#### FORM MPAC MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID 2 Total pages filed: The MPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 136 00055547 3 COMMITTEE NAME **OFFICE USE ONLY** Border Health PAC Date Received **ELECTRONICALLY FILED** 08/05/2025 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 612 W. Nolana, Ste. 340 McAllen, TX 78504 Date Hand-delivered or Date Postmarked CAMPAIGN MS / MRS / MR **FIRST** MI **TREASURER** Receipt # Amount Mr. Ernie NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Perez CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 612 W. Nolana, Ste. 340 STREET **ADDRESS** (Residence or Business) McAllen, TX 78504 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 612 W. Nolano, Ste. 340 MAILING **ADDRESS** McAllen, TX 78504 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (956) 994-9757 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 April 5 July 5 October 5 REPORT FILING **DEADLINE** February 5 May 5 X August 5 November 5 March 5 September 5 December 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 06/26/2025 07/25/2025 **GO TO PAGE 2**

### MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

# FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Border Health PAC			0005554	7
14 COMMITTEE ACTIVITY	Candidates  (Identify by name or, if applicable, classify by party.)	A. Supported		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	Measures (Describe by date and location of election and nature of issue.)	A. Supported  B. Opposed		
		. Орросси		
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M check here if this report	O POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICAL (OTHER THAN PLEI	IL CONTRIBUTIONS  DGES, LOANS, OR GUARANTEES OF LOANS)	\$	136,382.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	D POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	266,700.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL ( OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	398,338.30
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT			<u> </u>	
		I swear, or affirm, under penalty of per true and correct and includes all inform under Title 15, Election Code.	rjury, that the mation requir	e accompanying report is ed to be reported by me
		Mr. Ern	ie Perez	
		Signature of Car	mpaign Treas	surer
AFFIX NOTARY	STAMP / SEAL ABOVE			
Sworn to and subscribed	before me, by the said	, th	nis the	day
of	_, 20, to certify	which, witness my hand and seal of office.		
Signature of officer ac	Iministering oath	Printed name of officer administering oath	Title of of	ficer administering oath

#### **SUBTOTALS - MPAC**

# FORM MPAC COVER SHEET PG 3

				_	3 of 136
<b>17</b> CC	MMITTI	EE NAME	18 Filer ID	(Ethics Commissi	on Filers)
Во	rder He	alth PAC	00055547		
		E SUBTOTALS SCHEDULE		SUBTOTAL	AMOUNT
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	136,382.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	R	\$	
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORAL LABOR ORGANIZATION	TION OR	\$	
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGA	ANIZATION	\$	
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$	
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR O	ORGANIZATION	\$	
9.		SCHEDULE E: LOANS		\$	
10.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$	266,700.00
11.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
12.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$	
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
14.	X	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	18,271.97
15.	Х	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	414.38

	MONEI	ARY POLITICAL CONTRI	BUTIONS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to compl	ete this form.	1	Total pages Schedule A1: Sch: 1/128 Rpt: 4/136	
2	FILER NAME Border Healt	n PAC		3	Filer ID (Ethics Commissio 00055547	n Filers)
4	Date 07/01/2025	Ilinas-Cepeda, Jose Alejandro (Dr.)  6 Contributor address; City; State; Zip Code	e PAC (ID#:		7 Amount of Contribution (\$)	\$80.00
8	Principal occu	McAllen, TX 78504 Dation / Job title (See Instructions)	<b>9</b> Emp	loyer (See Instructions)		
	Date 07/18/2025	Full name of contributor out-of-state Ulinas-Cepeda, Jose Alejandro (Dr.)  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
	Principal occu physician	pation / Job title (See Instructions)	Emp	loyer (See Instructions)		
	Date 07/01/2025	Full name of contributor out-of-state Aboujamous, Riad (Mr.)  Contributor address; City; State; Zip Code	e PAC (ID#:		Amount of Contribution (\$)	\$25.00
	Principal occu	McAllen, TX 78504 pation / Job title (See Instructions)	Emp	loyer (See Instructions)		
	private inves					
	Date 07/18/2025	Aboujamous, Riad (Mr.)  Contributor address; City; State; Zip Code	e PAC (ID#:		Amount of Contribution (\$)	\$25.00
	Principal occu	McAllen, TX 78504  pation / Job title (See Instructions)	Emp	loyer (See Instructions)		
_	Date 07/01/2025		e PAC (ID#:		Amount of Contribution (\$)	\$250.00
	Principal occu Doctor	pation / Job title (See Instructions)	Emp	loyer (See Instructions)		

	MONET	ARY POLITICAL CONTRIE	BUTION	NS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complet	te this for	m.	1	Total pages Schedule A1: Sch: 2/128 Rpt: 5/136	
2	FILER NAME Border Healt	h PAC			3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/18/2025	<ul> <li>Full name of contributor  out-of-state R</li> <li>Abreu, Charity (Dr.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>	PAC (ID#:	)	7	Amount of Contribution (\$)	\$250.00
_		Mission, TX 78572	1-				
8	Principal occur Doctor	pation / Job title (See Instructions)	9	Employer (See Instructions	s)		
	Date 07/18/2025	Full name of contributor out-of-state in Agapito, Adrian (Dr.)  Contributor address; City; State; Zip Code  Pharr, TX 78577				Amount of Contribution (\$)	\$7.48
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>                                      </u>		
	Physician			Self-employed			
	Date 07/01/2025	Full name of contributor out-of-state in Agapito, Adrian (Dr.)  Contributor address; City; State; Zip Code	PAC (ID#:	)		Amount of Contribution (\$)	\$7.48
		Pharr, TX 78577					
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions Self-employed	5)		
	Date 07/01/2025	Full name of contributor out-of-state I Ahmed, Adnam (Dr.)  Contributor address; City; State; Zip Code  Edinburg, TX 78539	-	)		Amount of Contribution (\$)	\$100.00
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions Self-employed	5)		
	Date 07/18/2025	Full name of contributor out-of-state for Ahmed, Adnam (Dr.)  Contributor address; City; State; Zip Code  Edinburg, TX 78539	PAC (ID#:			Amount of Contribution (\$)	\$100.00
	Principal occu Physician	oation / Job title (See Instructions)		Employer (See Instructions Self-employed	s)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDULE	<b>■ A1</b>
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 3/128 Rpt: 6/136	
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission 00055547	Filers)
4	Date 07/11/2025	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_Alam, Golam (Dr.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$20.00
_		McAllen, TX 78503				
8	Principal occu Doctor	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 07/18/2025	Full name of contributor			Amount of Contribution (\$)	\$20.00
		McAllen, TX 78503				
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_ Alexander, Justin (Mr.)  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$18.70
		Harlingen, TX 78550				
	Principal occu private inves	oation / Job title (See Instructions) tor	Employer (See Instructions	)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:_Alexander, Justin (Mr.)  Contributor address; City; State; Zip Code  Harlingen, TX 78550			Amount of Contribution (\$)	\$18.70
	Principal occu private inves	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_Alhroob, Assad (Dr.)  Contributor address; City; State; Zip Code  Edinburg, TX 78539	)		Amount of Contribution (\$)	\$20.00
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONEI	ARY POLITICAL C	ONTRIBUTIO	ONS		SCHEDULI	<b>A1</b>
	The Instru	ction Guide explains how	to complete this f	orm.	1	Total pages Schedule A1: Sch: 4/128 Rpt: 7/136	
2	FILER NAME Border Healt	th PAC			3	Filer ID (Ethics Commission 00055547	ı Filers)
4	Date 07/18/2025	<ul><li>5 Full name of contributor Alhroob, Assad (Dr.)</li><li>6 Contributor address; City; Sta</li></ul>	out-of-state PAC (ID#:_ te; Zip Code	)	7	Amount of Contribution (\$)	\$20.00
8	Principal occu	Edinburg, TX 78539 pation / Job title (See Instructions)		9 Employer (See Instructions	<u> </u> s)		
	Date 07/18/2025	Full name of contributor Ali, Sardar (Mr.)  Contributor address; City; Sta  Mission, TX 78572	out-of-state PAC (ID#:_ te; Zip Code			Amount of Contribution (\$)	\$50.00
	Principal occu Private inves	pation / Job title (See Instructions) stor		Employer (See Instructions self employed	5)		
	Date 07/18/2025	Full name of contributor Ali, Sardar (Mr.)  Contributor address; City; Sta	out-of-state PAC (ID#:_ tte; Zip Code	)		Amount of Contribution (\$)	\$50.00
		Mission, TX 78572					
	Principal occu Private inves	pation / Job title (See Instructions) stor		Employer (See Instructions self employed	5)		
	Date 07/01/2025	Full name of contributor Aliseda, Ernest (Mr.) Contributor address; City; Sta	out-of-state PAC (ID#:_ te; Zip Code	)		Amount of Contribution (\$)	\$60.00
	Principal occu Private Inves	McAllen, TX 78504 pation / Job title (See Instructions)		Employer (See Instructions Self-employed	<u> </u> 5)		
	Date 07/18/2025	Full name of contributor Aliseda, Ernest (Mr.) Contributor address; City; Sta	out-of-state PAC (ID#:_ te; Zip Code	)		Amount of Contribution (\$)	\$60.00
	Principal occu Private Inves	pation / Job title (See Instructions) stor		Employer (See Instructions Self-employed	s)		

	MONET	ARY POLITICAL CONTRIBUTI	ONS		SCHEDULI	E <b>A1</b>
	The Instruc	tion Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 5/128 Rpt: 8/136	
2	FILER NAME Border Healt	n PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/01/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$56.11
8	Principal occu	McAllen, TX 78504 pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	private inves			-,		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID: Allan, Tareq (Mr.)  Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$56.11
	D: : 1	McAllen, TX 78504	1 - 1 (0 1	Ĺ		
	private inves	oation / Job title (See Instructions) or	Employer (See Instructions	S)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID: Almedia, Hillary (Dr.)  Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$75.00
		McAllen, TX 78503				
	Principal occu Doctor	oation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID: Almedia, Hillary (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78503	#:)		Amount of Contribution (\$)	\$75.00
	Principal occu Doctor	oation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID: Almedia, Jose (Dr.)  Contributor address; City; State; Zip Code  Boerne, TX 78015	#:)		Amount of Contribution (\$)	\$56.11
	Principal occu physician	oation / Job title (See Instructions)	Employer (See Instructions	s)		
			•			

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 6/128 Rpt: 9/136	
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/18/2025	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_Almedia, Jose (Dr.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$56.11
		Boerne, TX 78015				
8	Principal occu physician	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_Alsabagh, Mourad (Dr.)  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
	Dringinal occu	Edinburg, TX 78539 pation / Job title (See Instructions)	Employer (See Instructions	·/-		
	physician	Jation / Job title (See matractions)	Employer (See instructions	)		
	Date 07/18/2025	Full name of contributor	)		Amount of Contribution (\$)	\$250.00
		Edinburg, TX 78539				
	Principal occu physician	oation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_Alvarez, Michelle (Ms.)  Contributor address; City; State; Zip Code  McAllen, TX 78504	)		Amount of Contribution (\$)	\$5.00
	Principal occu private inves	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:_Alvarez, Michelle (Ms.)  Contributor address; City; State; Zip Code  McAllen, TX 78504	)		Amount of Contribution (\$)	\$5.00
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTI	ONS		SCHEDUL	E <b>A1</b>
	The Instruc	etion Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 7/128 Rpt: 10/136	
2	FILER NAME Border Healt	1 PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/01/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$100.00
_		Mission, TX 78572	10.5 1 (0.1 1)	Ĺ		
8	doctor	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 07/18/2025	Contributor address; City; State; Zip Code	:	•	Amount of Contribution (\$)	\$100.00
	Principal occu	Mission, TX 78572 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	doctor	, , , , , , , , , , , , , , , , , , ,	, ., . (	,		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID# Aquino, Edwardo (Dr.)  Contributor address; City; State; Zip Code	:)		Amount of Contribution (\$)	\$50.00
		McAllen, TX 78504				
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID# Aquino, Edwardo (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78504	:)	•	Amount of Contribution (\$)	\$50.00
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID# Arafat, Numan (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78503	:		Amount of Contribution (\$)	\$250.00
	Principal occu doctor	oation / Job title (See Instructions)	Employer (See Instructions	s)		

	MONEI	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 8/128 Rpt: 11/136	
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/18/2025	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$250.00
8	Principal occu	McAllen, TX 78503 pation / Job title (See Instructions)	9 Employer (See Instructions)	<u> </u> 5)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_Aranguena Sharpe, Gudadalupe (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78504	)		Amount of Contribution (\$)	\$100.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)	<u> </u> 5)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#: Aranguena Sharpe, Gudadalupe (Dr.)  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$100.00
	Principal occu	McAllen, TX 78504 pation / Job title (See Instructions)	Employer (See Instructions)	<u> </u>		
	Physician					
	Date 07/01/2025	Full name of contributor  ut-of-state PAC (ID#:_ Arellano-Rodriguez, Anabel (Ms.)  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$7.48
	Principal occu	McAllen, TX 78501 pation / Job title (See Instructions) tor	Employer (See Instructions)	<u> </u> 5)		
_	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:Arellano-Rodriguez, Anabel (Ms.)  Contributor address; City; State; Zip Code  McAllen, TX 78501			Amount of Contribution (\$)	\$7.48
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions)	5)		

