal political committee. Name of Employer selfemployed Private investor Receipt For: Aggregate Year-to-Date ▼ CUBROTAL of Receipts This Page (optional)	Primary General		
Mailing Address P.O. Box 1868 City State Zip Code Transaction ID: SA11Al.19328 McAllen TX 78503 FEC ID number of contributing federal political committee. Name of Employer Selfemployed Primary General Other (specify) ▼ CU Aggregate Year-to-Date ▼ CU Transaction ID: SA11Al.19328 Amount of Each Receipt this Period contribution TA 78503 Amount of Each Receipt this Period 250.00 Contribution			Date of Receipt
City State Zip Code McAllen TX 78503 Transaction ID: SA11AI.19328 Amount of Each Receipt this Period Amount of Each Receipt this Period 250.00 contribution Coupation private investor Receipt For: Primary Other (specify) ▼ Aggregate Year-to-Date ▼ Cuthonian Aggregate Year-to-Date ▼ 2250.00 Transaction ID: SA11AI.19328 Amount of Each Receipt this Period contribution Toucher (specify) ▼ Transaction ID: SA11AI.19328 Amount of Each Receipt this Period 250.00 contribution Toucher (specify) ▼ Transaction ID: SA11AI.19328 Amount of Each Receipt this Period 250.00 contribution Toucher (specify) ▼ Transaction ID: SA11AI.19328 Amount of Each Receipt this Period 250.00 contribution Toucher (specify) ▼ Transaction ID: SA11AI.19328 Amount of Each Receipt this Period 250.00 contribution Toucher (specify) ▼ Transaction ID: SA11AI.19328 Amount of Each Receipt this Period 250.00 contribution Toucher (specify) ▼ Transaction ID: SA11AI.19328 Amount of Each Receipt this Period 250.00 contribution Toucher (specify) ▼ Toucher (specify)			M = M / D = D / Y = Y = Y
FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: Primary Other (specify) Other (specify) Aggregate Year-to-Date 250.00 250.00 250.00 250.00 250.00 250.00			
Table 1		1X 78503	Amount of Each Receipt this Period
Name of Employer selfemployed Receipt For: Primary Other (specify) ▼ Aggregate Year-to-Date ▼ 2250.00 SUBTOTAL of Receipts This Page (optional)	ĕ	C	
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2250.00 SUBTOTAL of Receipts This Page (optional)	Name of Employer	Occupation	contribution
Primary General Other (specify) Other (specify) CUBTOTAL of Receipts This Page (optional)	• •	private investor	_
Other (specify) 2250.00 SUBTOTAL of Receipts This Page (optional)		Aggregate Year-to-Date ▼	
DEFICIAL OF Neceipts This Page (optional)		2250.00	
	SUBTOTAL of Receipts This Page (optional	ν)	750.00
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NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	the name and address of any political committee	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Manuel Seas Mailing Address 5714 N. 6th Street 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 07 17 2012 Transaction ID: SA11AI.18624 Amount of Each Receipt this Period 30.00 contribution
Full Name (Last, First, Middle Initial) Dr. Manuel Seas Mailing Address 5714 N. 6th Street 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 78504 C Occupation physician Aggregate Year-to-Date ▼ 240.00	Date of Receipt M
Full Name (Last, First, Middle Initial) Dr. Manuel Seas Mailing Address 5714 N. 6th Street 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 ▼ 270.00	Date of Receipt 109 27 2012 Transaction ID : SA11AI.19330 Amount of Each Receipt this Period 30.00 contribution
SUBTOTAL of Receipts This Page (optional). TOTAL This Period (last page this line number		90.00

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BORDER HEALTH FEDERAL		to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Michael Seiba Mailing Address P. O. Box 4556	-	Date of Receipt
	Ctoto 7:- O-d-	07 17 2012
City mcallen	State Zip Code TX 78502	Transaction ID : SA11AI.18625
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 250.00
Name of Employer selfemployed Receipt For:	Occupation physician	contribution
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1750.00	
Full Name (Last, First, Middle Initial) Michael Seiba		Date of Receipt
Mailing Address P. O. Box 4556		08 24 _2012 _
City mcallen	State Zip Code TX 78502	Transaction ID : SA11AI.18974 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 ▼ 2000.00	
Full Name (Last, First, Middle Initial)	1	Date of Receipt
Mailing Address P. O. Box 4556		09 27 _2012 _
City mcallen	State Zip Code TX 78502	Transaction ID : SA11AI.19331 Amount of Each Receipt this Period
	C	250.00
FEC ID number of contributing federal political committee.		
· · · · · · · · · · · · · · · · · · ·	Occupation	contribution
federal political committee. Name of Employer selfemployed	Occupation physician	contribution
federal political committee. Name of Employer	Occupation	contribution
federal political committee. Name of Employer selfemployed Receipt For: Primary General	Occupation physician Aggregate Year-to-Date ▼ 2250.00	contribution 750.00

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or for commercial purposes, other than using NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	the name and address of any political committee PAC	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Samuel Serna Mailing Address 125 E. Cornell 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 ▼	Date of Receipt O7 17 2012 Transaction ID: SA11AI.18626 Amount of Each Receipt this Period 100.00 contribution
Full Name (Last, First, Middle Initial) Dr. Samuel Serna Mailing Address 125 E. Cornell 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 ▼	Date of Receipt M
Full Name (Last, First, Middle Initial) Dr. Samuel Serna Mailing Address 125 E. Cornell 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 ▼ 900.00	Date of Receipt 109 27 2012 Transaction ID: SA11AI.19332 Amount of Each Receipt this Period 100.00 contribution
SUBTOTAL of Receipts This Page (optional).		300.00

