

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 316 OF 358
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 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)
BORDER HEALTH FEDERAL PAC

A. Vasquez, Jose, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2548 Palm Circle

City rio grande city	State TX	Zip Code 78582
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) selfemployed	Occupation (for Individual) physician
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2017
Transaction ID : SA11AI.39486

Amount of Each Receipt this Period
250.00

Memo Item contribution

B. Vasquez, Jose, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2548 Palm Circle

City rio grande city	State TX	Zip Code 78582
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) selfemployed	Occupation (for Individual) physician
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.39487

Amount of Each Receipt this Period
250.00

Memo Item contribution

C. Vela, Efraim, , Dr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 E. Ridge Road #B

City McAllen	State TX	Zip Code 78503
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) selfemployed	Occupation (for Individual) physician
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 03 / 2017
Transaction ID : SA11AI.37850

Amount of Each Receipt this Period
250.00

Memo Item contribution

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	