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this t	form.	1	Total pages Schedule A1: Sch: 9/128 Rpt: 12/136	
2	FILER NAME Border Healt	n PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/01/2025	<ul> <li>Full name of contributor  out-of-state PAC (ID#: Arrazola, Pedro (Dr.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>	_	7	Amount of Contribution (\$)	\$250.00
_	Dringing! goog	McAllen, TX 78504	6 Employer (Coo Instructions	<u></u>		
8	Doctor	pation / Job title (See Instructions)	9 Employer (See Instructions	·)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:_Arrazola, Pedro (Dr.)  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
	Dringing! aggr	McAllen, TX 78504	Employer (Co.) Instructions	<u></u>		
	Doctor	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_Asase, Danilo (Dr.)  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$100.00
		Brownsville, TX 78526				
	Principal occu Doctor	oation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#: Asase, Danilo (Dr.)  Contributor address; City; State; Zip Code  Brownsville, TX 78526	)		Amount of Contribution (\$)	\$100.00
	Principal occu Doctor	oation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#: Asistores, Marilyn (Dr.)  Contributor address; City; State; Zip Code  Edinburg, TX 78539			Amount of Contribution (\$)	\$75.00
	Principal occu Doctor	oation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTIO	ONS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 10/128 Rpt: 13/136	
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/18/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$75.00
		Edinburg, TX 78539				
8	Principal occu Doctor	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_Asuage, Juan (Dr.)  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$250.00
	Principal occur	McAllen, TX 78504 pation / Job title (See Instructions)	Employer (See Instructions	·/		
	Doctor	odition 7 300 title (See matrictions)	Employer (See instructions	')		
	Date 07/18/2025	Full name of contributor	)		Amount of Contribution (\$)	\$250.00
		McAllen, TX 78504				
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_Aude, Wady (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78501			Amount of Contribution (\$)	\$25.00
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:_Aude, Wady (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78501			Amount of Contribution (\$)	\$25.00
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBU	SCHEDULE A1			
	The Instruc	tion Guide explains how to complete th	his form.	- 1	Total pages Schedule A1: Sch: 11/128 Rpt: 14/136	
2	FILER NAME Border Healt	n PAC			Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/01/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$74.81
8	Principal occur	McAllen, TX 78503 pation / Job title (See Instructions)	9 Employer (See Instructions	15)		
Ü	private inves		2 Employer (See mondedon)	10)		
	Date 07/18/2025	Contributor address; City; State; Zip Code	(ID#:)		Amount of Contribution (\$)	\$74.81
	Principal occur	McAllen, TX 78503  pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	private inves		Employer (See mondedon)	13)		
	Date 07/01/2025	Full name of contributor out-of-state PAC Badiga, Murthy (Dr.)  Contributor address; City; State; Zip Code	(ID#:)		Amount of Contribution (\$)	\$250.00
		Weslaco, TX 78596				
	Principal occu Doctor	oation / Job title (See Instructions)	Employer (See Instructions	ns)		
	Date 07/18/2025	Full name of contributor out-of-state PAC Badiga, Murthy (Dr.)  Contributor address; City; State; Zip Code  Weslaco, TX 78596	(ID#:)		Amount of Contribution (\$)	\$250.00
	Principal occu Doctor	oation / Job title (See Instructions)	Employer (See Instructions	ns)		
	Date 07/01/2025	Full name of contributor out-of-state PAC Barreda Jr., Raul (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78503	(ID#:)		Amount of Contribution (\$)	\$10.00
	Principal occu Doctor	oation / Job title (See Instructions)	Employer (See Instructions	ns)		
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	MONET	ARY POLITICAL CONTRIBUTIO	NS	SCHEDULE A1			
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 12/128 Rpt: 15/136		
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission 00055547	n Filers)	
4	Date 07/18/2025	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_Barreda Jr., Raul (Dr.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$10.00	
_		McAllen, TX 78503					
8	Principal occu Doctor	pation / Job title (See Instructions)	9 Employer (See Instructions	i)			
	Date 07/01/2025	Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$125.00	
	Principal occu	McAllen, TX 78504 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ;)			
	private busin	ess owner					
	Date 07/18/2025	Full name of contributor			Amount of Contribution (\$)	\$125.00	
		McAllen, TX 78504					
	Principal occu private busin	pation / Job title (See Instructions) ess owner	Employer (See Instructions	()			
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:_Barrera, Richard (Dr.)  Contributor address; City; State; Zip Code  Mission, TX 78573			Amount of Contribution (\$)	\$210.31	
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions self-employed	)			
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:_ Barrera, Richard (Dr.)  Contributor address; City; State; Zip Code  Mission, TX 78573			Amount of Contribution (\$)	\$210.31	
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions self-employed	()			

	MONET	ARY POLITICAL CONTRIBUT	SCHEDULE A1			
	The Instruc	ction Guide explains how to complete th	nis form.		I pages Schedule A1: : 13/128 Rpt: 16/136	
2	FILER NAME Border Healt	h PAC			ID (Ethics Commissio 55547	n Filers)
4	Date 07/01/2025	<ul> <li>Full name of contributor  out-of-state PAC (Bazan, Johnny (Dr.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>		<b>7</b> Amo	unt of Contribution (\$)	\$10.00
_		Mission, TX 78572	· · · ·	<u> </u>		
8	Principal occu Doctor	pation / Job title (See Instructions)	9 Employer (See Instructions	ıs)		
	Date 07/18/2025	Contributor address; City; State; Zip Code	(ID#:)	Amo	unt of Contribution (\$)	\$10.00
	Principal occu	Mission, TX 78572 Dation / Job title (See Instructions)	Employer (See Instructions	ns)		
	Doctor					
	Date 07/01/2025	Full name of contributor out-of-state PAC ( Bejarano, Jose (Dr.)  Contributor address; City; State; Zip Code	(ID#:)	Amo 	unt of Contribution (\$)	\$191.19
		McAllen, TX 78504				
	Principal occu Physician	oation / Job title (See Instructions)	Employer (See Instructions self-employed	ns)		
	Date 07/18/2025	Full name of contributor out-of-state PAC ( Bejarano, Jose (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78504	(ID#:)		unt of Contribution (\$)	\$191.19
	Principal occu Physician	oation / Job title (See Instructions)	Employer (See Instructions self-employed	ns)		
	Date 07/01/2025	Full name of contributor out-of-state PAC ( Bernini, Juan (Dr.)  Contributor address; City; State; Zip Code  Mission, TX 78572	; (ID#:)	Amo	unt of Contribution (\$)	\$250.00
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	ns)		
			- '			

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1			
	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 14/128 Rpt: 17/136		
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission 00055547	on Filers)	
4	Date 07/18/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$250.00	
	Dringing agg	Mission, TX 78572	Employer (See Instructions	·/			
8	Doctor	pation / Job title (See Instructions)	9 Employer (See Instructions	)			
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_ Bose, Ashley (Dr.) Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$50.00	
		McAllen, TX 78501		<u></u>			
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:_Bose, Ashley (Dr.)  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$50.00	
		McAllen, TX 78501					
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_ Bose, Sarojini (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78501			Amount of Contribution (\$)	\$1,000.00	
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:_Bose, Sarojini (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78501			Amount of Contribution (\$)	\$1,000.00	
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	<u>.</u> ;)			

	MONEI	ETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1			
	The Instru	ction Guide explains hov	to complete this f	orm.	1	Total pages Schedule A1: Sch: 15/128 Rpt: 18/136			
2	FILER NAME Border Healt	th PAC			3	Filer ID (Ethics Commission 00055547	n Filers)		
4	Date 07/01/2025	<ul><li>5 Full name of contributor</li><li>Bracamontes, Yvonne (D</li><li>6 Contributor address; City; S</li></ul>		)	7	Amount of Contribution (\$)	\$100.00		
8	Principal occu Doctor	Mission, TX 78572 pation / Job title (See Instruction:	s)	9 Employer (See Instructions	<b> </b> 5)				
	Date 07/18/2025	Full name of contributor Bracamontes, Yvonne (D Contributor address; City; S Mission, TX 78572				Amount of Contribution (\$)	\$100.00		
	Principal occu Doctor	pation / Job title (See Instructions	s)	Employer (See Instructions	<u>                                      </u>				
	Date 07/01/2025	Full name of contributor Cadena, Sandra (Ms.) Contributor address; City; S	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$5.00		
	Deire die alle access	McAllen, TX 78504		T Frankrick (On the brook)	$\overline{\Gamma}$				
	Private Inves	pation / Job title (See Instructions stor	o)	Employer (See Instructions Self-employed	•)				
	Date 07/18/2025	Full name of contributor Cadena, Sandra (Ms.) Contributor address; City; S McAllen, TX 78504	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$5.00		
	Principal occu Private Inves	pation / Job title (See Instructions	s)	Employer (See Instructions Self-employed	<u> </u> 5)				
	Date 07/01/2025	Full name of contributor Canales, Ricardo (Dr.) Contributor address; City; S McAllen, TX 78501	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$200.00		
	Principal occu Doctor	pation / Job title (See Instructions	5)	Employer (See Instructions	5)				

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1			
	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 16/128 Rpt: 19/136		
2	FILER NAME Border Healt	n PAC		3	Filer ID (Ethics Commission 00055547	on Filers)	
4	Date 07/18/2025	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_Canales, Ricardo (Dr.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>	_	7	Amount of Contribution (\$)	\$200.00	
_		McAllen, TX 78501	1	<u></u>			
8	Principal occur Doctor	pation / Job title (See Instructions)	9 Employer (See Instructions	S)			
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_ Canals, Desi (Dr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00	
	Principal occu	Mission, TX 78573 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>			
	Doctor			-,			
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:_Canals, Desi (Dr.)  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$25.00	
		Mission, TX 78573					
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	s)			
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_ Cantu, Alonzo (Mr.)  Contributor address; City; State; Zip Code  McAllen, TX 78504			Amount of Contribution (\$)	\$1,000.00	
	Principal occu private busin	oation / Job title (See Instructions) ess owner	Employer (See Instructions	5)			
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:_Cantu, Alonzo (Mr.)  Contributor address; City; State; Zip Code  McAllen, TX 78504		•	Amount of Contribution (\$)	\$1,000.00	
	Principal occu private busin	oation / Job title (See Instructions) ess owner	Employer (See Instructions	5)			
	,	<u> </u>					

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1			
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 17/128 Rpt: 20/136		
2	FILER NAME Border Healt	n PAC		3	Filer ID (Ethics Commission Fil 00055547	ers)	
4	Date 07/01/2025	<ul> <li>Full name of contributor  out-of-state PAC (ID#: Cantu, David (Mr.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$30.00	
8	Principal occu	McAllen, TX 78504 pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u>			
•	private inves			• •			
	Date 07/18/2025	Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$30.00	
	Principal occu	McAllen, TX 78504 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>			
	private inves	tor					
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#: Cantu, Leonel (Dr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$1,	000.00	
		Edinburg, TX 78539					
	Principal occu Dr.	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#: Cantu, Leonel (Dr.) Contributor address; City; State; Zip Code Edinburg, TX 78539			Amount of Contribution (\$)	200.00	
	Principal occu Dr.	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#: Cantu, Melissa (Ms.)  Contributor address; City; State; Zip Code  Pharr, TX 78577			Amount of Contribution (\$)	100.00	
	Principal occu private inves	pation / Job title (See Instructions)	Employer (See Instructions	<u>.</u> s)			

	MONEI	ARY POLITICAL CONTRIBU	SCHEDULE A1			
	The Instruc	ction Guide explains how to complete t	his form.	1 Total pages Schedule A1: Sch: 18/128 Rpt: 21/136		
2	FILER NAME Border Healt	n PAC		3 Filer ID (Ethics Commission Filers) 00055547		
4	Date 07/18/2025	<ul> <li>Full name of contributor  out-of-state PAC Cantu, Melissa (Ms.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>	C (ID#:)	7 Amount of Contribution (\$) \$100.0	00	
8		Pharr, TX 78577 pation / Job title (See Instructions)	9 Employer (See Instructions	ons)		
	Date 07/01/2025	Full name of contributor out-of-state PAC Caporusso, Joseph M. (Dr.)  Contributor address; City; State; Zip Code	(ID#:)	Amount of Contribution (\$) \$50.0	<del>-</del> 00	
	Principal occu	McAllen, TX 78501 pation / Job title (See Instructions)	Employer (See Instructions	ons)		
	Date 07/18/2025	Full name of contributor out-of-state PAC Caporusso, Joseph M. (Dr.)  Contributor address; City; State; Zip Code	[ (ID#:)	Amount of Contribution (\$) \$50.0	00	
	Principal occu	McAllen, TX 78501 pation / Job title (See Instructions)	Employer (See Instructions	ons)		
	Doctor			,		
	Date 07/01/2025	Full name of contributor	(ID#:)	Amount of Contribution (\$) \$1,000.0	00	
	Principal occu	McAllen, TX 78501  pation / Job title (See Instructions)	Employer (See Instructions	ons)		
	Date 07/18/2025	Full name of contributor out-of-state PAC Cardenas, Carlos J. (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78501	[ (ID#:)	Amount of Contribution (\$) \$1,000.0	00	
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	ons)		

	MONET	ARY POLITICAL CONT	IS	SCHEDULE A1			
	The Instruc	ction Guide explains how to con	nplete this for	m.	1	Total pages Schedule A1: Sch: 19/128 Rpt: 22/136	
2	FILER NAME Border Healt	n PAC			3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/01/2025	Cardenas, Simon (Mr.)  6 Contributor address; City; State; Zip C	f-state PAC (ID#:	)	7	Amount of Contribution (\$)	\$5.00
8	Principal occu	McAllen, TX 78504 pation / Job title (See Instructions)	9	Employer (See Instructions	<u> </u>		
	private inves			, , ,	•		
	Date 07/18/2025	Full name of contributor out-of Cardenas, Simon (Mr.)  Contributor address; City; State; Zip C  McAllen, TX 78504				Amount of Contribution (\$)	\$5.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>                                      </u>		
	private inves						
	Date 07/01/2025	Full name of contributor out-of Carreras, Jose (Dr.)  Contributor address; City; State; Zip C	-state PAC (ID#:	)		Amount of Contribution (\$)	\$400.00
		Mission, TX 78572					
	Principal occu Dr	pation / Job title (See Instructions)		Employer (See Instructions	<u>;</u> )		
	Date 07/18/2025	Carreras, Jose (Dr.)	-state PAC (ID#:			Amount of Contribution (\$)	\$400.00
	Principal occu Dr	oation / Job title (See Instructions)		Employer (See Instructions	)		
	Date 07/01/2025	Full name of contributor out-of Castaneda, Marissa (Ms.)  Contributor address; City; State; Zip C	-state PAC (ID#:			Amount of Contribution (\$)	\$50.00
	Principal occu private inves	oation / Job title (See Instructions) tor		Employer (See Instructions	)		
			'				

	MONET	ETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1			
	The Instruc	ction Guide explains how t	o complete this fo	rm.	1	Total pages Schedule A1: Sch: 20/128 Rpt: 23/136			
2	FILER NAME Border Healtl	n PAC			3	Filer ID (Ethics Commission 00055547	n Filers)		
4	Date 07/18/2025	<ul><li>5 Full name of contributor</li><li>Castaneda, Marissa (Ms.)</li><li>6 Contributor address; City; Stat</li></ul>	out-of-state PAC (ID#: e; Zip Code		7	Amount of Contribution (\$)	\$50.00		
_		Edinburg, TX 78539	T-		<u> </u>				
8	private invest	pation / Job title (See Instructions) cor	9	Employer (See Instructions	5)				
	Date 07/01/2025	Full name of contributor  Castillo, James (Dr.)  Contributor address; City; Stat		)		Amount of Contribution (\$)	\$57.36		
		Harlingen, TX 78550		5 1 (0 1 : :	<u></u>				
	Principal occup Physician	pation / Job title (See Instructions)		Employer (See Instructions	5)				
	Date 07/18/2025	Full name of contributor  Castillo, James (Dr.)  Contributor address; City; Stat	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$57.36		
		Harlingen, TX 78550							
	Principal occup Physician	pation / Job title (See Instructions)		Employer (See Instructions	5)				
	Date 07/01/2025	Full name of contributor Castillo, Melany (Dr.)  Contributor address; City; Stat  McAllen, TX 78504		)		Amount of Contribution (\$)	\$112.40		
	Principal occup physician	pation / Job title (See Instructions)		Employer (See Instructions	5)				
	Date 07/18/2025	Full name of contributor  Castillo, Melany (Dr.)  Contributor address; City; Stat  McAllen, TX 78504	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$112.40		
	Principal occup physician	pation / Job title (See Instructions)		Employer (See Instructions	5)				
			•						