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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) Tawhid Shuaib Mailing Address 4000 Burns Drive	Date of Receipt 07 17 2012				
City mcallen	State Zip Code TX 78503	Transaction ID : SA11AI.18627 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 ▼ 2800.00				
Full Name (Last, First, Middle Initial) Tawhid Shuaib Mailing Address 4000 Burns Drive	Date of Receipt 08 24 2012				
City mcallen	State Zip Code TX 78503	Transaction ID : SA11AI.18976 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 ▼ 3200.00				
Full Name (Last, First, Middle Initial) . Tawhid Shuaib		Date of Receipt			
Mailing Address 4000 Burns Drive	Mailing Address 4000 Burns Drive				
City mcallen	State Zip Code TX 78503	Transaction ID : SA11AI.19333 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С	400.00			
Name of Employer selfemployed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 3600.00	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	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) Dennis Slavin		Date of Receipt
Mailing Address 1501 S. Oklahoma		07 17 2012 .
City	State Zip Code	Transaction ID : SA11AI.18629
weslaco	TX 78596	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 Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) 3. Dennis Slavin Mailing Address 1501 S. Oklahoma	·	Date of Receipt
		08 24 2012
City	State Zip Code	Transaction ID : SA11AI.18978
weslaco	TX 78596	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 Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) C. Dennis Slavin		Date of Receipt
Mailing Address 1501 S. Oklahoma		09 27 2012
City	State Zip Code TX 78596	Transaction ID : SA11AI.19335
weslaco FEC ID number of contributing federal political committee.	TX 78596	Amount of Each Receipt this Period 50.00
Name of Employer	Occupation	contribution
selfemployed	physician	
Receipt For:	Aggregate Year-to-Date ▼	-
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)	>	150.00
TOTAL This Period (last page this line numb	per 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) Hilda Solis Date of Receipt Mailing Address P.O.Box 3302 2012 27 City State Zip Code Transaction ID: SA11AI.19336 TX McAllen 78502 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. contribution Name of Employer Occupation Self employed private investor Receipt For: Aggregate Year-to-Date ▼ Primary General 225.00 Other (specify) Full Name (Last, First, Middle Initial) B. Joel Solis Date of Receipt Mailing Address 405 E. Avocet 2012 07 17 City State Zip Code Transaction ID: SA11AI.18631 TX Mcallen 78501 Amount of Each Receipt this Period FEC ID number of contributing 150.00 federal political committee. contribution Name of Employer Occupation self-employed physician Receipt For: Aggregate Year-to-Date ▼ Primary General 833.31 Other (specify) Full Name (Last, First, Middle Initial) c. Joel Solis Date of Receipt

Mailing Address 405 E. Avocet 2012 80 24 Zip Code City State Transaction ID: SA11AI.18980 TX Mcallen 78501 Amount of Each Receipt this Period FEC ID number of contributing 150.00 С federal political committee. contribution Name of Employer Occupation self-employed physician Receipt For: Aggregate Year-to-Date ▼ Primary General 983.31 Other (specify)

SUBTOTAL of Receipts This Page (optional)		,		7		32	5.00	
TOTAL This Period (last page this line number only)		,		7	_		_	

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	the name and address of any political committee t	
BORDER HEALTH FEDERAL	_ PAC	
Full Name (Last, First, Middle Initial) A. Joel Solis		Date of Receipt
Mailing Address 405 E. Avocet		09 27 2012
City	State Zip Code	Transaction ID : SA11AI.19337
Mcallen	TX 78501	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: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	1133.31	
Full Name (Last, First, Middle Initial) 3. Dr. Hector Soto		Date of Receipt
Mailing Address 101 South Greenbriar		07 17 2012
City	State Zip Code	Transaction ID : SA11AI.18632
McAllen	TX 78502	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer	Occupation	contribution
self-employee	physician	
Receipt For:	Aggregate Year-to-Date ▼	-
Primary General Other (specify) ▼	2800.00	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address 101 South Greenbriar		08 24 _ 2012 _
City	State Zip Code	Transaction ID : SA11AI.18981
McAllen	TX 78502	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer	Occupation	contribution
self-employee	physician	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	3200.00	
SUBTOTAL of Receipts This Page (optional)		950.00
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TOTAL This Period (last page this line numb	er only)	

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

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NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL F	PAC	
Full Name (Last, First, Middle Initial) Dr. Hector Soto Mailing Address 101 South Greenbriar		Date of Receipt
	Chata Zin Coata	09 27 2012
City McAllen	State Zip Code TX 78502	Transaction ID : SA11AI.19338
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 400.00
Name of Employer	Occupation	contribution
self-employee	physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3600.00	
Full Name (Last, First, Middle Initial) 3. Mr. Raul Sustaita		Date of Receipt
Mailing Address 1602 Scobey		09 27 _ 2012 _
City	State Zip Code	09 27 2012
Donna	TX 78537	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	25.00
Name of Employer	Occupation	contribution
selfemployed	private investor	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	
Full Name (Last, First, Middle Initial) Dr. Jyothi Swarup		Date of Receipt
Mailing Address 8109 N. 1st Street		08 24 2012
City	State Zip Code	Transaction ID : SA11AI.18984
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: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	300.00	
SUBTOTAL of Receipts This Page (optional)	>	525.00
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) Dr. Jyothi Swarup Mailing Address 8109 N. 1st Street City McAllen	State Zip Code TX 78504	Date of Receipt 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 ▼ 400.00	Amount of Each Receipt this Period 100.00 contribution
Full Name (Last, First, Middle Initial) Alejandro Tey Mailing Address 3012 Laurie Lane City Edinburg FEC ID number of contributing federal political committee. Name of Employer Self employed	State Zip Code TX 78539 C Occupation	Date of Receipt 07 17 2012 Transaction ID: SA11AI.18638 Amount of Each Receipt this Period 250.00 contribution
Receipt For: Primary General Other (specify) ▼	physician Aggregate Year-to-Date ▼ 1750.00	
Full Name (Last, First, Middle Initial) Alejandro Tey Mailing Address 3012 Laurie Lane City Edinburg FEC ID number of contributing federal political committee. Name of Employer Self employed Receipt For: Primary Other (specify)	State Zip Code TX 78539 C Occupation physician Aggregate Year-to-Date ▼ 2000.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	_	600.00
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NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	. PAC	
Full Name (Last, First, Middle Initial) A. Alejandro Tey Mailing Address 3012 Laurie Lane		Date of Receipt
City Edinburg	State Zip Code TX 78539	09 27 2012 Transaction ID : SA11AI.19344 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 Self employed	Occupation physician	contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2250.00	
Full Name (Last, First, Middle Initial) Jose Trejo Mailing Address 112 S. Broadway		Date of Receipt 07 17 2012
City mcallen	State Zip Code TX 78501	Transaction ID : SA11AI.18641 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 ▼ 1750.00	
Full Name (Last, First, Middle Initial) Jose Trejo		Date of Receipt
Mailing Address 112 S. Broadway		08 24 2012
City mcallen	State Zip Code TX 78501	Transaction ID : SA11AI.18990 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 ▼ 2000.00	- contribution
SUBTOTAL of Receipts This Page (optional)	>	750.00
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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) A. Jose Trejo		Date of Receipt		
Mailing Address 112 S. Broadway		09 27 2012		
City	State Zip Code	Transaction ID : SA11AI.19348		
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		
self-employed	private investor			
Receipt For:	Aggregate Year-to-Date ▼	_		
Primary General				
Other (specify) ▼	2250.00			
Full Name (Last, First, Middle Initial) Dr. Krishna Turlapati		Date of Receipt		
Mailing Address 9123 1st Street		M = M / D = D / Y = Y = Y		
C:h.	Ctoto 7in Cada	07 17 2012		
City	State Zip Code TX 78504	Transaction ID : SA11AI.18643 Amount of Each Receipt this Period		
McAllen	1999			
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) ▼	700.00			
Full Name (Last, First, Middle Initial) Dr. Krishna Turlapati		Date of Receipt		
Mailing Address 9123 1st Street		08 24 _ 2012 _		
City	State Zip Code	Transaction ID : SA11AI.18992		
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	riggiogate real to Date 7			
Other (specify) ▼	800.00			
SUBTOTAL of Receipts This Page (optional	al)	450.00		
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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	09 27 2012
City McAllen	TX 78504	Transaction ID : SA11AI.19350 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 ▼ 900.00	
Full Name (Last, First, Middle Initial) 3. Susan Turley		Date of Receipt
Mailing Address 312 Thunderbird City	State Zip Code	07 17 2012 Transaction ID : SA11AI.18644
mcallen FEC ID number of contributing	TX 78504	Amount of Each Receipt this Period
federal political committee.	C	250.00
Name of Employer self-employed	Occupation physician	contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1711.95	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address 312 Thunderbird		08 24 2012
City mcallen	State Zip Code TX 78504	Transaction ID : SA11AI.18993 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	Aggregate Year-to-Date ▼	
Other (specify) ▼	1961.95	
SUBTOTAL of Receipts This Page (optional)		600.00
TOTAL This Period (last page this line number	<u> </u>	

