

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

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

FOR LINE NUMBER: PAGE 12 OF 30

(check only one)

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

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NAME OF COMMITTEE (In Full)

**TEXAS SPINE AND JOINT HOSPITAL PAC**

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

A. DETWEILER, PAUL, , ,

Mailing Address 3635 CANYON CREEK CIRCLE

City  
TYLER

State  
TX

Zip Code  
75707

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2104.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 15 / 2019

Transaction ID : SA11AI.7519

Amount of Each Receipt this Period

344.00

☐ Memo Item

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

B. DETWEILER, PAUL, , ,

Mailing Address 3635 CANYON CREEK CIRCLE

City  
TYLER

State  
TX

Zip Code  
75707

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2563.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 15 / 2019

Transaction ID : SA11AI.7521

Amount of Each Receipt this Period

459.00

☐ Memo Item

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

C. DETWEILER, PAUL, , ,

Mailing Address 3635 CANYON CREEK CIRCLE

City  
TYLER

State  
TX

Zip Code  
75707

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2946.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 16 / 2019

Transaction ID : SA11AI.7517

Amount of Each Receipt this Period

383.00

☐ Memo Item

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

1186.00

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