

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

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

FOR LINE NUMBER: PAGE 100 OF 181

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

**US Oncology Inc. Network Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Lopez, Arsenio, G, ,**

Mailing Address 441 Majestic Mountain Dr

City  
El Paso

State  
TX

Zip Code  
79912-6301

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Texas Oncology, P.A.

Occupation (for Individual)  
Physician Shareholder Med Onc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

08 / 30 / 2019

**Transaction ID : 2019083010335-185**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Loukas, Demetrius, F, ,**

Mailing Address 4611 Ridge Oak Dr

City  
Austin

State  
TX

Zip Code  
78731-5211

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Texas Oncology, P.A.

Occupation (for Individual)  
Physician Shareholder Med Onc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

08 / 15 / 2019

**Transaction ID : 201908151216-140**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Loukas, Demetrius, F, ,**

Mailing Address 4611 Ridge Oak Dr

City  
Austin

State  
TX

Zip Code  
78731-5211

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Texas Oncology, P.A.

Occupation (for Individual)  
Physician Shareholder Med Onc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

08 / 30 / 2019

**Transaction ID : 2019083010335-186**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

300.00