	MONEI	ARY POLITICAL C	ONTRIBUTIO	)NS		SCHEDUL	LE <b>A1</b>
	The Instru	ction Guide explains how	to complete this f	orm.	1	Total pages Schedule A1: Sch: 21/128 Rpt: 24/136	
2	FILER NAME Border Healt	th PAC			3	Filer ID (Ethics Commission 00055547	on Filers)
4	Date 07/01/2025	<ul><li>5 Full name of contributor Cavazos - Salas, Norma (</li><li>6 Contributor address; City; St</li></ul>			7	Amount of Contribution (\$)	\$100.00
		Mission, TX 78572					
8	Principal occu Dr.	pation / Job title (See Instructions		9 Employer (See Instructions	s)		
	Date 07/18/2025	Full name of contributor  Cavazos - Salas, Norma (  Contributor address; City; St			•	Amount of Contribution (\$)	\$100.00
	Principal occu	Mission, TX 78572 pation / Job title (See Instructions	)	Employer (See Instructions	<u> </u> s)		
	Date 07/01/2025	Full name of contributor Changlani, Mahesh (Dr.) Contributor address; City; St	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$1,000.00
	Principal occu	McAllen, TX 78504 pation / Job title (See Instructions	<u> </u>	Employer (See Instructions	<u>''</u>		
	Doctor	pation / Job title (See Instructions		Employer (See mandenons	"		
	Date 07/18/2025	Full name of contributor Changlani, Mahesh (Dr.) Contributor address; City; St McAllen, TX 78504	out-of-state PAC (ID#:_		•	Amount of Contribution (\$)	\$1,000.00
	Principal occu Doctor	pation / Job title (See Instructions	)	Employer (See Instructions	<u>l</u> s)	-	
	Date 07/01/2025	Full name of contributor Chavez Paz, Juan (Dr.) Contributor address; City; St McAllen, TX 78504	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$25.00
	Principal occu Physician	pation / Job title (See Instructions		Employer (See Instructions self-employed	5)		

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1				
	The Instruc	ction Guide explains how to complete this t	for	m.	1	Total pages Schedule A1: Sch: 22/128 Rpt: 25/136	
2	FILER NAME Border Healt	h PAC			3	Filer ID (Ethics Commission 00055547	Filers)
4	Date 07/18/2025	<ul> <li>Full name of contributor  out-of-state PAC (ID#: Chavez Paz, Juan (Dr.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>			7	Amount of Contribution (\$)	\$25.00
8	Principal occu	McAllen, TX 78504 pation / Job title (See Instructions)	۱۵	Employer (See Instructions	<u>''</u>		
•	Physician Physician	pation / Job title (See Instructions)	9	self-employed	»)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_ Cherian, Ally (Ms.)  Contributor address; City; State; Zip Code		)	•	Amount of Contribution (\$)	\$50.00
	Dringing! goog	McAllen, TX 78504	_	Employer (See Instructions	<u>''</u>		
	private inves	pation / Job title (See Instructions) tor		Employer (See Instructions	s)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:_ Cherian, Ally (Ms.)  Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$50.00
		McAllen, TX 78504					
	Principal occu private inves	pation / Job title (See Instructions) tor		Employer (See Instructions	5)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#: Chineke, Chinwendu (Ms.)  Contributor address; City; State; Zip Code  Edinburg, TX 78539		)		Amount of Contribution (\$)	\$20.00
	Principal occu private inves	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#: Chineke, Chinwendu (Ms.)  Contributor address; City; State; Zip Code  Edinburg, TX 78539		)		Amount of Contribution (\$)	\$20.00
	Principal occu private inves	pation / Job title (See Instructions) tor		Employer (See Instructions	5)		
			<u> </u>				

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDULE	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 23/128 Rpt: 26/136	
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/01/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$125.00
0	Dringing agg	McAllen, TX 78504	D. Employer (See Instructions			
8	M.D	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#: Cooper-Dockery, Dona (Dr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$125.00
	Principal occu	McAllen, TX 78504 pation / Job title (See Instructions)	Employer (See Instructions	)		
	M.D	salion, con the (coe mendations)	Employer (GGC mondoner)	,		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#: Cordoba-Kissee, Michelle (Dr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$20.00
		Edinburg, TX 78539				
	Principal occu 78542	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#: Cordoba-Kissee, Michelle (Dr.)  Contributor address; City; State; Zip Code  Edinburg, TX 78539			Amount of Contribution (\$)	\$20.00
	Principal occu 78542	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#: Coronado Garcia, Aida (Ms.)  Contributor address; City; State; Zip Code  Brownsville, TX 78526	)		Amount of Contribution (\$)	\$19.12
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 24/128 Rpt: 27/136	
2	FILER NAME Border Healt	n PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/18/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$19.12
8	Principal occur	Brownsville, TX 78526 pation / Job title (See Instructions)	9 Employer (See Instructions			
0	private inves		5 Employer (See mstructions	')		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_ Cortes, Oscar (Dr.) Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$250.00
		McAllen, TX 78504				
	Principal occu <sub>l</sub> Dr.	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:_ Cortes, Oscar (Dr.)  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$250.00
		McAllen, TX 78504				
	Principal occu Dr.	oation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_ Cortinas, Guillermo A. (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78504			Amount of Contribution (\$)	\$150.00
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:_ Cortinas, Javier (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78504			Amount of Contribution (\$)	\$250.00
	Principal occu Dr.	oation / Job title (See Instructions)	Employer (See Instructions	)		

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instruc	tion Guide explains how to complete this t	form.	1	Total pages Schedule A1: Sch: 25/128 Rpt: 28/136		
2	FILER NAME Border Healt	n PAC		3	Filer ID (Ethics Commission 00055547	n Filers)	
4	Date 07/01/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$250.00	
_	Dringing! aggr	McAllen, TX 78504	Employer (Co.) Instructions	<u></u>			
8	Doctor	pation / Job title (See Instructions)	9 Employer (See Instructions	5)			
	Date 07/18/2025	Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00	
	Principal occur	McAllen, TX 78504 pation / Job title (See Instructions)	Employer (See Instructions	·)			
	Doctor	auton 7 300 title (See Instituctions)	Employer (See manucuons	,			
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#: Daley, Hearther (Dr.)  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$25.00	
		McAllen, TX 78503					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>.                                    </u>			
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#: Daley, Hearther (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78503			Amount of Contribution (\$)	\$25.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)			
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_ De Gorondo Arzamendi, Antonio (Dr.)  Contributor address; City; State; Zip Code  Mission, TX 78572	)		Amount of Contribution (\$)	\$25.00	
	Principal occu physician	oation / Job title (See Instructions)	Employer (See Instructions Self-employed	5)			

	MONET	ARY POLITICAL CONTRIBU	TION	IS		SCHEDULE	<b>A1</b>
	The Instruc	ction Guide explains how to complete t	his for	m.	1	Total pages Schedule A1: Sch: 26/128 Rpt: 29/136	
2	FILER NAME Border Healt	h PAC			3	Filer ID (Ethics Commission Fi 00055547	lers)
4	Date 07/18/2025	<ul> <li>Full name of contributor</li></ul>	(ID#:		7	Amount of Contribution (\$)	\$25.00
8	Principal occu	Mission , TX 78572 pation / Job title (See Instructions)	9	Employer (See Instructions	<u> </u>		
	physician			Self-employed	-,		
	Date 07/01/2025	Full name of contributor  out-of-state PAC  Deanda, David (Mr.)  Contributor address; City; State; Zip Code		)		Amount of Contribution (\$) \$1,	000.00
	Dringinal accu	Mission, TX 78574		Employer (See Instructions	·/-		
	private inves	pation / Job title (See Instructions) tor		Employer (See Instructions	·)		
	Date 07/18/2025	Full name of contributor out-of-state PAC Deanda, David (Mr.) Contributor address; City; State; Zip Code	(ID#:			Amount of Contribution (\$) \$1,	000.00
		Mission, TX 78574					
	Principal occu private inves	pation / Job title (See Instructions) tor		Employer (See Instructions	5)		
	Date 07/01/2025	Full name of contributor out-of-state PAC Del Bosque, Oscar (Mr.)  Contributor address; City; State; Zip Code  Edinburg, TX 78539				Amount of Contribution (\$) \$	100.00
	Principal occu private inves	pation / Job title (See Instructions) tor		Employer (See Instructions	5)		
	Date 07/18/2025	Full name of contributor out-of-state PAC Del Bosque, Oscar (Mr.)  Contributor address; City; State; Zip Code  Edinburg, TX 78539	(ID#:			Amount of Contribution (\$) \$	100.00
	Principal occu private inves	pation / Job title (See Instructions) tor		Employer (See Instructions	s)		

	MONEI	ARY POLITICAL CONTRIBU	HONS	SCHED	OULE A1
	The Instru	ction Guide explains how to complete th	his form.	1 Total pages Schedule A: Sch: 27/128 Rpt: 30/1	
2	FILER NAME Border Healt	h PAC		3 Filer ID (Ethics Commi 00055547	ssion Filers)
4	Date 07/01/2025	<ul> <li>Full name of contributor  out-of-state PAC Desai, Parul (Dr.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>	(ID#:)	7 Amount of Contribution (	\$) \$125.00
8	Principal occu Physician	McAllen, TX 78504 Dation / Job title (See Instructions)	9 Employer (See Instructions	ns)	
	Date 07/18/2025	Full name of contributor out-of-state PAC Desai, Parul (Dr.) Contributor address; City; State; Zip Code McAllen, TX 78504	(ID#:)	Amount of Contribution (	\$100.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	l ns)	
	Date 07/01/2025	Full name of contributor out-of-state PAC Divino, Haydee T. (Ms.)  Contributor address; City; State; Zip Code	(ID#:)	Amount of Contribution (	\$) \$20.00
		Mission, TX 78572 pation / Job title (See Instructions)	Employer (See Instructions	ns)	
	Date 07/18/2025	Full name of contributor out-of-state PAC Divino, Haydee T. (Ms.)  Contributor address; City; State; Zip Code  Mission, TX 78572	(ID#:)	Amount of Contribution (	\$) \$20.00
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	ns)	
	Date 07/01/2025	Full name of contributor out-of-state PAC Duran, Alberto (Dr.)  Contributor address; City; State; Zip Code  Mission, TX 78504	(ID#:)	Amount of Contribution (	\$) \$1,000.00
	Principal occu Dr	pation / Job title (See Instructions)	Employer (See Instructions	ns)	

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDULE A1
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 28/128 Rpt: 31/136
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission Filers) 00055547
4	Date 07/18/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$) \$1,000.00
		Mission, TX 78504			
8	Principal occu Dr	pation / Job title (See Instructions)	9 Employer (See Instructions	5)	
	Date 07/01/2025	Contributor address; City; State; Zip Code	)		Amount of Contribution (\$) \$37.41
	Principal occu	McAllen, TX 78504 Dation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
	private inves	tor			
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#: Ebreo, Ellie (Ms.)  Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$37.31
		McAllen, TX 78504			
	Principal occu private inves	oation / Job title (See Instructions) tor	Employer (See Instructions	5)	
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_Echols, Minerva (Ms.)  Contributor address; City; State; Zip Code  Pharr, TX 78577			Amount of Contribution (\$) \$20.00
	Principal occu private inves	pation / Job title (See Instructions)	Employer (See Instructions	<u>(</u>	
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:_ Echols, Minerva (Ms.)  Contributor address; City; State; Zip Code  Pharr, TX 78577	)		Amount of Contribution (\$) \$20.00
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	5)	
		-			

	MONET	ARY POLITICAL CONTRIB	BUTIO	NS		SCHEDUL	E <b>A1</b>
	The Instruc	etion Guide explains how to complete	e this foi	rm.	1	Total pages Schedule A1: Sch: 29/128 Rpt: 32/136	
2	FILER NAME Border Healt	n PAC			3	Filer ID (Ethics Commissio 00055547	n Filers)
4	Date 07/01/2025	6 Contributor address; City; State; Zip Code	PAC (ID#:		7	Amount of Contribution (\$)	\$5.00
8	Principal occur	Edinburg, TX 78539 pation / Job title (See Instructions)	9	Employer (See Instructions	<u>.)</u>		
Ū	private inves		ا	Employer (ede mediadiene	,		
	Date 07/18/2025	Full name of contributor out-of-state F Esparza, Cristina (Mrs.)  Contributor address; City; State; Zip Code	PAC (ID#:	)		Amount of Contribution (\$)	\$5.00
	Principal occu	Edinburg, TX 78539  pation / Job title (See Instructions)		Employer (See Instructions	<u>                                      </u>		
	private inves	cor					
	Date 07/01/2025	Full name of contributor	PAC (ID#:	)		Amount of Contribution (\$)	\$149.63
	Dringing conu	Harlingen, TX 78550 pation / Job title (See Instructions)		Employer (See Instructions	·/_		
	Doctor	valion / Job title (See Instituctions)		Employer (See instructions	)		
	Date 07/18/2025	Full name of contributor out-of-state F Espinoza, Manuel (Dr.)  Contributor address; City; State; Zip Code  Harlingen, TX 78550				Amount of Contribution (\$)	\$149.63
	Principal occu Doctor	oation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 07/01/2025	Full name of contributor out-of-state F Falcon, Antonio (Dr.)  Contributor address; City; State; Zip Code  Rio Grande, TX 78582	PAC (ID#:	)		Amount of Contribution (\$)	\$200.00
	Principal occu Doctor	oation / Job title (See Instructions)		Employer (See Instructions	5)		
			•				

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDULI	<b>■ A1</b>
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 30/128 Rpt: 33/136	
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission 00055547	ı Filers)
4	Date 07/18/2025	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$200.00
		Rio Grande, TX 78582				
8	Principal occu Doctor	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:Falcon, Maria Elena (Dr.)  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
	Principal occu	McAllen, TX 78504 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Doctor					
	Date 07/18/2025	Full name of contributor  out-of-state PAC (ID#:_Falcon, Maria Elena (Dr.)  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
		McAllen, TX 78504				
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#: Flores, Melissa (Ms.)  Contributor address; City; State; Zip Code  Edinburg, TX 78542			Amount of Contribution (\$)	\$25.00
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	()		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:Flores, Melissa (Ms.)  Contributor address; City; State; Zip Code  Edinburg, TX 78542			Amount of Contribution (\$)	\$25.00
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	i)		
		-				

