

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

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

FOR LINE NUMBER: PAGE 181 OF 526

(check only one)

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

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NAME OF COMMITTEE (In Full)

BORDER HEALTH FEDERAL PAC

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

A. Gutierrez, Marco, , ,

Mailing Address 511 N. Depot Road

City
edenburg

State
TX

Zip Code
78541

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
selfemployed

Occupation (for Individual)
physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 16 / 2019

Transaction ID : SA11AI.47890

Amount of Each Receipt this Period

400.00

☐ Memo Item
contribution

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

B. Gutierrez, Marco, , ,

Mailing Address 511 N. Depot Road

City
edenburg

State
TX

Zip Code
78541

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
selfemployed

Occupation (for Individual)
physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 20 / 2019

Transaction ID : SA11AI.48720

Amount of Each Receipt this Period

400.00

☐ Memo Item
contribution

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

C. Gutierrez, Marco, , ,

Mailing Address 511 N. Depot Road

City
edenburg

State
TX

Zip Code
78541

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
selfemployed

Occupation (for Individual)
physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 18 / 2019

Transaction ID : SA11AI.48721

Amount of Each Receipt this Period

400.00

☐ Memo Item
contribution

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

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

1200.00