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

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NAME OF COMMITTEE (In Full)
BORDER HEALTH FEDERAL PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Yarra, Subbarrao, , ,

Mailing Address 6905 N. Cynthia
City: McAllen | State: TX | Zip Code: 78504

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 ▼ 1100.00

Date of Receipt: 11 / 17 / 2017
Transaction ID : SA11AI.41583

Amount of Each Receipt this Period: 100.00

☐ Memo Item
contribution

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Yarra, Subbarrao, , ,

Mailing Address 6905 N. Cynthia
City: McAllen | State: TX | Zip Code: 78504

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 ▼ 1200.00

Date of Receipt: 12 / 15 / 2017
Transaction ID : SA11AI.41584

Amount of Each Receipt this Period: 100.00

☐ Memo Item
contribution

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Zayed, Fuad, , Dr.,

Mailing Address 1425 Sweet Lane
City: Edinburg | State: TX | Zip Code: 78539

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): selfemployed
Occupation (for Individual): physician

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 525.00

Date of Receipt: 07 / 20 / 2017
Transaction ID : SA11AI.39957

Amount of Each Receipt this Period: 75.00

☐ Memo Item
contribution

SUBTOTAL of Receipts This Page (optional) ▶ 275.00

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