

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

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

FOR LINE NUMBER: PAGE 6 OF 18

(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. CALLENDER, TROY, , ,

Mailing Address 3413 GOLDEN ROAD

City
TYLER

State
TX

Zip Code
75701

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 ▼

422.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 10 / 2020

Transaction ID : SA11AI.7704

Amount of Each Receipt this Period

227.00

☐ Memo Item

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

B. CALODNEY, AARON, , ,

Mailing Address 17909 CR 132

City
FLINT

State
TX

Zip Code
75762

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 ▼

491.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 08 / 2020

Transaction ID : SA11AI.7665

Amount of Each Receipt this Period

491.00

☐ Memo Item

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

C. CALODNEY, AARON, , ,

Mailing Address 17909 CR 132

City
FLINT

State
TX

Zip Code
75762

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 ▼

1063.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 10 / 2020

Transaction ID : SA11AI.7666

Amount of Each Receipt this Period

572.00

☐ Memo Item

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

1290.00

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