

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 57

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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)
FRIENDS OF MIKE LEE INC

Full Name (Last, First, Middle Initial) RODRIGUEZ, EDGAR, ,			Date of Receipt MM / DD / YYYY 05 / 03 / 2017	
Mailing Address 112 CONDOR AVE			Transaction ID : SA11A.58542	
City MCALLEN	State TX	Zip Code 78504-2219		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 1000.00	
Name of Employer SELF-EMPLOYED		Occupation PHYSICIAN	<input type="checkbox"/> Memo Item CONTRIBUTION	
Receipt For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) RUNOFF		Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) ROGERS, RICHARD, R., MR.,			Date of Receipt MM / DD / YYYY 05 / 03 / 2017	
Mailing Address 16251 DALLAS PKWY.			Transaction ID : SA11A.58543	
City ADDISON	State TX	Zip Code 75001-6801		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 5000.00	
Name of Employer INFORMATION REQUESTED PER BEST EFF		Occupation INFORMATION REQUESTED PER BEST EFF	<input type="checkbox"/> Memo Item CONTRIBUTION	
Receipt For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) RUNOFF		Election Cycle-to-Date 5000.00		

Full Name (Last, First, Middle Initial) SHUAIB, TAWHID, A., DR.,			Date of Receipt MM / DD / YYYY 05 / 03 / 2017	
Mailing Address 500 E. RIDGE RD STE. 101			Transaction ID : SA11A.58545	
City MCALLEN	State TX	Zip Code 78503-1508		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 2700.00	
Name of Employer SELF-EMPLOYED		Occupation PHYSICIAN	<input type="checkbox"/> Memo Item CONTRIBUTION	
Receipt For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) RUNOFF		Election Cycle-to-Date 2700.00		

SUBTOTAL of Receipts This Page (optional).....	8700.00
TOTAL This Period (last page this line number only).....	