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUI	LE <b>A1</b>
	The Instruc	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 31/128 Rpt: 34/136	
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission 00055547	on Filers)
4	Date 07/01/2025	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$100.00
_		McAllen, TX 78503		Ĺ		
8	Principal occu physician	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 07/18/2025	Full name of contributor			Amount of Contribution (\$)	\$100.00
		McAllen, TX 78503		_		
	Principal occu physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#: Francis, Mary (Ms.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$114.71
		McAllen, TX 78503				
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	\$114.71
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	<u>.                                    </u>		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_Galindo, Eugenio (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78504			Amount of Contribution (\$)	\$1,000.00
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	<u>.</u> ;)		

	MONET	ARY POLITICAL CONTRIBUT	TONS	SCHEDU	LE <b>A1</b>
	The Instruc	tion Guide explains how to complete thi	s form.	1 Total pages Schedule A1: Sch: 32/128 Rpt: 35/136	
2	FILER NAME Border Healt	n PAC		3 Filer ID (Ethics Commissi 00055547	on Filers)
4	Date 07/18/2025	<ul> <li>Full name of contributor</li></ul>		7 Amount of Contribution (\$)	\$1,000.00
_	Dringing! aggs	McAllen, TX 78504	O Employer (Con Instruction	100)	
8	Doctor	pation / Job title (See Instructions)	9 Employer (See Instruction:	ins)	
	Date 07/01/2025	Full name of contributor out-of-state PAC (I Garcia, Carlos (Dr.)  Contributor address; City; State; Zip Code	D#:)	Amount of Contribution (\$)	\$1,000.00
	Dringinal accu	McAllen, TX 78504 pation / Job title (See Instructions)	Employer (See Instruction	one)	
	Doctor	valion / Job title (See Instructions)	Employer (See instruction	nis)	
	Date 07/18/2025	Full name of contributor out-of-state PAC (I Garcia, Carlos (Dr.)  Contributor address; City; State; Zip Code	D#:)	Amount of Contribution (\$)	\$1,000.00
		McAllen, TX 78504	1		
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	nns)	
	Date 07/01/2025	Full name of contributor out-of-state PAC (I Garcia, Cynthia (Dr.)  Contributor address; City; State; Zip Code  Harlingen, TX 78550	D#:)	Amount of Contribution (\$)	\$200.00
	Principal occu doctor	oation / Job title (See Instructions)	Employer (See Instruction:	ons)	
	Date 07/18/2025	Full name of contributor out-of-state PAC (I Garcia, Cynthia (Dr.)  Contributor address; City; State; Zip Code  Harlingen, TX 78550	D#:)	Amount of Contribution (\$)	\$200.00
	Principal occu doctor	oation / Job title (See Instructions)	Employer (See Instruction	ons)	

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE A1	
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 33/128 Rpt: 36/136	=
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission Filers) 00055547	
4	Date 07/01/2025	<ul> <li>Full name of contributor  out-of-state PAC (ID#: Garcia, Elvin (Dr.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>	_	7	Amount of Contribution (\$) \$1,000.00	-
		Weslaco, TX 78596				
8	Principal occu Dr.	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#: Garcia, Elvin (Dr.)  Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$1,000.00	-
	Principal occu	Weslaco, TX 78596 pation / Job title (See Instructions)	Employer (See Instructions	 ;)		_
	Dr.	,				
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#: Garcia, Nancy (Ms.)  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$) \$20.00	)
		Mission, TX 78572	1			
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	5)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#: Garcia, Nancy (Ms.)  Contributor address; City; State; Zip Code  Mission, TX 78572			Amount of Contribution (\$) \$20.00	)
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	5)		_
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#: Garcia, Norma A. (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78503			Amount of Contribution (\$) \$250.00	-
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	5)		
						_

	MONET	ARY POLITICAL CONTRIBU	TIONS		SCHEDUI	E A1
	The Instruc	ction Guide explains how to complete th	nis form.		tal pages Schedule A1: h: 34/128 Rpt: 37/136	
2	FILER NAME Border Healt	n PAC		1	er ID (Ethics Commission 055547	on Filers)
4	Date 07/18/2025	<ul> <li>Full name of contributor</li></ul>		<b>7</b> Am	nount of Contribution (\$)	\$250.00
_	Deinsinal assu	McAllen, TX 78503	O Familia au (Cala Instruction			
8	Doctor	pation / Job title (See Instructions)	9 Employer (See Instruction:	is)		
	Date 07/01/2025	Contributor address; City; State; Zip Code	(ID#:)		nount of Contribution (\$)	\$1,000.00
	Principal occu	Mission, TX 78572  pation / Job title (See Instructions)	Employer (See Instruction	 ns)		
	Doctor			-		
	Date 07/18/2025	Full name of contributor out-of-state PAC (Garcia, Oscar (Dr.)  Contributor address; City; State; Zip Code	(ID#:)		nount of Contribution (\$)	\$1,000.00
		Mission, TX 78572				
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instruction	าร)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (Garcia, Pamela (Ms.)  Contributor address; City; State; Zip Code  Mission, TX 78572	(ID#:)		nount of Contribution (\$)	\$15.00
	Principal occu private inves	oation / Job title (See Instructions) tor	Employer (See Instruction	ns)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (Garcia, Ricardo (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78504	(ID#:)		nount of Contribution (\$)	\$150.00
	Principal occu Doctor	oation / Job title (See Instructions)	Employer (See Instruction	ns)		
			<u> </u>			

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 35/128 Rpt: 38/136	
2	FILER NAME Border Healt	n PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/18/2025	<ul> <li>Full name of contributor</li></ul>	_	7	Amount of Contribution (\$)	\$150.00
		McAllen, TX 78504				
8	Principal occur Doctor	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#: Garcia, Samuel (Dr.)  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
	Principal occur	McAllen, TX 78504 pation / Job title (See Instructions)	Employer (See Instructions	;) 		
	Dr.	valion / Job title (See Instructions)	Employer (See instructions	,		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#: Garcia, Samuel (Dr.)  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$250.00
		McAllen, TX 78504				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>(</u>		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#: Garcia Lopez, Javier (Mr.)  Contributor address; City; State; Zip Code  Mission, TX 78572			Amount of Contribution (\$)	\$15.00
	Principal occu private inves	pation / Job title (See Instructions)	Employer (See Instructions	<u>.                                    </u>		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#: Garcia Lopez, Javier (Mr.)  Contributor address; City; State; Zip Code  Mission, TX 78572			Amount of Contribution (\$)	\$15.00
	Principal occu private inves	oation / Job title (See Instructions) tor	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTI	ONS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 36/128 Rpt: 39/136	
2	FILER NAME Border Healt	n PAC		3	Filer ID (Ethics Commission 00055547	on Filers)
4	Date 07/01/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$9.56
8	Principal occu	McAllen, TX 78504 pation / Job title (See Instructions)	9 Employer (See Instructions	e)		
0	private inves		5 Employer (See mstructions	5)		
	Date 07/18/2025	Contributor address; City; State; Zip Code	±:)		Amount of Contribution (\$)	\$9.56
	Principal occu	McAllen, TX 78504 pation / Job title (See Instructions)	Employer (See Instructions	s) 		
	private inves		Employer (See monded)	٥)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID) Garza, Gavino (Mr.) Contributor address; City; State; Zip Code	<u>*)</u>		Amount of Contribution (\$)	\$18.70
		Mission, TX 78572				
	Principal occu private inves	oation / Job title (See Instructions) tor	Employer (See Instructions	s)		
	Date 07/18/2025	Full name of contributor  uut-of-state PAC (ID: Garza, Gavino (Mr.)  Contributor address; City; State; Zip Code  Mission, TX 78572	#:)		Amount of Contribution (\$)	\$18.70
	Principal occu private inves	oation / Job title (See Instructions) tor	Employer (See Instructions	s)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID: Garza, Jaime (Dr.)  Contributor address; City; State; Zip Code  Edinburg, TX 78539	<u>;                                    </u>		Amount of Contribution (\$)	\$1,000.00
	Principal occu Doctor	oation / Job title (See Instructions)	Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTRIBUTIO	ONS		SCHEDULE A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 37/128 Rpt: 40/136
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission Filers) 00055547
4	Date 07/18/2025	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_Garza, Jaime (Dr.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$) \$1,000.00
_		Edinburg, TX 78539			
8	Principal occu  Doctor	pation / Job title (See Instructions)	9 Employer (See Instructions	i)	
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_ Garza, Jesus (Dr.)  Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$150.00
	Dringing aggr	McAllen, TX 78501	Employer (See Instructions		
	doctor	pation / Job title (See Instructions)	Employer (See Instructions	)	
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#: Garza, Jesus (Dr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$150.00
		McAllen, TX 78501			
	Principal occu doctor	pation / Job title (See Instructions)	Employer (See Instructions	)	
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_Garza, Joaquin (Mr.)  Contributor address; City; State; Zip Code  Mission, TX 78572			Amount of Contribution (\$) \$10.00
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	5)	
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:_ Garza, Joaquin (Mr.)  Contributor address; City; State; Zip Code  Mission, TX 78572			Amount of Contribution (\$) \$10.00
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	i)	

	MONET	ARY POLITICAL CONTR	IBUTION	IS		SCHEDUL	E A1
	The Instruc	tion Guide explains how to comp	lete this for	m.	1	Total pages Schedule A1: Sch: 38/128 Rpt: 41/136	
2	FILER NAME Border Healt	n PAC			3	Filer ID (Ethics Commission 00055547	on Filers)
4	Date 07/01/2025	Garza, Jose Rene (Mr.)	ate PAC (ID#:		7	Amount of Contribution (\$)	\$1,000.00
		McAllen, TX 78504					
8	Principal occu private busin	pation / Job title (See Instructions) ess owner	9	Employer (See Instructions	5)		
	Date 07/18/2025	Garza, Jose Rene (Mr.)  Contributor address; City; State; Zip Cod				Amount of Contribution (\$)	\$1,000.00
	Principal occu	McAllen, TX 78504  pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	private busin	ess owner					
	Date 07/01/2025	Full name of contributor out-of-sta Garza, Kareena (Mrs.)  Contributor address; City; State; Zip Cod	ate PAC (ID#:			Amount of Contribution (\$)	\$3.82
		Edinburg, TX 78539					
	Principal occu private inves	oation / Job title (See Instructions) cor		Employer (See Instructions	)		
	Date 07/18/2025	Garza, Kareena (Mrs.)				Amount of Contribution (\$)	\$3.82
	Principal occu private inves	oation / Job title (See Instructions) cor		Employer (See Instructions	()		
	Date 07/01/2025	Garza, Martin (Dr.)				Amount of Contribution (\$)	\$50.00
	Principal occu Doctor	oation / Job title (See Instructions)		Employer (See Instructions	i)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 39/128 Rpt: 42/136	
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission 00055547	on Filers)
4	Date 07/18/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$50.00
		Linn, TX 78563				
8	Principal occu Doctor	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_Garza Jr, Ruben (Mr.)  Contributor address; City; State; Zip Code  McAllen, TX 78504			Amount of Contribution (\$)	\$5.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>                                      </u>		
	private inves	tor				
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:_ Garza Jr, Ruben (Mr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5.00
		McAllen, TX 78504				
	Principal occu private inves	oation / Job title (See Instructions) tor	Employer (See Instructions	5)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_Gelman, Lawrence (Dr.)  Contributor address; City; State; Zip Code  mcallen, TX 78503			Amount of Contribution (\$)	\$1,000.00
	Principal occu Doctor	oation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:_Gelman, Lawrence (Dr.)  Contributor address; City; State; Zip Code  mcallen, TX 78503			Amount of Contribution (\$)	\$1,000.00
	Principal occu Doctor	oation / Job title (See Instructions)	Employer (See Instructions	 ;)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 40/128 Rpt: 43/136	
2	FILER NAME Border Healt	n PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/01/2025	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$100.00
_		McAllen, TX 78504				
8	Principal occu Dr.	pation / Job title (See Instructions)	9 Employer (See Instructions	i)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:_ Giraldo, Alvaro (Dr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu	McAllen, TX 78504 pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Dr.					
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_ Gomez, Felipe (Dr.)  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$75.00
		McAllen, TX 78503				
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:_ Gomez, Felipe (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78503			Amount of Contribution (\$)	\$75.00
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_ Gomez, Juan Pablo (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78504			Amount of Contribution (\$)	\$200.00
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONEI	ARY POLITICAL CO	ONTRIBUTIO	ONS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how t	o complete this fo	orm.	1	Total pages Schedule A1: Sch: 41/128 Rpt: 44/136	
2	FILER NAME				3	Filer ID (Ethics Commission	r Filers)
	Border Healt	h PAC				00055547	
4	Date 07/18/2025	<ul><li>5 Full name of contributor</li></ul>	out-of-state PAC (ID#:_ e; Zip Code	)	7	Amount of Contribution (\$)	\$200.00
Ω	Principal occur	McAllen, TX 78504 pation / Job title (See Instructions)		9 Employer (See Instructions			
0	Doctor	pation 7 300 title (See manuctions)		5 Employer (See Instructions	')		
	Date 07/01/2025	Full name of contributor Gomez, Marco (Mr.)  Contributor address; City; Stat	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$50.00
		Edinburg, TX 78539					
	Principal occu private inves	pation / Job title (See Instructions) tor		Employer (See Instructions	i)		
	Date 07/18/2025	Full name of contributor Comez, Marco (Mr.)  Contributor address; City; Stat	out-of-state PAC (ID#:_ e; Zip Code			Amount of Contribution (\$)	\$50.00
		Edinburg, TX 78539					
	Principal occu private inves	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 07/01/2025	Full name of contributor Gomez-Martinez, Marissa (Contributor address; City; Stat				Amount of Contribution (\$)	\$20.00
	Principal occu Doctor	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Date 07/18/2025	Full name of contributor  Gomez-Martinez, Marissa (  Contributor address; City; Stat  Edinburg, TX 78539				Amount of Contribution (\$)	\$20.00
	Principal occu Doctor	pation / Job title (See Instructions)		Employer (See Instructions	)		

