

**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 201 OF 218
<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)
BORDER HEALTH FEDERAL PAC

A. Patrick Wilcox
Full Name (Last, First, Middle Initial)
Mailing Address 111 Rio Grande
City mission State TX Zip Code 78572
FEC ID number of contributing federal political committee. **C**
Name of Employer selfemployed Occupation physician
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **900.00**

Date of Receipt **09 / 27 / 2012**
Transaction ID : SA11AI.19368
Amount of Each Receipt this Period **100.00**
contribution

B. Subbarao Yarra
Full Name (Last, First, Middle Initial)
Mailing Address 6905 N. Cynthia
City McAllen State TX Zip Code 78504
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-employed Occupation physician
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1800.00**

Date of Receipt **07 / 17 / 2012**
Transaction ID : SA11AI.18662
Amount of Each Receipt this Period **400.00**
contribution

C. Subbarao Yarra
Full Name (Last, First, Middle Initial)
Mailing Address 6905 N. Cynthia
City McAllen State TX Zip Code 78504
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-employed Occupation physician
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **2200.00**

Date of Receipt **08 / 24 / 2012**
Transaction ID : SA11AI.19012
Amount of Each Receipt this Period **400.00**
contribution

SUBTOTAL of Receipts This Page (optional)..... **900.00**
TOTAL This Period (last page this line number only).....