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	Statements may not be sold or used by any person e name and address of any political committee to	
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL I	PAC	
Full Name (Last, First, Middle Initial) Susan Turley Mailing Address 312 Thunderbird		Date of Receipt
City	State Zip Code	09 27 2012 Transaction ID : SA11AI.19351
mcallen	TX 78504	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 ▼ 2211.95	
Full Name (Last, First, Middle Initial) Marcel Twahirwa Mailing Address area 515 in Bir		Date of Receipt
Mailing Address 2403 El Encino Drive City	State Zip Code TX 78572	07 17 2012 Transaction ID : SA11Al.18645
mission FEC ID number of contributing federal political committee.	TX 78572	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 ▼ 1750.00	
Full Name (Last, First, Middle Initial) Marcel Twahirwa		Date of Receipt
Mailing Address 2403 El Encino Drive		08 24 2012
City mission	State Zip Code TX 78572	Transaction ID : SA11AI.18994 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 ▼ 2000.00	
SUBTOTAL of Receipts This Page (optional)		750.00
TOTAL This Period (last page this line number	only)	

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NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	_ PAC	
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 ▼ 2250.00	Date of Receipt 9 27 2012 Transaction ID: SA11AI.19352 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	State Zip Code	Date of Receipt 07 17 2012 Transaction ID : SA11AI.18647
Mission FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: Primary General Other (specify) ▼	TX 78572 C Occupation physician Aggregate Year-to-Date ▼ 700.00	Amount of Each Receipt this Period 100.00 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 ▼ 800.00	Date of Receipt 08 24 2012 Transaction ID : SA11AI.18996 Amount of Each Receipt this Period 100.00 contribution
		450.00

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NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	PAC	
Full Name (Last, First, Middle Initial) Dr. Theresa Valladares Mailing Address 2302 Red River Drive City	State Zip Code	Date of Receipt 09 27 2012 Transaction ID : SA11AI.19354
Mission FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: □ Primary □ General □ Other (specify) ▼	TX 78572 C Occupation physician Aggregate Year-to-Date ▼ 900.00	Amount of Each Receipt this Period 100.00 contribution
Full Name (Last, First, Middle Initial) Jose Vasquez Mailing Address 2548 Palm Circle City rio grande city FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: Primary General Other (specify)	State Zip Code TX 78582 C Occupation physician Aggregate Year-to-Date ▼ 1750.00	Date of Receipt M
Full Name (Last, First, Middle Initial) Jose Vasquez Mailing Address 2548 Palm Circle City rio grande city FEC ID number of contributing federal political committee. Name of Employer selfemployed Receipt For: Primary Other (specify)	State Zip Code TX 78582 C Occupation physician Aggregate Year-to-Date ▼ 2000.00	Date of Receipt 08 24 2012 Transaction ID: SA11AI.18997 Amount of Each Receipt this Period 250.00 contribution
SUBTOTAL of Receipts This Page (optional)		600.00
TOTAL This Period (last page this line numbe	r only)	

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NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERA	AL PAC	
Full Name (Last, First, Middle Initial) Jose Vasquez		Date of Receipt
Mailing Address 2548 Palm Circle		09 27 / 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.19355
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	Occupation	contribution
selfemployed	physician	
Receipt For:	Aggregate Year-to-Date ▼	_
Primary General	199109ato Teal-to-Date ▼	
Other (specify) ▼	2250.00	
Full Name (Last, First, Middle Initial) 3. Dr. Efraim Vela		Date of Receipt
Mailing Address 100 E. Ridge Road #B		07 17 _2012 _
City	State Zip Code	7 17 2012 Transaction ID : SA11AI.18650
McAllen	TX 78503	Amount of Each Receipt this Period
		, amount of Each Heceipt this Fellou
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) ▼	1654.87	
Full Name (Last, First, Middle Initial) Dr. Efraim Vela	· · · · · · · · · · · · · · · · · · ·	Date of Receipt
Mailing Address 100 E. Ridge Road #B		08 24 2012
City	State Zip Code	Transaction ID : SA11AI.19017
McAllen	TX 78503	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) ▼	1904.87	
SUBTOTAL of Receipts This Page (optional	al)	750.00
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TOTAL This Period (last page this line nur.	mber 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) Dr. Efraim Vela Mailing Address 100 E. Ridge Road #B		Date of Receipt 09 27 2012
City McAllen FEC ID number of contributing	State Zip Code TX 78503	09 27 2012 Transaction ID : SA11AI.19358 Amount of Each Receipt this Period 250.00
federal political committee. Name of Employer selfemployed Receipt For:	Occupation physician Aggregate Year-to-Date	contribution
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2154.87	
Full Name (Last, First, Middle Initial) Ramiro Verdoreen Mailing Address 301 E. Newport		Date of Receipt 07 17 2012
City mcallen FEC ID number of contributing federal political committee.	State Zip Code TX 78501	Transaction ID : SA11AI.18653 Amount of Each Receipt this Period 400.00
Name of Employer selfemployed Receipt For:	Occupation physician Aggregate Year-to-Date ▼	contribution
Primary General Other (specify) ▼ Full Name (Last First Middle Initial)	2800.00	
Full Name (Last, First, Middle Initial) Ramiro Verdoreen Mailing Address 301 E. Newport		Date of Receipt 08 24 2012
City mcallen	State Zip Code TX 78501	Transaction ID : SA11AI.19002 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	400.00 contribution
Name of Employer selfemployed Receipt For: Primary General	Occupation physician Aggregate Year-to-Date ▼	CONTRIBUTION
Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)	3200.00	1050.00
TOTAL This Period (last page this line number	<u>·</u>	