	MONEI	ARY POLITICAL (	CONTRIBUTION	DNS		SCHEDULE	A1
	The Instruc	ction Guide explains hov	to complete this f	orm.	1	Total pages Schedule A1: Sch: 42/128 Rpt: 45/136	
2	FILER NAME Border Healt	h PAC			3	Filer ID (Ethics Commission 00055547	Filers)
4	Date 07/01/2025	<ul><li>5 Full name of contributor Gonzales, Elizabeth Ann</li><li>6 Contributor address; City; S</li></ul>		)	7	Amount of Contribution (\$)	\$3.82
8	Principal occu	Alamo, TX 78516 pation / Job title (See Instructions	5)	9 Employer (See Instructions	;) 		
Ĭ	private inves		-)	2 Employer (eee meadeans	-,		
	Date 07/18/2025	Full name of contributor Gonzales, Elizabeth Ann Contributor address; City; S		)		Amount of Contribution (\$)	\$3.82
	Principal occu	Alamo, TX 78516 pation / Job title (See Instructions	5)	Employer (See Instructions	s)		
	private inves		,		,		
	Date 07/01/2025	Full name of contributor Gonzalez, Ada (Mrs.) Contributor address; City; S	out-of-state PAC (ID#:_	)	•	Amount of Contribution (\$)	\$19.12
		Alamo, TX 78516					
	Principal occu private busin	pation / Job title (See Instructions ess owner	5)	Employer (See Instructions	5)		
	Date 07/18/2025	Full name of contributor Gonzalez, Ada (Mrs.) Contributor address; City; S Alamo, TX 78516	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	\$19.12
	Principal occu private busin	pation / Job title (See Instructions	s)	Employer (See Instructions	<u>I</u> S)		
	Date 07/01/2025	Full name of contributor Gonzalez, Aida (Ms.) Contributor address; City; S Edinburg, TX 78542	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	\$5.00
	Principal occu private inves	pation / Job title (See Instructions tor	5)	Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE <b>A1</b>
	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 43/128 Rpt: 46/136	
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission 00055547	on Filers)
4	Date 07/18/2025	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_Gonzalez, Aida (Ms.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$5.00
_		Edinburg, TX 78542		<u></u>		
8	Principal occu private inves	pation / Job title (See Instructions) tor	9 Employer (See Instructions	s)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_ Gonzalez, Alfredo Contributor address; City; State; Zip Code Pharr, TX 78577			Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:_ Gonzalez, Alfredo  Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$50.00
	Deinsinal assu	Pharr, TX 78577	Employer (Cool hostwestings	<u></u>		
	Doctor	pation / Job title (See Instructions)	Employer (See Instructions	·)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_ Gonzalez, Jaime A. (Mr.)  Contributor address; City; State; Zip Code  Edinburg, TX 78539	)	-	Amount of Contribution (\$)	\$1,000.00
	Principal occu private busin	pation / Job title (See Instructions)	Employer (See Instructions	<u>I</u> S)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:_Gonzalez, Jaime A. (Mr.)  Contributor address; City; State; Zip Code  Edinburg, TX 78539			Amount of Contribution (\$)	\$1,000.00
	Principal occu private busin	oation / Job title (See Instructions) ess owner	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDULE	<b>■ A1</b>
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 44/128 Rpt: 47/136	
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission 00055547	Filers)
4	Date 07/01/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$25.00
8	Principal occu	Edinburg, TX 78542 pation / Job title (See Instructions)	Employer (See Instructions	·/		
Ü	private inves		5 Employer (See instructions	)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:_ Gonzalez, Jesus (Mr.)  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00
	Deinsinal assu	Edinburg, TX 78542	Franks var (Caa katrustiana	<u></u>		
	principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	5)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_ Gonzalez, Roberto (Dr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00
		McAllen, TX 78503				
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:_ Gonzalez, Roberto (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78503			Amount of Contribution (\$)	\$25.00
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_ Gonzalez Jr, Alfonso (Mr.)  Contributor address; City; State; Zip Code  Brownsville, TX 78521			Amount of Contribution (\$)	\$10.00
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRI	BUTION	IS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to comple	ete this for	m.	1	Total pages Schedule A1: Sch: 45/128 Rpt: 48/136	
2	FILER NAME Border Healt	h PAC			3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/18/2025	Gonzalez Jr, Alfonso (Mr.)	e PAC (ID#:	)	7	Amount of Contribution (\$)	\$10.00
8	Principal occur	Brownsville, TX 78521 pation / Job title (See Instructions)	9	Employer (See Instructions	<u>)</u>		
Ü	private inves			Employer (See manucuons	')		
	Date 07/01/2025	Full name of contributor out-of-state Griego, Enrique (Dr.)  Contributor address; City; State; Zip Code  Pharr, TX 78577				Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	M.D.						
	Date 07/18/2025	Full name of contributor out-of-state Griego, Enrique (Dr.)  Contributor address; City; State; Zip Code	e PAC (ID#:	)		Amount of Contribution (\$)	\$1,000.00
		Pharr, TX 78577					
	Principal occu M.D.	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 07/01/2025	Full name of contributor out-of-state Guadarrama, Delisa (Dr.)  Contributor address; City; State; Zip Code  Edinburg, TX 78539				Amount of Contribution (\$)	\$112.22
	Principal occu Doctor	oation / Job title (See Instructions)		Employer (See Instructions	)		
	Date 07/18/2025	Full name of contributor out-of-state Guadarrama, Delisa (Dr.)  Contributor address; City; State; Zip Code  Edinburg, TX 78539	e PAC (ID#:			Amount of Contribution (\$)	\$112.22
	Principal occu Doctor	oation / Job title (See Instructions)		Employer (See Instructions	i)		
			,				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 46/128 Rpt: 49/136	
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission 00055547	on Filers)
4	Date 07/01/2025	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_Guardia, Juan A. (Dr.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$500.00
		McAllen, TX 78504				
8	Principal occur Doctor	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 07/18/2025	Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$500.00
	Principal occu	McAllen, TX 78504  pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_ Guerra, Daniel (Dr.)  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Principal occu	McAllen, TX 78501 pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:_ Guerra, Daniel (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78501			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_ Guerra, Ernesto (Mr.)  Contributor address; City; State; Zip Code  McAllen, TX 78502			Amount of Contribution (\$)	\$74.81
	Principal occu private busin	oation / Job title (See Instructions) ess owner	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instruc	etion Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 47/128 Rpt: 50/136	
2	FILER NAME Border Healt	n PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/18/2025	<ul> <li>Full name of contributor  out-of-state PAC (ID#: Guerra, Ernesto (Mr.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$74.81
_		McAllen, TX 78502		<u> </u>		
8	private busin	oation / Job title (See Instructions) ess owner	9 Employer (See Instructions	5)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#: Guerra, R.Marcy (Dr.)  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
		Edinburg, TX 78541	T = 1 (0 1 : ::	<u></u>		
	Dr.	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#: Guerra, R.Marcy (Dr.)  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
		Edinburg, TX 78541				
	Principal occu Dr.	pation / Job title (See Instructions)	Employer (See Instructions	<u>(</u>		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#: Gummadi, Sarada (Dr.)  Contributor address; City; State; Zip Code  Mission, TX 78572			Amount of Contribution (\$)	\$25.00
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	<u>(</u>		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#: Gummadi, Sarada (Dr.)  Contributor address; City; State; Zip Code  Mission, TX 78572			Amount of Contribution (\$)	\$25.00
	Principal occu Doctor	oation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRI	BUTION	S		SCHEDUI	E A1
	The Instru	ction Guide explains how to comple	ete this form	1.	1	Total pages Schedule A1: Sch: 48/128 Rpt: 51/136	
2	FILER NAME Border Healt	n PAC			3	Filer ID (Ethics Commission 00055547	on Filers)
4	Date 07/01/2025	Gutierrez, Alberto (Dr.)	PAC (ID#:	)	7	Amount of Contribution (\$)	\$250.00
		Edinburg, TX 78539					
8	Principal occu Doctor	pation / Job title (See Instructions)	9	Employer (See Instructions	)		
	Date 07/18/2025	Full name of contributor out-of-state Gutierrez, Alberto (Dr.)  Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$250.00
	Principal occu	Edinburg, TX 78539 Dation / Job title (See Instructions)		Employer (See Instructions	)		
	Date 07/01/2025	Full name of contributor out-of-state Gutierrez, Marco (Dr.)  Contributor address; City; State; Zip Code	PAC (ID#:			Amount of Contribution (\$)	\$1,000.00
	Principal occu	Edinburg, TX 78539 pation / Job title (See Instructions)		Employer (See Instructions	)		
	Date 07/18/2025	Full name of contributor out-of-state Gutierrez, Marco (Dr.)	e PAC (ID#:			Amount of Contribution (\$)	\$1,000.00
		Contributor address; City; State; Zip Code Edinburg, TX 78539					
	Principal occu Doctor	pation / Job title (See Instructions)		Employer (See Instructions	)		
	Date 07/01/2025	Gutierrez, Miguel (Dr.)				Amount of Contribution (\$)	\$250.00
	Principal occu Dr.	oation / Job title (See Instructions)		Employer (See Instructions	)		
			•				

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDULE	<b>■ A1</b>
	The Instruc	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 49/128 Rpt: 52/136	
2	FILER NAME Border Healt	n PAC		3	Filer ID (Ethics Commission 00055547	ı Filers)
4	Date 07/18/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$250.00
		McAllen, TX 78501				
8	Principal occu Dr.	pation / Job title (See Instructions)	Employer (See Instructions	<b>(</b> )		
	Date 07/01/2025	Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$50.00
	Principal occu	Penitas, TX 78504 pation / Job title (See Instructions)	Employer (See Instructions	) 		
	Doctor		pieyer (eee meaceanis	,		
	Date 07/18/2025	Full name of contributor  out-of-state PAC (ID#: Guzman, Eduardo (Dr.)  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$50.00
		Penitas, TX 78504				
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#: Haddad, Roberto (Mr.)  Contributor address; City; State; Zip Code  McAllen, TX 78501	)		Amount of Contribution (\$)	\$10.00
	Principal occu Private Inves	pation / Job title (See Instructions) tor	Employer (See Instructions	5)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	\$10.00
	Principal occu Private Inves	pation / Job title (See Instructions) tor	Employer (See Instructions	<u> </u>		

	MONET	ARY POLITICAL CONTRIBUT	TIONS		SCHEDULE A	<b>\1</b>
	The Instru	ction Guide explains how to complete th	is form.	1	Total pages Schedule A1: Sch: 50/128 Rpt: 53/136	
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission File 00055547	ers)
4	Date 07/18/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$) \$1,0	00.00
_		McAllen, TX 78503	<u></u>	<u> </u>		
8	Principal occu Doctor	pation / Job title (See Instructions)	9 Employer (See Instructions	ns)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (Haddad, Victor (Dr.)  Contributor address; City; State; Zip Code	(ID#:)		Amount of Contribution (\$) \$1,0	00.00
	Dringing agg	McAllen, TX 78503	Employer (See Instruction			
	Doctor	pation / Job title (See Instructions)	Employer (See Instructions	15)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (Hance, Courtney (Ms.)  Contributor address; City; State; Zip Code	(ID#:)		Amount of Contribution (\$)	\$5.00
		Harlingen, TX 78552				
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	ns)		
	Date 07/18/2025	Full name of contributor out-of-state PAC ( Hance, Courtney (Ms.)  Contributor address; City; State; Zip Code  Harlingen, TX 78552	ID#:)		Amount of Contribution (\$)	\$5.00
	Principal occu private inves	oation / Job title (See Instructions) tor	Employer (See Instructions	ns)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (Harris, Joseph (Mr.)  Contributor address; City; State; Zip Code  McAllen, TX 78504	  ID#:)		Amount of Contribution (\$)	\$10.00
	Principal occu private inves	oation / Job title (See Instructions) tor	Employer (See Instructions	ns)		
			1			

	MONET	ARY POLITICAL CONTR	RIBUTION	S		SCHEDULE	<b>A1</b>
	The Instru	etion Guide explains how to comp	plete this for	n.	1	Total pages Schedule A1: Sch: 51/128 Rpt: 54/136	
2	FILER NAME Border Healt	1 PAC			3	Filer ID (Ethics Commission 00055547	Filers)
4	Date 07/18/2025	Harris, Joseph (Mr.)	state PAC (ID#:		7	Amount of Contribution (\$)	\$10.00
8	Principal occu	McAllen, TX 78504 pation / Job title (See Instructions)	9	Employer (See Instructions	<u> </u>		
	private inves				,		
	Date 07/01/2025	Full name of contributor out-of-s Hensler, Blake (Mr.)  Contributor address; City; State; Zip Co		)		Amount of Contribution (\$)	\$25.00
	Delinational access	Edinburg, TX 78539		Frankrick (Control to the street in the	Ĺ		
	principal occu private inves	pation / Job title (See Instructions) For		Employer (See Instructions	5)		
	Date 07/18/2025	Full name of contributor out-of-s Hensler, Blake (Mr.)  Contributor address; City; State; Zip Co	state PAC (ID#:			Amount of Contribution (\$)	\$25.00
		Edinburg, TX 78539					
	Principal occu private inves	pation / Job title (See Instructions)		Employer (See Instructions	()		
	Date 07/18/2025	Hensler, Blake (Mr.)		)		Amount of Contribution (\$)	\$25.00
	Principal occu private inves	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 07/01/2025	Full name of contributor out-of-s Hensler, Monique (Ms.)  Contributor address; City; State; Zip Co	state PAC (ID#:	)		Amount of Contribution (\$)	\$25.00
	Principal occu private inves	oation / Job title (See Instructions) or		Employer (See Instructions	()		
			<b>'</b>				

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDULE A1
	The Instruc	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 52/128 Rpt: 55/136
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission Filers) 00055547
4	Date 07/18/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$) \$25.00
8	Principal occu	Edinburg, TX 78539  pation / Job title (See Instructions)	Employer (See Instructions	)	
	private inves		1, 1, 1	,	
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#: Hernandez, Ambrosio (Dr.)  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$) \$1,000.00
	Principal occu	San Juan, TX 78589  pation / Job title (See Instructions)	Employer (See Instructions	)	
	Doctor	,	h - 3 - (	,	
	Date 07/18/2025	Full name of contributor  out-of-state PAC (ID#: Hernandez, Ambrosio (Dr.)  Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$1,000.00
	Discipal	San Juan, TX 78589	Farada and (One backward)		
	Doctor	pation / Job title (See Instructions)	Employer (See Instructions	)	
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$) \$200.00
	Principal occu physician	pation / Job title (See Instructions)	Employer (See Instructions	)	
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#: Hernandez, Cristela (Dr.)  Contributor address; City; State; Zip Code  Edinburg, TX 78539			Amount of Contribution (\$) \$200.00
	Principal occu physician	pation / Job title (See Instructions)	Employer (See Instructions	)	

	MONET	ARY POLITICAL CONTRIBUT	TIONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete th	nis form.	1	Total pages Schedule A1: Sch: 53/128 Rpt: 56/136	
2	FILER NAME Border Healt	n PAC		3	Filer ID (Ethics Commission 00055547	on Filers)
4	Date 07/01/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$20.00
_	Dein sin al acces	Edinburg, TX 78539	lo Fuella de Constantino	<u> </u>		
8	principal occu private inves	pation / Job title (See Instructions)	9 Employer (See Instructions	S)		
	Date 07/18/2025	Contributor address; City; State; Zip Code	(ID#:)		Amount of Contribution (\$)	\$20.00
	Principal occu	Edinburg, TX 78539  pation / Job title (See Instructions)	Employer (See Instructions	 s)		
	private inves			,		
	Date 07/01/2025	Full name of contributor out-of-state PAC ( Hernandez, Max (Dr.)  Contributor address; City; State; Zip Code	(ID#:)		Amount of Contribution (\$)	\$1,000.00
		McAllen, TX 78504				
	Principal occu Dr.	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 07/18/2025	Full name of contributor out-of-state PAC ( Hernandez, Max (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78504	(ID#:)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Dr.	oation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (Hinojosa, Martha (Ms.)  Contributor address; City; State; Zip Code  McAllen, TX 78504	(ID#:)		Amount of Contribution (\$)	\$10.00
	Principal occu private inves	pation / Job title (See Instructions)	Employer (See Instructions	s)		
			•			

