

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 110 OF 156

(check only one)

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

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NAME OF COMMITTEE (In Full)

US Oncology Inc. Network Political Action Committee

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

A. Paulson, R, S, ,

Mailing Address 9831 Meadowbrook Dr

City
DallasState
TXZip Code
75220-2139FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Texas Oncology, P.A.Occupation (for Individual)
Physician Shareholder-JPB Pres

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2020

Transaction ID : 202005069495-267

Amount of Each Receipt this Period

125.00

☐ Memo Item

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

B. Perez, Enrique, A, ,

Mailing Address 5598 Swisher Cir

City
FriscoState
TXZip Code
75034-5900FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Texas Oncology, P.A.Occupation (for Individual)
Physician Emp Medical Onc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 15 / 2020

Transaction ID : 202004151215-55

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Perez, Enrique, A, ,

Mailing Address 5598 Swisher Cir

City
FriscoState
TXZip Code
75034-5900FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Texas Oncology, P.A.Occupation (for Individual)
Physician Emp Medical Onc

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2020

Transaction ID : 202005069495-71

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

225.00

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