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BORDER HEALTH FÉDERA	L PAC					
Full Name (Last, First, Middle Initial) Ramiro Verdoreen		Date of Receipt				
Mailing Address 301 E. Newport		09 27 2012				
City	State Zip Code	Transaction ID : SA11AI.19361				
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	physician					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3600.00					
Full Name (Last, First, Middle Initial) Carlos Villalta	•	Date of Receipt				
Mailing Address P. O. Box 1632		07 17 2012				
City	State Zip Code	Transaction ID : SA11AI.18654				
mission	TX 78573	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 Other (specify) ▼	Aggregate Year-to-Date ▼ 875.00					
Full Name (Last, First, Middle Initial) Carlos Villalta		Date of Receipt				
Mailing Address P. O. Box 1632		08 24 2012				
City	State Zip Code	Transaction ID : SA11AI.19003				
mission	TX 78573	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	125.00				
Name of Employer	Occupation	contribution				
selfemployed						
Receipt For:	Aggregate Year-to-Date ▼	1				
Primary General Other (specify) ▼	1000.00					
SUBTOTAL of Receipts This Page (optional) >	650.00				
TOTAL This Period (last page this line number	<u> </u>					

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NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL F	PAC				
Full Name (Last, First, Middle Initial) Carlos Villalta Mailing Address P. O. Box 1632		Date of Receipt			
	09 27 2012				
City mission	State Zip Code TX 78573	Transaction ID : SA11AI.19362			
FEC ID number of contributing		Amount of Each Receipt this Period			
federal political committee.	C	125.00			
Name of Employer	Occupation	contribution			
selfemployed	physician				
Receipt For:	Aggregate Year-to-Date ▼				
Primary General Other (specify) ▼	1125.00				
Full Name (Last, First, Middle Initial) Rita Villanueva		Date of Receipt			
Mailing Address 801 E. Nolana		M = M / D = D / Y = Y = Y			
Suite 4 City	State Zip Code	07 17 2012 Transaction ID : \$A11A1 18655			
mcallen	TX 78504	Transaction ID : SA11AI.18655 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С	103.60			
Name of Employer	Occupation	contribution			
selfemployed	physician				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 723.90				
Full Name (Last, First, Middle Initial) C. Rita Villanueva		Date of Receipt			
Mailing Address 801 E. Nolana Suite 4		08 24 2012			
City	State Zip Code	Transaction ID : SA11AI.19004			
mcallen	TX 78504	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С	103.60			
Name of Employer	contribution				
selfemployed					
Receipt For:	Aggregate Year-to-Date ▼				
Primary General Other (specify) ▼	827.50				
SUBTOTAL of Receipts This Page (optional)	>	332.20			
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		
Full Name (Last, First, Middle Initial) A. Rita Villanueva Mailing Address 801 E. Nolana Suite 4 City	State Zip Code TX 78504	Date of Receipt 09 27 2012 Transaction ID: SA11AI.19363
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 ▼ 937.11	Amount of Each Receipt this Period 109.61 contribution
Full Name (Last, First, Middle Initial) Victor Villarreal Mailing Address 901 W. Moore City	State Zip Code	Date of Receipt O7 17 2012 Transaction ID : SA11AI.18656
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 ▼ 617.55	Amount of Each Receipt this Period 90.00 contribution
Full Name (Last, First, Middle Initial) Victor Villarreal Mailing Address 901 W. Moore 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 ▼ 707.55	Date of Receipt 08
SUBTOTAL of Receipts This Page (optional)	>	289.61
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 to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERA	L PAC	
Full Name (Last, First, Middle Initial) Victor Villarreal Mailing Address 901 W. Moore		Date of Receipt
City pharr FEC ID number of contributing federal political committee. Name of Employer selfemployed	State Zip Code TX 78577 C Occupation physician	7 2012 Transaction ID: SA11AI.19364 Amount of Each Receipt this Period 90.00 contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 797.55	
Full Name (Last, First, Middle Initial) Roger Vitko Mailing Address 1017 south 1st		Date of Receipt 07 17 2012
City mcallen FEC ID number of contributing federal political committee.	State Zip Code TX 78502	Transaction ID : SA11AI.18657 Amount of Each Receipt this Period 150.00
Name of Employer self-employed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1050.00	- contribution
Full Name (Last, First, Middle Initial) Roger Vitko Mailing Address 1017 south 1st		Date of Receipt 08 24 2012
City mcallen FEC ID number of contributing federal political committee.	State Zip Code TX 78502	Transaction ID : SA11AI.19006 Amount of Each Receipt this Period
Name of Employer self-employed Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 1200.00	contribution
SUBTOTAL of Receipts This Page (optional	l) >	390.00
	ber only)	