	MONET	ARY POLITICAL CONTRIBU	JTIONS		SCHEDUI	LE <b>A1</b>
	The Instruc	tion Guide explains how to complete t	this form.		Total pages Schedule A1: Sch: 54/128 Rpt: 57/136	
2	FILER NAME Border Healt	n PAC			Filer ID (Ethics Commission 00055547	on Filers)
4	Date 07/18/2025	<ul> <li>Full name of contributor  out-of-state PAC Hinojosa, Martha (Ms.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$10.00
8	Principal occu	McAllen, TX 78504 pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
•	private inves		Employer (coo meadeasile	٠,		
	Date 07/01/2025	Full name of contributor out-of-state PAC Honrubia, Dynio (Dr.)  Contributor address; City; State; Zip Code	C (ID#:)		Amount of Contribution (\$)	\$150.00
	Dringing! aggu	McAllen, TX 78504	Employer (Co.) Instructions			
	Dr.	pation / Job title (See Instructions)	Employer (See Instructions	S)		
	Date 07/18/2025	Full name of contributor out-of-state PAC Honrubia, Vincent (Dr.)  Contributor address; City; State; Zip Code	C (ID#:)		Amount of Contribution (\$)	\$150.00
		McAllen, TX 78503				
	Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 07/01/2025	Full name of contributor out-of-state PAG Honrubia, Vincent (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78503	C (ID#:)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Dr.	oation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 07/18/2025	Full name of contributor out-of-state PAG Honrubia, Vincent (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78503	C (ID#:)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Dr.	pation / Job title (See Instructions)	Employer (See Instructions	s)		
			•			

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDULE A1	
	The Instruc	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 55/128 Rpt: 58/136	
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission Filers) 00055547	
4	Date 07/01/2025	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_ Iglesias, Norma (Dr.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>	)	7	Amount of Contribution (\$) \$1,000.0	)0
_	Dringing! aggs	McAllen, TX 78504	2. Employer (See Instructions			
8	Doctor	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 07/18/2025	Contributor address; City; State; Zip Code	)		Amount of Contribution (\$) \$1,000.0	<del></del>
	Principal occu	McAllen, TX 78504 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Doctor					
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#: Igoa, Jose (Dr.) Contributor address; City; State; Zip Code	)		Amount of Contribution (\$) \$250.0	)0
		McAllen, TX 78503				
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#: Igoa, Jose (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78503	)		Amount of Contribution (\$) \$250.0	)0
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#: Irigoyen, Fructuoso (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78501			Amount of Contribution (\$) \$200.0	)0
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	)		
		,				

	MONET	ARY POLITICAL CONTRIBUTIO	ONS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 56/128 Rpt: 59/136	
2	FILER NAME Border Healt	n PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/01/2025	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_ Irigoyen, Fructuoso (Dr.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>	)	7	Amount of Contribution (\$)	\$200.00
_		McAllen, TX 78501		_		
8	Principal occuj Doctor	pation / Job title (See Instructions)	9 Employer (See Instructions	;)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#: Jelinek, Michael T (Dr.)  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$191.19
	Principal occur	McAllen, TX 78504 pation / Job title (See Instructions)	Employer (See Instructions			
	Doctor	sation, oob title (oce instructions)	Employer (See instructions	')		
	Date 07/18/2025	Full name of contributor	)		Amount of Contribution (\$)	\$191.19
		McAllen, TX 78504				
	Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#: Jimenez-Flores, Danielle (Dr.)  Contributor address; City; State; Zip Code  Mission, TX 78572			Amount of Contribution (\$)	\$200.00
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	()		
	Date 07/18/2025	Full name of contributor	)		Amount of Contribution (\$)	\$200.00
	Principal occu Doctor	oation / Job title (See Instructions)	Employer (See Instructions	()		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 57/128 Rpt: 60/136	
2	FILER NAME Border Healt	n PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/01/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$25.00
_		McAllen, TX 78501				
8	Principal occur Doctor	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:_ Joule, Donna-Gail (Dr.)  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$25.00
	Dringing aggr	McAllen, TX 78501	Employer (See Instructions	_		
	Doctor	pation / Job title (See Instructions)	Employer (See Instructions	')		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_ Kalaf, Nelson (Dr.)  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$250.00
		Mcallen, TX 78504				
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:_Kalaf, Nelson (Dr.)  Contributor address; City; State; Zip Code  Mcallen, TX 78504			Amount of Contribution (\$)	\$250.00
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_Kanhere, Gauri (Dr.)  Contributor address; City; State; Zip Code  Rio Grande, TX 78582			Amount of Contribution (\$)	\$250.00
	Principal occu Doctor	oation / Job title (See Instructions)	Employer (See Instructions	)		

	MONEI	ARY POLITICAL C	ONTRIBUTIO	)NS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how	to complete this f	orm.	1	Total pages Schedule A1: Sch: 58/128 Rpt: 61/136	
2	FILER NAME Border Healt	h PAC			3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/18/2025	<ul><li>5 Full name of contributor Kanhere, Gauri (Dr.)</li><li>6 Contributor address; City; St.</li></ul>	out-of-state PAC (ID#:_ ate; Zip Code	)	7	Amount of Contribution (\$)	\$250.00
8	Principal occu	Rio Grande, TX 78582 pation / Job title (See Instructions	)	9 Employer (See Instructions	<u> </u> 5)		
	Date 07/01/2025	Full name of contributor Khademi, Kambiz (Mr.) Contributor address; City; St. McAllen, TX 78502	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	\$40.00
	Principal occu private inves	pation / Job title (See Instructions	) )	Employer (See Instructions	<u>                                      </u>		
	Date 07/18/2025	Full name of contributor Khademi, Kambiz (Mr.) Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code			Amount of Contribution (\$)	\$40.00
	Principal occu	McAllen, TX 78502 pation / Job title (See Instructions	)	Employer (See Instructions	  -  s)		
	private inves	tor					
	Date 07/01/2025	Full name of contributor Khan, Muhammad (Dr.) Contributor address; City; St. Mission, TX 78572	out-of-state PAC (ID#:_ ate; Zip Code			Amount of Contribution (\$)	\$20.00
	Principal occu physician	pation / Job title (See Instructions	)	Employer (See Instructions	<u> </u> 5)		
	Date 07/18/2025	Full name of contributor Khan, Muhammad (Dr.) Contributor address; City; St. Mission, TX 78572	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	\$20.00
	Principal occu physician	pation / Job title (See Instructions		Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDULE A	1
	The Instruc	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 59/128 Rpt: 62/136	
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission Filers 00055547	s)
4	Date 07/01/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$) \$1,00	0.00
8	Principal occu	McAllen, TX 78504 pation / Job title (See Instructions)	Employer (See Instructions	<u>()</u>		
	Doctor			,		
	Date 07/18/2025	Full name of contributor			Amount of Contribution (\$) \$1,00	0.00
	Dringing! goog	McAllen, TX 78504	Employer (See Instructions	·/_		
	Doctor	pation / Job title (See Instructions)	Employer (See Instructions	·)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#: Kotaki, Mohammad H. (Dr.)  Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$25	0.00
		McAllen, TX 78503				
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:Kotaki, Mohammad H. (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78503			Amount of Contribution (\$) \$25	0.00
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_Lares, Irene (Ms.)  Contributor address; City; State; Zip Code  Edinburg, TX 78539			Amount of Contribution (\$) \$1	0.00
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	5)		
		l				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 60/128 Rpt: 63/136	
2	FILER NAME Border Healt	n PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/01/2025	<ul> <li>Full name of contributor</li></ul>	_	7	Amount of Contribution (\$)	\$10.00
_	Delicalization	Edinburg, TX 78539	D. Faralana (Cara Instructions	<u></u>		
8	private inves	pation / Job title (See Instructions) tor	9 Employer (See Instructions	5)		
	Date 07/01/2025	Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
	Principal occu	McAllen, TX 78503 pation / Job title (See Instructions)	Employer (See Instructions	i)		
	private inves			,		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#: Lazaro, Fernando (Mr.)  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
		McAllen, TX 78503				
	Principal occu private inves	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#: Leal, Ramiro (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78504			Amount of Contribution (\$)	\$50.00
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#: Leal, Ramiro (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78504			Amount of Contribution (\$)	\$50.00
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDULI	E <b>A1</b>
	The Instruc	etion Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 61/128 Rpt: 64/136	
2	FILER NAME Border Healt	1 PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/01/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$250.00
8	Principal occur	McAllen, TX 78504 pation / Job title (See Instructions)	Employer (See Instructions	-, 		
Ŭ	Doctor	addott/ oob title (occ mandellons)	2 Employer (See Instructions	',		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:_ Ledesma, Raul (Dr.)  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
	Dringing aggr	McAllen, TX 78504	Employer (See Instructions	<u></u>		
	Doctor	pation / Job title (See Instructions)	Employer (See Instructions	·)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_ Ledesma, Raul (Dr.)  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$25.00
		McAllen, TX 78504				
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:_Ledesma, Raul (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78504	)		Amount of Contribution (\$)	\$25.00
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_ Lema, Rodrigo (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78503			Amount of Contribution (\$)	\$200.00
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDULE	<b>■ A1</b>
	The Instruc	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 62/128 Rpt: 65/136	
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission 00055547	ı Filers)
4	Date 07/18/2025	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$200.00
_	Dringing Lagra	McAllen, TX 78503	) Frankrian (Cas Instructions	_		
8	Doctor	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#: Lerma Jr., Ricardo (Mr.) Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$10.00
	Principal occu	Mercedes, TX 78570  pation / Job title (See Instructions)	Employer (See Instructions	) 		
	private inves		Employer (See manuchons	')		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#: Lerma Jr., Ricardo (Mr.) Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$10.00
		Mercedes, TX 78570				
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#: Levine, Lyuba (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78504			Amount of Contribution (\$)	\$93.52
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	5)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#: Levine, Lyuba (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78504			Amount of Contribution (\$)	\$93.52
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	5)		
		·				

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDULE	<b>A1</b>
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 63/128 Rpt: 66/136	
2	FILER NAME Border Healt	1 PAC		3	Filer ID (Ethics Commission 00055547	Filers)
4	Date 07/01/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$57.36
8	Principal occur	McAllen, TX 78504 pation / Job title (See Instructions)	9 Employer (See Instructions	_		
0	Doctor	adion / Job dile (See instructions)	e Employer (See instructions	')		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#: Limas, Flor (Dr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$57.36
		McAllen, TX 78504	5 1 (2 1 : "	Ĺ		
	Doctor	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#: Lin, Rick (Dr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00
		McAllen, TX 78504				
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	<u>(</u>		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#: Lin, Rick (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78504			Amount of Contribution (\$)	\$25.00
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_Linan, Enrique (Dr.)  Contributor address; City; State; Zip Code  Mission, TX 78572	)		Amount of Contribution (\$)	\$25.00
	Principal occu Doctor	oation / Job title (See Instructions)	Employer (See Instructions	)		
		,				

	MONET	ARY POLITICAL CONTRIBU	TIONS		SCHEDU	LE <b>A1</b>
	The Instruc	ction Guide explains how to complete th	nis form.		pages Schedule A1: 64/128 Rpt: 67/136	
2	FILER NAME Border Healt	n PAC		3 Filer II 0005	C (Ethics Commission 5547	on Filers)
4	Date 07/18/2025	<ul> <li>Full name of contributor</li></ul>		<b>7</b> Amou	nt of Contribution (\$)	\$25.00
8	Principal occu	Mission, TX 78572 pation / Job title (See Instructions)	9 Employer (See Instruction:	ns)		
	Doctor	,	,p.3,5. (2333133	,		
	Date 07/01/2025	Full name of contributor out-of-state PAC Lineberger, Dale (Mr.)  Contributor address; City; State; Zip Code	(ID#:)	Amou 	nt of Contribution (\$)	\$1,000.00
	Dringing! aggs	Manchaca, TX 78652	Employer (Coo Instruction			
	private inves	pation / Job title (See Instructions) tor	Employer (See Instruction:	15)		
	Date 07/18/2025	Full name of contributor out-of-state PAC Lineberger, Dale (Mr.)  Contributor address; City; State; Zip Code	(ID#:)	Amou 	nt of Contribution (\$)	\$1,000.00
	Delinational	Manchaca, TX 78652	Fundamen (Construction	>		
	principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instruction	15)		
	Date 07/01/2025	Full name of contributor out-of-state PAC Lizcano, Mario (Mr.)  Contributor address; City; State; Zip Code  McAllen, TX 78501	(ID#:)		nt of Contribution (\$)	\$5.00
	Principal occu private inves	oation / Job title (See Instructions) tor	Employer (See Instruction	ns)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (Lizcano, Mario (Mr.)  Contributor address; City; State; Zip Code  McAllen, TX 78501	(ID#:)	Amou 	nt of Contribution (\$)	\$5.00
	Principal occu private inves	oation / Job title (See Instructions) tor	Employer (See Instruction	ns)		
			<u> </u>			

	MONET	ARY POLITICAL CON	TRIBUTION	S		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to co	mplete this for	n.	1	Total pages Schedule A1: Sch: 65/128 Rpt: 68/136	
2	FILER NAME Border Healt	n PAC			3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/01/2025	Loggiodice, Nelson (Mr.)	of-state PAC (ID#: Code		7	Amount of Contribution (\$)	\$30.00
8	Principal occur	Pharr, TX 78577 pation / Job title (See Instructions)	ام	Employer (See Instructions			
0	private inves		3	Employer (See Instructions	')		
	Date 07/18/2025	Full name of contributor out- Loggiodice, Nelson (Mr.)  Contributor address; City; State; Zip  Pharr, TX 78577		)		Amount of Contribution (\$)	\$30.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	private inves	tor					
	Date 07/01/2025	Full name of contributor out- Loja, Wilmer (Dr.)  Contributor address; City; State; Zip	of-state PAC (ID#:	)		Amount of Contribution (\$)	\$100.00
		McAllen, TX 78503					
	Principal occu Dr.	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 07/18/2025	Loja, Wilmer (Dr.)				Amount of Contribution (\$)	\$100.00
	Principal occu Dr.	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 07/01/2025	Lopez, Jose (Dr.)				Amount of Contribution (\$)	\$30.34
	Principal occu doctor	oation / Job title (See Instructions)		Employer (See Instructions	5)		
			•				

