

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 17 OF 27
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Texas Medical Association Political Action Committee

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

A. Oliverson, Thomas, J., Dr.,

Mailing Address 15027 Hidden Valley Water Dr

City
CypressState
TXZip Code
77429-5898FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
US Anesthesia Partners of Texas, PAOccupation (for Individual)
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	19	/	2020

Transaction ID : 82119283

Amount of Each Receipt this Period

2375.00

☐ Memo Item

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

B. Pearse, Lee Ann, , Dr.,

Mailing Address 12116 Drujon Ln

City
DallasState
TXZip Code
75244-7703FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MEDNAX (Pediatrix)Occupation (for Individual)
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.02

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	17	/	2020

Transaction ID : 82119284

Amount of Each Receipt this Period

208.34

☐ Memo Item

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

C. Kew, Yvonne, , Dr.,

Mailing Address 3607 Grennoch Ln

City
HoustonState
TXZip Code
77025-1935FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Yvonne Kew, MD, PLLCOccupation (for Individual)
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	17	/	2020

Transaction ID : 82119285

Amount of Each Receipt this Period

1000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

3583.34

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