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NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL F	PAC			
Full Name (Last, First, Middle Initial) Roger Vitko Mailing Address 1017 south 1st		Date of Receipt		
City	State Zip Code	09 27 2012		
mcallen	State Zip Code TX 78502	Transaction ID : SA11AI.19365 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С	150.00		
Name of Employer self-employed Receipt For:	Occupation physician Aggregate Year-to-Date ▼	contribution		
Primary General Other (specify) ▼	1350.00			
Full Name (Last, First, Middle Initial) Raymond Walker		Date of Receipt		
Mailing Address 1117 Shallow apt 4 City mcallen	State Zip Code TX 78504	07 17 2012 Transaction ID : SA11AI.18658 Amount of Each Proceed this Period		
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period 250.00		
Name of Employer self-employed	Occupation private investor	contribution		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1750.00			
Full Name (Last, First, Middle Initial) C. Raymond Walker		Date of Receipt		
Mailing Address 1117 Shallow apt 4 City	State Zip Code	08 24 2012		
mcallen	TX 78504	Transaction ID : SA11AI.19007 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 ▼ 2000.00			
SUBTOTAL of Receipts This Page (optional)		650.00		
TOTAL This Period (last page this line number of	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	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) Raymond Walker Mailing Address 1117 Shallow		Date of Receipt		
apt 4 City mcallen FEC ID number of contributing	State Zip Code TX 78504	09 27 2012 Transaction ID : SA11AI.19366 Amount of Each Receipt this Period		
federal political committee. Name of Employer	Occupation	250.00 contribution		
self-employed Receipt For: Primary General Other (specify) ▼	private investor Aggregate Year-to-Date ▼ 2250.00			
Full Name (Last, First, Middle Initial) 3. James Webb Mailing Address 312 Redbud		Date of Receipt 07 17 2012		
City mcallen FEC ID number of contributing federal political committee.	State Zip Code TX 78504	Transaction ID : SA11AI.18659 Amount of Each Receipt this Period 100.00		
Name of Employer self-employed Receipt For:	Occupation private investor Aggregate Year-to-Date ▼	contribution		
Primary General Other (specify) ▼	705.36			
Full Name (Last, First, Middle Initial) James Webb Mailing Address 312 Redbud		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.19008 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	100.00 contribution		
Name of Employer self-employed Receipt For:	Occupation private investor Aggregate Year-to-Date ▼			
Primary	Aggregate Year-to-Date ▼ 805.36			
SUBTOTAL of Receipts This Page (optional)	<u> </u>	450.00		
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) James Webb Mailing Address 312 Redbud	James Webb		
City	State Zip Code TX 78504	09 27 2012 Transaction ID : SA11Al.19367	
mcallen FEC ID number of contributing federal political committee.	TX 78504	Amount of Each Receipt this Period	
Name of Employer self-employed	Occupation private investor	- contribution	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 905.36		
Full Name (Last, First, Middle Initial) 3. Patrick Wilcox Mailing Address 111 Rio Grande	Date of Receipt		
City mission	State Zip Code TX 78572	7 17 2012 Transaction ID : SA11AI.18660 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 ▼ 700.00		
Full Name (Last, First, Middle Initial) Patrick Wilcox		Date of Receipt	
Mailing Address 111 Rio Grande		08 24 2012	
City mission	State Zip Code TX 78572	Transaction ID : SA11AI.19009 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 ▼ 800.00	- contribution	
SUBTOTAL of Receipts This Page (optional)		300.00	
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NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	PAC			
Full Name (Last, First, Middle Initial) Patrick Wilcox				
Mailing Address 111 Rio Grande		09 27 2012		
City	State Zip Code	Transaction ID : SA11AI.19368		
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 Teal to Bate ¥			
Other (specify) ▼	900.00			
Full Name (Last, First, Middle Initial) 3. Subbarrao Yarra	Date of Receipt			
Mailing Address 6905		M = M / D = D / Y = Y = Y		
N. Cynthia	70	07 17 2012		
City	State Zip Code	Transaction ID : SA11AI.18662		
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		
Self-employed	physician			
Receipt For:	Aggregate Year-to-Date ▼	1		
Primary General Other (specify) ▼	1800.00			
Full Name (Last, First, Middle Initial) C. Subbarrao Yarra	1	Date of Receipt		
Mailing Address 6905 N. Cynthia		08 24 2012		
City	State Zip Code	Transaction ID : SA11AI.19012		
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		
Self-employed	physician			
Receipt For:	Aggregate Year-to-Date ▼	1		
Primary General				
Other (specify) ▼	2200.00			
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NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	_ 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 ▼ 2600.00	Date of Receipt 99 27 2012 Transaction ID: SA11AI.19371 Amount of Each Receipt this Period 400.00 contribution
Full Name (Last, First, Middle Initial) 3. Dr. Christopher Zaleski Mailing Address 6804 N. 1st	Date of Receipt 07 17 2012	
City	State Zip Code	Transaction ID : SA11AI.18663
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
selfemployed	physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1750.00	
Full Name (Last, First, Middle Initial) Dr. Christopher Zaleski		Date of Receipt
Mailing Address 6804 N. 1st		08 24 2012
City mcallen	State Zip Code TX 78504	Transaction ID : SA11AI.19013 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) ▼	2000.00	
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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		Date of Receipt
City	State Zip Code	09 27 2012 Transaction ID : SA11AI.19372
mcallen	TX 78504	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 ▼ 2250.00	
Full Name (Last, First, Middle Initial) Hugo Zapata Mailing Address 316 Xenops		Date of Receipt
City mcallen	State Zip Code TX 78504	07 17 2012 Transaction ID : SA11AI.18664 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 ▼ 2800.00	
Full Name (Last, First, Middle Initial) L Hugo Zapata		Date of Receipt
Mailing Address 316 Xenops		08 24 2012
City mcallen	State Zip Code TX 78504	Transaction ID : SA11AI.19014 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 ▼ 3200.00	
SUBTOTAL of Receipts This Page (optional)		1050.00
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NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL	PAC		
Full Name (Last, First, Middle Initial) Hugo Zapata Mailing Address 316 Xenops	Hugo Zapata		
City mcallen	State Zip Code TX 78504	09 27 2012 Transaction ID : SA11AI.19373 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 ▼ 3600.00		
Full Name (Last, First, Middle Initial) Dr. Livania Zavala-Spinetti Mailing Address 109 E Cornell	Date of Receipt		
City McAllen	State Zip Code TX 78502	7 2012 2012 2012 2012 2012 2012 2012 201	
FEC ID number of contributing federal political committee.	C	25.00	
Name of Employer selfemployed	Occupation self-employee physician	- contribution	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		
Full Name (Last, First, Middle Initial) Dr. Fuad Zayed		Date of Receipt	
Mailing Address 1425 Sweet Lane		07 17 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.18666 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 physician Aggregate Year-to-Date ▼ 525.00	- contribution	
SUBTOTAL of Receipts This Page (optional)		500.00	
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12 Detailed Summary Page 13 14 16 15 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) A. Dr. Fuad Zayed Date of Receipt Mailing Address 1425 Sweet Lane 08 24 2012 City State Zip Code Transaction ID: SA11AI.19016