	MONET	ARY POLITICAL CONTRIBUTIO	ONS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 66/128 Rpt: 69/136	
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission 00055547	on Filers)
4	Date 07/18/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$30.34
		Palmhurst, TX 78573				
8	Principal occu doctor	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_ Lopez, Pamela (Ms.)  Contributor address; City; State; Zip Code  Pharr, TX 78577			Amount of Contribution (\$)	\$25.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	private investor					
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#: Lopez Jr., Alfredo (Dr.)  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$100.00
		McAllen, TX 78504				
	Principal occu Dr	oation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#: Lopez Jr., Alfredo (Dr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu Dr	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:_Lozano, Rodolfo (Dr.)  Contributor address; City; State; Zip Code  Mission, TX 78574	)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Dr.	pation / Job title (See Instructions)	Employer (See Instructions	 ;)		

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDULE A1
	The Instruc	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 67/128 Rpt: 70/136
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission Filers) 00055547
4	Date 07/18/2025	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$) \$1,000.00
_		Mission, TX 78574			
8	Principal occu Dr.	pation / Job title (See Instructions)	Employer (See Instructions	s)	
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:		•	Amount of Contribution (\$) \$25.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>   (3)	
	private inves	tor			
	Date 07/18/2025	Full name of contributor	)		Amount of Contribution (\$) \$25.00
		Weslaco, TX 78596			
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	5)	
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#: Mabulac, Deborah (Ms.) Contributor address; City; State; Zip Code	)		Amount of Contribution (\$) \$19.12
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	5)	
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$) \$19.12
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	s)	

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 68/128 Rpt: 71/136	
2	FILER NAME Border Healt	n PAC		3	Filer ID (Ethics Commission 00055547	on Filers)
4	Date 07/01/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$10.00
8	Principal occu	McAllen, TX 78504 pation / Job title (See Instructions)	9 Employer (See Instructions	 s)		
	private inves		, , ,			
	Date 07/18/2025	Contributor address; City; State; Zip Code	)	•	Amount of Contribution (\$)	\$10.00
	Principal occu	McAllen, TX 78504 pation / Job title (See Instructions)	Employer (See Instructions	<u>                                     </u>		
	private inves	tor				
	Date 07/01/2025	Full name of contributor		•	Amount of Contribution (\$)	\$1,000.00
		McAllen, TX 78504		L		
	Principal occu Dr.	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:_Mangi, Salil (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78504	)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Dr.	oation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_Mangoo-Karim, Robert (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78503			Amount of Contribution (\$)	\$125.00
	Principal occu Doctor	oation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUI	LE <b>A1</b>
	The Instruc	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 69/128 Rpt: 72/136	
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission 00055547	on Filers)
4	Date 07/18/2025	<ul> <li>Full name of contributor  out-of-state PAC (ID#:</li></ul>	)	7	Amount of Contribution (\$)	\$125.00
_	Dringing! agg.	McAllen, TX 78503	2. Employer (See Instructions	_		
8	Doctor	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#: Manoharan, Paulrajan (Dr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu	McAllen, TX 78504 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Physician	,	. , ,	,		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#: Manoharan, Paulrajan (Dr.)  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$100.00
		McAllen, TX 78504				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#: Manrique, Carlos (Dr.)  Contributor address; City; State; Zip Code  Edinburg, TX 78539	)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	\$1,000.00
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	5)		
		<u>'</u>				

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 70/128 Rpt: 73/136	
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/01/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$50.00
8	Principal occu	McAllen, TX 78504 pation / Job title (See Instructions)	9 Employer (See Instructions	<u>,                                     </u>		
0	Private Inves		Employer (See instructions	')		
	Date 07/18/2025	Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
	Principal occu	McAllen, TX 78504 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Private Inves	·	p) (0.00	,		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#: Marina, Jose Mario (Dr.) Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$100.00
		Mission, TX 78573				
	Principal occu physician	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#: Marina, Jose Mario (Dr.)  Contributor address; City; State; Zip Code  Mission, TX 78573	)		Amount of Contribution (\$)	\$100.00
	Principal occu physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$5.00
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	)		

	MONET	ARY POLITICAL (	CONTRIBUTIO	ONS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 71/128 Rpt: 74/136	
2	FILER NAME Border Healt	h PAC			3	Filer ID (Ethics Commissio 00055547	n Filers)
4	Date 07/18/2025	<ul><li>5 Full name of contributor Marquez, Luis A. (Mr.)</li><li>6 Contributor address; City; St</li></ul>	out-of-state PAC (ID#:_ ate; Zip Code		7	Amount of Contribution (\$)	\$5.00
8	Principal occur	Harlingen, TX 78552 pation / Job title (See Instructions		9 Employer (See Instructions	<u>s)</u>		
Ŭ	private inves		,	2 Employer (See mondenone	٠,		
	Date 07/01/2025	Full name of contributor Martinez, Ricardo (Dr.) Contributor address; City; Si	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$250.00
	Principal occur	Edinburg, TX 78539 pation / Job title (See Instructions	)	Employer (See Instructions	<u>s)</u>		
	Doctor	panon, cos uno (cos monacione	,	Self-employed	٥,		
	Date 07/18/2025	Full name of contributor Martinez, Ricardo (Dr.) Contributor address; City; Si	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	\$250.00
		Edinburg, TX 78539					
	Principal occu Doctor	pation / Job title (See Instructions	)	Employer (See Instructions Self-employed	5)		
	Date 07/01/2025	Full name of contributor Mata, Nelson (Dr.) Contributor address; City; Si McAllen, TX 78501		)		Amount of Contribution (\$)	\$250.00
	Principal occu Dr.	pation / Job title (See Instructions	)	Employer (See Instructions	5)		
	Date 07/18/2025	Full name of contributor Mata, Nelson (Dr.) Contributor address; City; Si McAllen, TX 78501				Amount of Contribution (\$)	\$250.00
	Principal occu Dr.	pation / Job title (See Instructions	)	Employer (See Instructions	s)		

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instru	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 72/128 Rpt: 75/136		
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission Filers) 00055547		
4	Date 07/01/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$38.24	
_		McAllen, TX 78504	1	Ĺ			
8	Principal occu Physician	pation / Job title (See Instructions)	9 Employer (See Instructions	S)			
	Date 07/18/2025	Full name of contributor out-of-state PAC (IE Mathavan, Rajeen (Dr.)  Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$38.24	
		McAllen, TX 78504		Ţ			
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	S)			
	Date 07/01/2025	Full name of contributor out-of-state PAC (IE McNutt, Kimberly (Ms.)  Contributor address; City; State; Zip Code	)#:)		Amount of Contribution (\$)	\$25.00	
		McAllen, TX 78504					
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	s)			
	Date 07/18/2025	Full name of contributor out-of-state PAC (IE McNutt, Kimberly (Ms.)  Contributor address; City; State; Zip Code  McAllen, TX 78504	)		Amount of Contribution (\$)	\$25.00	
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	s)			
	Date 07/01/2025	Full name of contributor out-of-state PAC (IE Medina, Bertha (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78501	D#:)		Amount of Contribution (\$)	\$1,000.00	
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	s)			
			•				

	MONET	ARY POLITICAL CONTRIBU	TIONS	SCHEDULE A1
	The Instru	ction Guide explains how to complete t	his form.	1 Total pages Schedule A1: Sch: 73/128 Rpt: 76/136
2	FILER NAME Border Healt	n PAC		3 Filer ID (Ethics Commission Filers) 00055547
4	Date 07/18/2025	<ul> <li>Full name of contributor</li></ul>		7 Amount of Contribution (\$) \$1,000.00
_	Deinsinal	McAllen, TX 78501	D. Faralana (Caralantination	
8	Doctor	pation / Job title (See Instructions)	9 Employer (See Instructions	ns)
	Date 07/01/2025	Contributor address; City; State; Zip Code	C (ID#:)	Amount of Contribution (\$) \$250.00
	Principal occu	Mission, TX 78574 pation / Job title (See Instructions)	Employer (See Instructions	ns)
	M.D.	outon, con the (occ mandenons)	Employer (See Managaria	110)
	Date 07/18/2025	Full name of contributor out-of-state PAC Medina, Javier (Dr.)  Contributor address; City; State; Zip Code	C (ID#:)	Amount of Contribution (\$) \$250.00
		Mission, TX 78574		
	Principal occu M.D.	pation / Job title (See Instructions)	Employer (See Instructions	ns)
	Date 07/01/2025	Full name of contributor out-of-state PAC Medina, Lorena (Ms.)  Contributor address; City; State; Zip Code  Edinburg, TX 78539	C (ID#:)	Amount of Contribution (\$)
	Principal occu private inves	oation / Job title (See Instructions) tor	Employer (See Instructions	ns)
	Date 07/18/2025	Full name of contributor out-of-state PAC Medina, Lorena (Ms.)  Contributor address; City; State; Zip Code  Edinburg, TX 78539	C (ID#:)	Amount of Contribution (\$)
	Principal occu private inves	oation / Job title (See Instructions) tor	Employer (See Instructions	ns)
			•	

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 74/128 Rpt: 77/136		
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission 00055547	on Filers)	
4	Date 07/01/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$100.00	
8	Principal occu	McAllen, TX 78504 Dation / Job title (See Instructions)	9 Employer (See Instructions	 s)			
	private inves	tor					
	Date 07/18/2025	Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$100.00	
	Principal occu	McAllen, TX 78504 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)			
	private inves			•			
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#: Medina, Melecio (Dr.)  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$40.00	
		McAllen, TX 78501					
	Principal occu physician	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#: Medina, Melecio (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78501	)	•	Amount of Contribution (\$)	\$40.00	
	Principal occu physician	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#: Mego, Carlos (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78501			Amount of Contribution (\$)	\$1,000.00	
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	5)			

	MONET	ARY POLITICAL CONTRIBUTIO	ONS		SCHEDULE	<b>A1</b>
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 75/128 Rpt: 78/136	
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission Fi 00055547	lers)
4	Date 07/18/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$) \$1,	000.00
_		McAllen, TX 78501		L		
8	Principal occu Doctor	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_ Mendez, Oscar (Dr.)  Contributor address; City; State; Zip Code  Mission, TX 78572			Amount of Contribution (\$)	\$87.04
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	physician					
	Date 07/18/2025	Full name of contributor	)		Amount of Contribution (\$)	\$87.04
		Mission, TX 78572				
	Principal occu physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_Mendez, Salvador (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78503			Amount of Contribution (\$)	250.00
	Principal occu Dr.	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:_ Mendez, Salvador (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78503			Amount of Contribution (\$)	250.00
	Principal occu Dr.	oation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1	
	The Instruc	ction Guide explains how to complete this t	form.	1	Total pages Schedule A1: Sch: 76/128 Rpt: 79/136	
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission Filers) 00055547	
4	Date 07/01/2025	<ul> <li>Full name of contributor  out-of-state PAC (ID#: Mercado, Manuel (Dr.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>	_	7	Amount of Contribution (\$)	\$250.00
_	5	McAllen, TX 78504	la = 1 (0 1 1 1	<u> </u>		
8	Principal occu Dr.	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:_ Mercado, Manuel (Dr.) Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$250.00
	Principal occu	McAllen, TX 78504 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Dr.	·				
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_ Meyer, Scott (Mr.) Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$35.00
		Mission, TX 78572				
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	s)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:_Meyer, Scott (Mr.)  Contributor address; City; State; Zip Code  Mission, TX 78572	)		Amount of Contribution (\$)	\$35.00
	Principal occu private inves	oation / Job title (See Instructions) tor	Employer (See Instructions	5)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_Milano, Emil (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78504		•	Amount of Contribution (\$)	\$100.00
	Principal occu Doctor	oation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL COI	NTRIBUTION	S 		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to	complete this form	n.	1	Total pages Schedule A1: Sch: 77/128 Rpt: 80/136	
2	FILER NAME Border Healt	h PAC			3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/18/2025	Milano, Emil (Dr.)	out-of-state PAC (ID#: Zip Code	)	7	Amount of Contribution (\$)	\$100.00
		McAllen, TX 78504					
8	Principal occu Doctor	pation / Job title (See Instructions)	9	Employer (See Instructions	)		
	Date 07/01/2025	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$50.00
	Principal occu	Harlingen, TX 78552 pation / Job title (See Instructions)		Employer (See Instructions			
	physician	oddon 7 300 title (See matructions)		Employer (See mailuellons	,		
	Date 07/18/2025	Full name of contributor	out-of-state PAC (ID#: Zip Code	)		Amount of Contribution (\$)	\$50.00
		Harlingen, TX 78552					
	Principal occu physician	pation / Job title (See Instructions)		Employer (See Instructions	)		
	Date 07/01/2025	Full name of contributor	·			Amount of Contribution (\$)	\$250.00
	Principal occu private inves	pation / Job title (See Instructions) tor		Employer (See Instructions	)		
	Date 07/18/2025	Full name of contributor Common contributor address; City; State; 2000 McAllen, TX 78504	·			Amount of Contribution (\$)	\$250.00
	Principal occu private inves	pation / Job title (See Instructions) tor		Employer (See Instructions	)		
			I .				

