

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

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

FOR LINE NUMBER: PAGE 16 / 783
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Texas Medical Association Political Action Committee

A. Full Name (Last, First, Middle Initial)
Dr. David C. Dyslin

Mailing Address 5116 Trinity Landing Dr W

City State Zip Code
Fort Worth TX 76132-3738

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

Name of Employer Occupation
Arlington Surgical Association Physician

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
07 / 15 / 2009

Transaction ID: 30877190

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Ms. D'Anna Wick

Mailing Address 2002 Canberra Ct

City State Zip Code
Tyler TX 75703-5802

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

Name of Employer Occupation
Texas Medical Association Alliance TMAA President 2009-2010

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
07 / 15 / 2009

Transaction ID: 30877191

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Dr. Luis Hernando Urrea, II

Mailing Address 5009 Vista del Monte St

City State Zip Code
El Paso TX 79922-2034

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

Name of Employer Occupation
El Paso Orthopaedic Surgery Group Physician

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
07 / 15 / 2009

Transaction ID: 30877193

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **750.00**

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