Edinburg	TX 78539	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 physician Aggregate Year-to-Date ▼ 600.00	- contribution
Full Name (Last, First, Middle Initial) Dr. Fuad Zayed Mailing Address 1425 Sweet Lane 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 physician Aggregate Year-to-Date ▼ 675.00	Date of Receipt 09 27 2012 Transaction ID : SA11Al.19375 Amount of Each Receipt this Period 75.00 contribution
Full Name (Last, First, Middle Initial) Mailing Address City FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State Zip Code C Occupation Aggregate Year-to-Date ▼	Date of Receipt M M / D D / Y Y Y Y Y Amount of Each Receipt this Period
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	EMIZED DISBURSEMENTS		arate schedule(s)	(check onl	E NOMBER.							•	
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	for commercial purposes, other than using the name												
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$ \; angle$	BORDER HEALTH FEDERAL PAG												
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	Full Name (Last, First, Middle Initial)				Ι.								
Α.	Ms Eliza Alvardo				'	Date of	Dis	sburse	men	İ			
	Mailing Address 4000 M K: 1 //4				- 1	M M	/		D	/ Y	Y Y	Y	
	Mailing Address 1303 W. Kiwi #4					07	٠.	0:	2		2012		
	City	State	Zip Code		+								
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	Purpose of Disbursement			_	\dashv								
	contract services - salary expenditure			001	/	Amount	of	Each	Disb	urseme	nt this	Perio	od
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				Type				,		,	500	6.93	
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	Senate	Primary	General										
	President	Other (spec	cify) 🔻										
	State: District:												
	Full Name (Last, First, Middle Initial)												
В.	Ms Eliza Alvardo				1	Date of	Dis	sburse	ment	t			
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	Mailing Address 1303 W. Kiwi #4					07		1	7		2012		
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	City S Pharr	State TX	Zip Code 78577			Trans	acti	ion ID	: SB	21B.19	029		
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	contract services - salary expenditure			001	Amount of Each Disburseme				urseme	nt this	Perio	od	
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	Senate	Primary	General										
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C.	Ms Eliza Alvardo				1	Date of	Dis	sburse	ment	t			
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	Mailing Address 1303 W. Kiwi #4					07		3	1		2012		
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Candidate Name					'	Amount	. 01	⊏ac⊓	DISD	urseme	ent triis	Penc	Ju
				Category/ Type							509	0.61	
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Α.	Ms Eliza Alvardo				Date o			ment				
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	President	Other (spec										
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В.	Ms Eliza Alvardo				Date o	of Dis	burse	ment				
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	Mailing Address 1303 W. Kiwi #4				09		1	1		2012		
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_	Full Name (Last, First, Middle Initial)											
C.	Ms Sandra Escamilla				Date o	of Dis	burse	ment				
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	Mailing Address 1418 Quince				08		10			2012		
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	contract services - salary expenditure			001	Amour	nt of	Each	Diehu	reama	nt thic	Parion	4
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	Mailing Address 1418 Quince					UB	-	2	+		2012	_	
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	contract services - salary expenditure			001		Amoun	t of	Each	Disbu	ırseme	nt this	Perio	od
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	McAllen Purpose of Disbursement	TX	78504		4								
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C.	Ms Sandra Escamilla					Date of	f Dis	sburse	ment				
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	Mailing Address 1418 Quince					09		2	1		2012		
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_	Full Name (Last, First, Middle Initial)					_		_					
Α.	Ms Sandra Escamilla					Date o		burse	ment				
	Mailing Address 1418 Quince					09	/	2	D / 1		y y 2012	Y	
	maining manager 1410 Quince					00		-			LUIZ		
	City	State	Zip Code			Trans	sacti	on ID	· SB2	21B.190	050		
	McAllen	TX	78504			man	Jacki	011 11	. 002	.15.15	550		
	Purpose of Disbursement contract services - salary expenditure			001		Amour	nt of	Fach	Dishu	ırsemei	nt this	Period	
	Candidate Name				21/	7							
				Categoi Type	y'			7		7	139	5.60	
	Office Sought: House Disburser												
	Senate President	Primary	General										
	State: District:	Other (spec	itty) 🔻										
_	Full Name (Last, First, Middle Initial)												
В.						Date o	of Dis	burse	ment				
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	Mailing Address 324 25th Street					07		0	3	نسا	2012		
	City S	State	Zip Code		-								
	Odgen	UT	84401			Tran	sacti	on ID	: SB2	21B.19	026		
	Purpose of Disbursement quarterly tax deposits - IRS				\neg								
	Candidate Name			001		Amoun	nt of	Each	Disbu	ırsemei	nt this	Period	
	Candidate Name			Categor Type	γ/						1093	1.41	
	Office Sought: House Disbursen	nent For:		Турс				7		7			
		Primary	General										
		Other (spec	ify) ▼										
_	State: District:				-								
C	Full Name (Last, First, Middle Initial) Internal Revenue Services					Date o	of Dis	hurse	ment				
٥.	internal Revenue Services					M M	_		D /	V	Y Y	V	
	Mailing Address 324 25th Street					07		2			2012		
	City S Odgen	State UT	Zip Code 84401			Trans	sacti	on ID	: SB2	21B.19	030		
	Purpose of Disbursement		04401		_								
	quarterly tax deposits - IRS			001		Amoun	nt of	Each	Disbu	ırsemei	nt this	Period	
	Candidate Name			Catego	ry/			-			31	0.29	
	Office Sought: House Disburser	nent For:		Туре			-	7	-	7			
	Senate Disburser	Primary	General										
	President	Other (spec											
	State: District:												
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SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 210 OI							
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(Criccic Orliny	´						
	Detailed Summary Page	X 21b	22	23 24 25 26					
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NAME OF COMMITTEE (In Full)									
angle BORDER HEALTH FEDERAL PAC	;								
Full Name (Last, First, Middle Initial)									
A. Internal Revenue Services			Date of Di	isbursement					
Mailing Address 324 25th Street			07	30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
City	State Zip Code								
Odgen	UT 84401		Transact	tion ID : SB21B.19033					
Purpose of Disbursement quarterly tax deposits - IRS		001	Amount of	Each Disbursement this Period					
Candidate Name		Category/	7 0.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
		Type		6658.25					
Office Sought: House Disbursen									
	Primary General Other (specify) ▼								
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Full Name (Last, First, Middle Initial)									
B. Internal Revenue Services			Date of Di	isbursement					
Mailing Address 324 25th Street			08	24 2012					
City S Odgen	State Zip Code UT 84401		Transac	tion ID : SB21B.19042					
Purpose of Disbursement	01 64401								
quarterly tax deposits - IRS		001	Amount of	Each Disbursement this Period					
Candidate Name		Category/		3809.90					
Office Sought: House Disbursen	nent For:	Туре							
	Primary General								
President	Other (specify) ▼								
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Full Name (Last, First, Middle Initial)			Data of D	:-h					
C. Internal Revenue Services				isbursement					
Mailing Address 324 25th Street			09	21 2012					
City	State Zip Code								
Odgen	UT 84401		Transac	tion ID : SB21B.19049					
Purpose of Disbursement quarterly tax deposits - IRS		'004							
Candidate Name		001	Amount of	Each Disbursement this Period					
Candidate Name		Category/ Type		590.87					
Office Sought: House Disbursen	nent For:	- 7/0-0							
	Primary General								
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S	CHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 211							211 (OF :	218	
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	Candidate Name			Category Type	//			T	T		3068	3.99		
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R	Full Name (Last, First, Middle Initial)					Date of	f Diehi	ırcan	nant					
υ.	Ms Prisylla Jasso						_			· ·	Y	V		
	Mailing Address 213 Quail Court					07	J'L	13	_		2012	Y		
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	McAllen Purpose of Disbursement	TX	78502											
	contract services - salary expenditure			001		Amoun	t of Ea	ıch [Disbu	rsemer	nt this	Perio	od	
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C.	Ms Prisylla Jasso					Date of	f Disbu	ırsen	nent					
	MARIN ALL STATES					M M	/	07	_		Y Y	Υ		
	Mailing Address 213 Quail Court					07		27	-	4	2012			
	City	state	Zip Code			Trans	saction	י חוי	SB2	1B.190	N31			
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	President	Other (specif	fy) ▼											
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S	CHEDULE B (FEC Form 3X)	l		FOR LINE NUMBER: PAGE 212 OF							
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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)										
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Α.	Ms Prisylla Jasso				Date of	f Disburse	ment				
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	Mailing Address 213 Quail Court				08	2	7	2012			
	City	State	Zip Code								
	McAllen	TX	78502		Trans	action ID	: SB21B.19	9043			
	Purpose of Disbursement contract services - salary expenditure										
	Candidate Name			001	Amoun	t of Each	Disbursem	ent this	Period		
	Candidate Name			Category/ Type				2710).71		
	Office Sought: House Disbursen	nent For:		1,900			7				
	Senate	Primary	General								
		Other (spe	cify) 🔻								
_	State: District: Full Name (Last, First, Middle Initial)										
В.	Ms Prisylla Jasso				Date of	f Disburse	ment				
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	Mailing Address 213 Quail Court				09	2	4	2012			
	City S McAllen	State TX	Zip Code 78502		Trans	saction ID	: SB21B.1	9052			
	Purpose of Disbursement		-								
	contract services - salary expenditure			001	Amoun	t of Each	Disburseme	ent this	Period		
	Candidate Name			Category/ Type				276	3.43		
	Office Sought: House Disbursen	nent For:		ı ype		- 1	- 1				
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_	State: District:										
C.	Full Name (Last, First, Middle Initial) Long Chilton LLP				Date of	f Disburse	ment				
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	Mailing Address 4100 N. 23rd				07	17	7	2012			
	City	State	Zip Code		T.	antine In	. CD045 1	0000			
	McAllen	TX	78504		irans	action ID	: SB21B.1	9U Z Ø			
	Purpose of Disbursement paysmart payroll services			001			D'ala		Dest 1		
	Candidate Name				Amoun	t of Each	Disbursem	ent this	Period		
				Category/ Type				85	5.53		
	Office Sought: House Disbursem										
		Primary Other (spec	General								
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s	SUBTOTAL of Disbursements This Page (optional)							5559	.67		
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T	OTAL This Period (last page this line number only).					,	-				

