

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

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

FOR LINE NUMBER: PAGE 171 OF 181
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
US Oncology Inc. Network Political Action Committee

A. Lalan S Wilfong M.D.
 Full Name (Last, First, Middle Initial)
 Mailing Address 5521 Pebblebrook Dr
 City State Zip Code
 Dallas TX 75229-5510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 TxO - Dallas Presby. Physician
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 756.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2015
Transaction ID : 2015091517813-34
 Amount of Each Receipt this Period
 42.00

B. Lalan S Wilfong M.D.
 Full Name (Last, First, Middle Initial)
 Mailing Address 5521 Pebblebrook Dr
 City State Zip Code
 Dallas TX 75229-5510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 TxO - Dallas Presby. Physician
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 756.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2015
Transaction ID : 20151013165243-42
 Amount of Each Receipt this Period
 42.00

C. Nini Choun-YI Wu M.D.
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 11487
 City State Zip Code
 Albany NY 12211-0487
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Albany Cancer Center Physician
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3762.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2015
Transaction ID : 2015091517813-200
 Amount of Each Receipt this Period
 209.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 293.00
TOTAL This Period (last page this line number only)..... ▶