

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 52
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
May For Congress

A. Full Name (Last, First, Middle Initial)
Coleman Driver

Mailing Address 1002 Campanile

City San Antonio State TX Zip Code 78258

FEC ID number of contributing federal political committee. **C**

Name of Employer Veterans Administration Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 01 / 2016

Transaction ID : SA11AI.6729

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Dr. Gary Fish

Mailing Address 6230 Royal Crest Drive

City Dallas State TX Zip Code 75230

FEC ID number of contributing federal political committee. **C**

Name of Employer Texas Retina Associates Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 28 / 2016

Transaction ID : SA11AI.6767

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Bruce Fried

Mailing Address 2207 Slide Road

City Lubbock State TX Zip Code 79407

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.6858

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....

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

2250.00