S	CHEDULE B (FEC Form 3X)										213 OF 218				
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		Detailed Summary Page		\Box	27	28a		28b	28	c	29	30			
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	for commercial purposes, other than using the nan														
$\overline{\ }$	NAME OF COMMITTEE (In Full)														
$ \ \rangle$	BORDER HEALTH FEDERAL PAGE	3													
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٨	Full Name (Last, First, Middle Initial)					Dot-	t D:	ob	men!						
A.	Long Chilton LLP					Date o	_		_						
	Mailing Address 4100 N. 23rd					09	1	0			012	Y			
	3					00		y							
	City	State Zip Code				Trans		ion ID	: SB21	D 400	1.1				
	McAllen	TX 78504				irans	act	טו ווטו	. 3021	D. 1904	+4				
	Purpose of Disbursement paysmart payroll services			104	$\neg \top$	Δ	1 -1		D:-I		. ala! - !	Davide et			
	Candidate Name			01		Amoun	ıt Oİ	⊏acn	DISDUR	sement	เกเรา	eriod			
	Candidate Name			egor	y/	'					32	2.48			
	Office Sought: House Disburser	ment For:	1	ype			_	7							
	Senate	Primary General													
	President	Other (specify) ▼													
_	State: District:	· 													
	Full Name (Last, First, Middle Initial)														
В.	Sprint					Date o	f Di	sburse	ment						
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	Mailing Address P.O. Box 8077					08		1	3	2	012				
	City	State Zip Code						_		_					
	London	KY 40742				Trans	sact	ion ID	: SB21	B.190	39				
	Purpose of Disbursement		-	-	\neg										
	phone service expenditure		C	001		Amoun	t of	Each	Disburs	sement	this I	Period			
	Candidate Name			egor	y/						262	2.44			
	Office Cought: House But	mont For	T	ype			-	7			202				
	Office Sought: House Disburser Senate	ment For: Primary General													
	President	Other (specify)													
	State: District:	- · · · · · · · · · · · · · · · · · · ·													
_	Full Name (Last, First, Middle Initial)														
C.	Texas Workforce Commission					Date o	f Di	sburse	ment						
						M M	/	D	D /	Y Y	Υ	Υ			
	Mailing Address P.O. Box 149037					09		1	1	20	012				
	City	Ctata Zin Cada													
	City :	State Zip Code TX 78714				Trans	sact	ion ID	: SB21	B.190	46				
	Purpose of Disbursement	. 10117		_											
	quarterly tax deposits - IRS		0	001		Amoun	t of	Each	Disburs	sement	this I	Period			
	Candidate Name		Cate	egor	y/		-				-				
				ype	•			1			232	2.63			
	Office Sought: House Disburser														
	Senate														
	President District:	Other (specify) ▼													
_	State: District:														
١,	CURTOTAL of Dishursements This David (antique)										527	.55			
Ľ	SUBTOTAL of Disbursements This Page (optional)				<u> </u>		+	7							
١,	OTAL This Period (last nage this line number only)	1					_								

SCHEDULE B (FEC Form 3X)		F05 : :::=	NUMBER: PAGE 214 OF 218						
•	Use separate schedule(s)	FOR LINE (check only	L NOMBLIT.						
ITEMIZED DISBURSEMENTS	for each category of the	X 21b	22 23 24 25 26						
	Detailed Summary Page	27	28a 28b 28c 29 30						
Any information copied from such Reports and State	nonte may not be cold or use	d by any pared	on for the purpose of coliniting contributions						
or for commercial purposes, other than using the nar									
NAME OF COMMITTEE (In Full)	, , , , , , , , , , , , , , , , , , , ,								
BORDER HEALTH FEDERAL PAGE	_								
/ BURDER HEALTH FEDERAL PAI	<i></i>								
Full Name (Last, First, Middle Initial)									
Nater Tower Village			Date of Disbursement						
Trate: 15 Tol. Tillage			M M / D D / Y Y Y Y						
Mailing Address 52211 N. McColl Road			07 03 2012						
City	State Zip Code		Transaction ID : SB21B.19025						
McAllen	TX 78504		Transaction ib . 35215.19023						
Purpose of Disbursement office lease expenditure		004							
		001	Amount of Each Disbursement this Period						
Candidate Name		Category/	1331.25						
Office Country House		Туре							
	ment For:								
Senate President	Primary General								
State: District:	Other (specify) ▼								
Full Name (Last, First, Middle Initial)			Date of Disbursement						
3. Water Tower Village									
Mailing Address 52211 N. McColl Road			08 13 2012						
Mailing Address 52211 N. MicColl Road			00 10 2012						
City	State Zip Code								
McAllen	TX 78504		Transaction ID : SB21B.19038						
Purpose of Disbursement									
office lease expenditure		001	Amount of Each Disbursement this Period						
Candidate Name		Category/	1331.25						
		Туре	1331.23						
	ment For:								
Senate	Primary General								
President	Other (specify) ▼								
State: District:									
Full Name (Last, First, Middle Initial)			Date of Disbursement						
C.									
Mailing Address			M M / D D / Y Y Y Y						
Mailing Address									
City	State Zip Code								
- · ·	p 3000								
Purpose of Disbursement									
			Amount of Each Disbursement this Period						
Candidate Name		Category/							
		Type							
Office Sought: House Disburse	ment For:		, , , , , , , , , , , , , , , , , , , ,						
Senate									
President	Other (specify) ▼								
State: District:									
SUBTOTAL of Disbursements This Page (optional)			2662.50						
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TOTAL This Period (last page this line number only)		64860.02						

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 215 OF 2							
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	(check only	E NOMBEN.						
	for each category of the Detailed Summary Page	21b							
	Detailed Summary Page	27	28a 28b 28c 29 30l						
Any information copied from such Reports and State									
or for commercial purposes, other than using the nar	me and address of any politic	al committee to	solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)	_								
$ \; angle$ BORDER HEALTH FEDERAL PA $ \; angle$	C								
Full Name (Last, First, Middle Initial)									
A. JOSH MANDEL			Date of Disbursement						
			M M / D D / Y Y Y Y						
Mailing Address 2112 ACACIA PARK DRIVE SUIT	E 504		09 21 2012						
City	State 7:n Cada								
City LYNDHURST	State Zip Code OH 44124		Transaction ID : SB23.19057						
Purpose of Disbursement	77124								
contribution		011	Amount of Each Disbursement this Period						
Candidate Name		Category/	5000.00						
JOSH MANDEL		Type	5000.00						
	ment For: 2012								
Senate President	Primary General								
State: OH District: 00	Other (specify) ▼								
Full Name (Last, First, Middle Initial)									
B. TEXAS CONSERVATIVES FUND			Date of Disbursement						
TEXTO CONCERVATIVES FORD			M = M / D = D / Y = Y = Y						
Mailing Address 815-A BRAZOS STREET #575			07 27 2012						
City AUSTIN	State Zip Code TX 78701		Transaction ID : SB23.19023						
Purpose of Disbursement	1/0/101								
contribution		011	Amount of Each Disbursement this Period						
Candidate Name		Category/	5000000						
TEXAS CONSERVATIVES FUND		Type	50000.00						
	ment For: 2012								
Senate President	Primary General								
State: District:	Other (specify) ▼ Runoff								
Full Name (Last, First, Middle Initial)	Runon								
C. FILEMON MR. VELA			Date of Disbursement						
			M M / D D / Y Y Y Y						
Mailing Address 333 EBONY AVENUE			09 10 2012						
Cit.	Otata 75 Octo								
City BROWNSVILLE	State Zip Code TX 78520		Transaction ID: SB23.19058						
Purpose of Disbursement	10020								
contribution		011	Amount of Each Disbursement this Period						
Candidate Name		Category/	5000.00						
FILEMON MR. VELA		Type	5000.00						
Office Sought: House Disburse									
Senate President	Primary General								
State: TX District: 34	Other (specify) ▼								
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SUBTOTAL of Disbursements This Page (optional)			60000.00						
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TOTAL This Period (last page this line number only)		1						

SCHEDULE B (FEC Form 3X)	Hoo concrete activities	FOR LINE	PAGE 216 OF 218	
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one) 22 X 23	24 25 26
	Detailed Summary Page	27	28a 28b	28c 29 30
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or for commercial purposes, other than using the name	e and address of any politic	al committee to	solicit contributions fro	m such committee.
NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL PAC	`			
DORDER HEALTH FEDERAL PAC				
Full Name (Last, First, Middle Initial)			Data of Diahumaanaa	
A. FILEMON MR. VELA			Date of Disbursemen	1 ι
Mailing Address 333 EBONY AVENUE			09 10	2012
City	State Zip Code			
	TX 78520		Transaction ID : SI	323.19059
Purpose of Disbursement contribution				
Candidate Name		011	Amount of Each Disl	oursement this Period
FILEMON MR. VELA		Category/ Type		5000.00
Office Sought: House Disbursem	nent For: 2014		,	,
	Primary General			
State: TX District: 34	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
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Mailing Address			M = M / D = D	/ Y = Y = Y
Mailing Address				
City	State Zip Code			
Purpose of Disbursement				
·			Amount of Each Disl	oursement this Period
Candidate Name		Category/		
Office Sought: House Disbursem	nent For:	Туре		7
	Primary General			
	Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial) C.			Date of Disbursemer	nt
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Mailing Address				
City	State Zip Code			
Purpose of Disbursement				
ruipose oi Disbuisement			Amount of Each Disl	oursement this Period
Candidate Name		Category/	Amount of Each Dist	oursement this i chou
000		Type		7
Office Sought: House Disburser Senate	nent For: Primary General			
President				
State: District:				
				5000.00
SUBTOTAL of Disbursements This Page (optional)		<u> </u>		3000.00
TOTAL This Period (last page this line number only).				65000.00

SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 217 OF
FOR LINE NUMBER:
(check only one)

9 X 10

218

NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): rental space **AC Rentals** Mailing Address PO Box 2673 State Zip Code McAllen 78502 Transaction ID: SD10.9553 Outstanding Balance Beginning This Period 900.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 900.00 0.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): rental space **AC Rentals** Mailing Address PO Box 2673 City State Zip Code McAllen 78502 TX Outstanding Balance Beginning This Period Transaction ID: SD10.10053 900.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 900.00 0.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period Payment This Period Amount Incurred This Period Outstanding Balance at Close of This Period 1800.00 1) SUBTOTALS This Period This Page (optional)..... 1800.00 2) TOTALS This Period (last page this line number only)..... 0.00 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... 1800.00 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

1mage# 13962847799 PAGE 218 / 218

: 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.