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDULI	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 78/128 Rpt: 81/136	
2	FILER NAME Border Healt	n PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/01/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$9.35
		McAllen, TX 78502				
8	Principal occur Doctor	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#: Mitchell, Jo Ann (Dr.)  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$9.35
	Principal occu	McAllen, TX 78502 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ;)		
	Doctor	(200)		,		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#: Mohamed, Samira (Dr.)  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$50.00
		McAllen, TX 78504				
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$50.00
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$250.00
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBU	ITIONS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete t	this form.		otal pages Schedule A1: ch: 79/128 Rpt: 82/136	
2	FILER NAME Border Healt	n PAC			ler ID (Ethics Commission 0055547	n Filers)
4	Date 07/18/2025	<ul> <li>Full name of contributor  out-of-state PAC Mohme, Ruben (Dr.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>		<b>7</b> Ar	mount of Contribution (\$)	\$250.00
_	<u> </u>	McAllen, TX 78504				
8	Principal occu Doctor	pation / Job title (See Instructions)	9 Employer (See Instructions	ıs)		
	Date 07/01/2025	Full name of contributor out-of-state PAC Montes, Jorge A. (Dr.)  Contributor address; City; State; Zip Code	C (ID#:)	Ar 	mount of Contribution (\$)	\$25.00
	Principal occu	Edinburg, TX 78539 pation / Job title (See Instructions)	Employer (See Instructions	ne)		
	Doctor	valion / Job title (See matrictions)	Employer (See Instructions	13)		
	Date 07/18/2025	Full name of contributor out-of-state PAC Montes, Jorge A. (Dr.)  Contributor address; City; State; Zip Code	C (ID#:)	Ar 	mount of Contribution (\$)	\$25.00
		Edinburg, TX 78539				
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	ıs)		
	Date 07/01/2025	Full name of contributor out-of-state PAC Montes, Laura (Dr.)  Contributor address; City; State; Zip Code  Edinburg, TX 78539	C (ID#:)	Ar	mount of Contribution (\$)	\$25.00
	Principal occu Doctor	oation / Job title (See Instructions)	Employer (See Instructions	ıs)		
	Date 07/18/2025	Full name of contributor out-of-state PAC Montes, Laura (Dr.)  Contributor address; City; State; Zip Code  Edinburg, TX 78539	C (ID#:)	Ar 	mount of Contribution (\$)	\$25.00
	Principal occu Doctor	oation / Job title (See Instructions)	Employer (See Instructions	ıs)		
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	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE A1
	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 80/128 Rpt: 83/136
2	FILER NAME Border Healt	n PAC		3	Filer ID (Ethics Commission Filers) 00055547
4	Date 07/01/2025	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_Morales, Carlos E (Dr.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$) \$1,000.00
_		McAllen, TX 78503	10 5 1 10 1 1	Ĺ	
8	Doctor	pation / Job title (See Instructions)	9 Employer (See Instructions	5)	
	Date 07/18/2025	Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$1,000.00
	Principal occu	McAllen, TX 78503 pation / Job title (See Instructions)	Employer (See Instructions	 ;)	
	Doctor				
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_ Moreno, Juan (Mr.)  Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$15.00
		Alton, TX 78574			
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	5)	
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:_Moreno, Juan (Mr.)  Contributor address; City; State; Zip Code  Alton, TX 78574			Amount of Contribution (\$) \$15.00
	Principal occu private inves	oation / Job title (See Instructions) tor	Employer (See Instructions	5)	
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_Moreno, Leonel (Dr.)  Contributor address; City; State; Zip Code  Mission, TX 78503			Amount of Contribution (\$) \$250.00
	Principal occu Doctor	oation / Job title (See Instructions)	Employer (See Instructions	5)	

	MONEI	ARY POLITICAL CONTRIBUT	IONS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 81/128 Rpt: 84/136	
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/18/2025	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$250.00
8	Principal occu Doctor	Mission, TX 78503 pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (IEMulukutla, Surya Narayan (Dr.)  Contributor address; City; State; Zip Code  Edinburg, TX 78539	)#:)		Amount of Contribution (\$)	\$50.00
	Principal occu physician	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Date 07/18/2025	Full name of contributor  out-of-state PAC (ID Mulukutla, Surya Narayan (Dr.)  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$50.00
	Principal occu	Edinburg, TX 78539 pation / Job title (See Instructions)	Employer (See Instructions	 s)		
	physician					
	Date 07/01/2025	Full name of contributor	)		Amount of Contribution (\$)	\$112.22
	'	McAllen, TX 78504 pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID Munoz, Roberto (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78504	<u> </u> #:)		Amount of Contribution (\$)	\$112.22
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 82/128 Rpt: 85/136	
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/01/2025	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$25.00
8	Drincinal occu	Mission, TX 78572 pation / Job title (See Instructions)	9 Employer (See Instructions			
0	Doctor	oalion7 300 title (See instructions)	Employer (See instructions	')		
	Date 07/18/2025	Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$25.00
	Principal occu	Mission, TX 78572 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Doctor					
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#: Nunez, Zoraly (Ms.)  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$275.00
		McAllen, TX 78503				
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	5)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#: Nunez, Zoraly (Ms.)  Contributor address; City; State; Zip Code  McAllen, TX 78503	)		Amount of Contribution (\$)	\$275.00
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_Ochoa, Esmeralda (Mrs.)  Contributor address; City; State; Zip Code  Edinburg, TX 78539			Amount of Contribution (\$)	\$7.48
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	)		
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	MONET	ARY POLITICAL CONTRIBUTI	ONS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 83/128 Rpt: 86/136	
2	FILER NAME Border Healt	n PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/18/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$7.48
		Edinburg, TX 78539	_			
8	Principal occu private inves	pation / Job title (See Instructions) tor	9 Employer (See Instructions	s)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID: Ochoa, Kristy (Ms.)  Contributor address; City; State; Zip Code  Mission, TX 78572	#:)		Amount of Contribution (\$)	\$10.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	private inves	tor				
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID: Ochoa, Kristy (Ms.)  Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$10.00
		Mission, TX 78572				
	Principal occu private inves	oation / Job title (See Instructions) tor	Employer (See Instructions	s)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (IDa Ogunlana, Victor (Dr.)  Contributor address; City; State; Zip Code  Mission, TX 78572	#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Doctor	oation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID: Ogunlana, Victor (Dr.)  Contributor address; City; State; Zip Code  Mission, TX 78572	#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Doctor	oation / Job title (See Instructions)	Employer (See Instructions	s)		
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	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDULI	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 84/128 Rpt: 87/136	
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/01/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$50.00
8	Principal occur	McAllen, TX 78504 pation / Job title (See Instructions)	Employer (See Instructions	.) 		
Ü	Private Inves		Employer (See Instructions	')		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#: Ohabor, Chioma (Ms.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
	Deinsinal assu	McAllen, TX 78504	Frankriger (Cookersteine	$\overline{\Gamma}$		
	Private Inves	pation / Job title (See Instructions) tor	Employer (See Instructions	)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#: Ohabor, Constantine (Ms.)  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00
		McAllen, TX 78504				
	Principal occu Private Inves	pation / Job title (See Instructions) tor	Employer (See Instructions	i)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:Ohabor, Constantine (Ms.)  Contributor address; City; State; Zip Code  McAllen, TX 78504	)		Amount of Contribution (\$)	\$10.00
	Principal occu Private Inves	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:Olgin, Gaudencio (Dr.)  Contributor address; City; State; Zip Code  Edinburg, TX 78539	)		Amount of Contribution (\$)	\$125.00
	Principal occu physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 85/128 Rpt: 88/136	
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/18/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$125.00
		Edinburg, TX 78539				
8	Principal occu physician	pation / Job title (See Instructions)	9 Employer (See Instructions	i)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_ Oliveira, Noel E (Dr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
	Principal occu	Mission, TX 78572 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Doctor					
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:_ Oliveira, Noel E (Dr.) Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$250.00
		Mission, TX 78572				
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_ Orfanos, John (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78503			Amount of Contribution (\$)	\$200.00
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:_ Orfanos, John (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78503			Amount of Contribution (\$)	\$200.00
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONT	RIBUTIONS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to com	plete this form.	1	Total pages Schedule A1: Sch: 86/128 Rpt: 89/136	
2	FILER NAME Border Healt	n PAC		3	Filer ID (Ethics Commission 00055547	on Filers)
4	Date 07/01/2025	Orozco, Jorge (Mr.)	state PAC (ID#:	7	Amount of Contribution (\$)	\$5.00
_	Deinsinal assu	Pharr, TX 78577	O Frankrigg (Cooks	-t		
8	principal occu private inves	pation / Job title (See Instructions) tor	9 Employer (See In	structions)		
	Date 07/18/2025	Full name of contributor out-of-Orozco, Jorge (Mr.)  Contributor address; City; State; Zip C	state PAC (ID#:		Amount of Contribution (\$)	\$5.00
_	Principal occu	pation / Job title (See Instructions)	Employer (See In	structions)		
	private inves	tor				
	Date 07/01/2025	Otero, Fernando (Dr.)  Contributor address; City; State; Zip C	state PAC (ID#:		Amount of Contribution (\$)	\$1,000.00
	Principal occu Doctor	mcallen, TX 78502 pation / Job title (See Instructions)	Employer (See In	structions)		
	Date 07/18/2025	Otero, Fernando (Dr.)	state PAC (ID#:		Amount of Contribution (\$)	\$1,000.00
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See In	structions)		
	Date 07/01/2025	Owen, Kip (Dr.)	otate PAC (ID#:		Amount of Contribution (\$)	\$100.00
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See In	structions)		
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	MONET	ARY POLITICAL CONTRIBUT	IONS		SCHEDULI	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 87/128 Rpt: 90/136	
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/18/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$100.00
8	Principal occu	Mission, TX 78572 pation / Job title (See Instructions)	9 Employer (See Instructions	18)		
٠	Doctor	oution / Job title (See Instituctions)	2 Employer (See Instructions	13)		
	Date 07/01/2025	Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$9.67
	Principal occu	McAllen, TX 78504 Dation / Job title (See Instructions)	Employer (See Instructions	  s)		
	private inves	tor				
	Date 07/18/2025	Full name of contributor	#:)		Amount of Contribution (\$)	\$9.67
		McAllen, TX 78504				
	Principal occu private inves	oation / Job title (See Instructions) tor	Employer (See Instructions	ıs)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID Padilla, Maritza (Ms.)  Contributor address; City; State; Zip Code  Weslaco, TX 78599	#:)		Amount of Contribution (\$)	\$74.81
	Principal occu private inves	oation / Job title (See Instructions) tor	Employer (See Instructions	ıs)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID Padilla, Maritza (Ms.)  Contributor address; City; State; Zip Code  Weslaco, TX 78599	#:)		Amount of Contribution (\$)	\$74.81
	Principal occu private inves	oation / Job title (See Instructions) tor	Employer (See Instructions	ıs)		

	MONEI	ARY POLITICAL C	ONTRIBUTIO	ONS		SCHEDUI	E A1
	The Instruc	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 88/128 Rpt: 91/136	
2	FILER NAME Border Healt	h PAC			3	Filer ID (Ethics Commission 00055547	on Filers)
4	Date 07/01/2025	<ul><li>5 Full name of contributor Palacios, Esteban (Mr.)</li><li>6 Contributor address; City; St.</li></ul>	out-of-state PAC (ID#:_ ate; Zip Code		7	Amount of Contribution (\$)	\$50.00
8	Principal occu	Edinburg, TX 78540 pation / Job title (See Instructions	)	9 Employer (See Instructions	<u> </u> 5)		
	Date 07/18/2025	Full name of contributor Palacios, Esteban (Mr.)  Contributor address; City; St.  Edinburg, TX 78540	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$50.00
	Principal occu private inves	pation / Job title (See Instructions	)	Employer (See Instructions	<u>l</u> 5)		
	Date 07/01/2025	Full name of contributor Palacios Merchan, Juan D Contributor address; City; St				Amount of Contribution (\$)	\$75.00
	Detectional	Edinburg, TX 78539		Frankrije (O. a. kostrostia ra	<u></u>		
	Physician Physician	pation / Job title (See Instructions	)	Employer (See Instructions	»)		
	Date 07/18/2025	Full name of contributor Palacios Merchan, Juan D Contributor address; City; St Edinburg, TX 78539				Amount of Contribution (\$)	\$75.00
	Principal occu Physician	pation / Job title (See Instructions	)	Employer (See Instructions	<u>l</u> 5)		
	Date 07/01/2025	Full name of contributor Palimar, P (Dr.)  Contributor address; City; St.  McAllen, TX 78504	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$1,000.00
	Principal occu Dr.	pation / Job title (See Instructions	)	Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDU	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 89/128 Rpt: 92/136	
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission 00055547	on Filers)
4	Date 07/18/2025	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$1,000.00
_		McAllen, TX 78504		Ĺ		
8	Principal occu Dr.	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 07/01/2025	Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Principal occu	McAllen, TX 78504 pation / Job title (See Instructions)	Employer (See Instructions	 ;)		
	Dr.					
	Date 07/18/2025	Full name of contributor			Amount of Contribution (\$)	\$1,000.00
		McAllen, TX 78504				
	Principal occu Dr.	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_Pena, Diamantina (Ms.)  Contributor address; City; State; Zip Code  McAllen, TX 78504			Amount of Contribution (\$)	\$1,000.00
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	5)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:_ Pena, Diamantina (Ms.)  Contributor address; City; State; Zip Code  McAllen, TX 78504			Amount of Contribution (\$)	\$1,000.00
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	s)		
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	MONET	ARY POLITICAL CONTRIBUT	IONS		SCHEDULE	A1
	The Instru	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 90/128 Rpt: 93/136	
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission 00055547	Filers)
4	Date 07/01/2025	<ul> <li>Full name of contributor  out-of-state PAC (ID Pena, Priscilla (Ms.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$5.00
8	Principal occu	Mission, TX 78574 pation / Job title (See Instructions)	9 Employer (See Instructions	<u>e)</u>		
0	private inves		2 Employer (See Instructions	3)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID Pena, Priscilla (Ms.)  Contributor address; City; State; Zip Code  Mission, TX 78574	#:)		Amount of Contribution (\$)	\$5.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	private inves	tor				
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID Pena, Victor (Mr.)  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$5.00
		Mission, TX 78574				
	Principal occu private inves	pation / Job title (See Instructions)	Employer (See Instructions	<u>I</u> S)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID Pena, Victor (Mr.)  Contributor address; City; State; Zip Code  Mission, TX 78574	#:)		Amount of Contribution (\$)	\$5.00
	Principal occu private inves	oation / Job title (See Instructions) tor	Employer (See Instructions	s)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID Peralez, Rosie (Ms.)  Contributor address; City; State; Zip Code  Edinburg, TX 78539	#:)		Amount of Contribution (\$)	\$5.00
	Principal occu Private Inves	oation / Job title (See Instructions) tor	Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 91/128 Rpt: 94/136	
2	FILER NAME Border Healt	n PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/18/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$5.00
0	Dringing aggr	Edinburg, TX 78539	Employer (See Instructions	_		
8	Private Inves	pation / Job title (See Instructions) tor	9 Employer (See Instructions	)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_ Perez, Ernie (Mr.)  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$200.00
	Principal occur	McAllen, TX 78502-5360 pation / Job title (See Instructions)	Employer (See Instructions	·)		
	private busin	· · · · · · · · · · · · · · · · · · ·	Employer (See instructions	')		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:_ Perez, Ernie (Mr.)  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$200.00
		McAllen, TX 78502-5360				
	Principal occu private busin	pation / Job title (See Instructions) ess owner	Employer (See Instructions	5)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_Perez, Florencia  Contributor address; City; State; Zip Code  McAllen, TX 78503			Amount of Contribution (\$)	\$100.00
	Principal occu Doctor	oation / Job title (See Instructions)	Employer (See Instructions	()		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:_ Perez, Florencia Contributor address; City; State; Zip Code  McAllen, TX 78503			Amount of Contribution (\$)	\$100.00
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	· )		
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	MONET	ARY POLITICAL CONTR	IBUTION	IS		SCHEDUI	E A1
	The Instru	ction Guide explains how to compl	lete this for	m.	1	Total pages Schedule A1: Sch: 92/128 Rpt: 95/136	
2	FILER NAME Border Healt	n PAC			3	Filer ID (Ethics Commission 00055547	on Filers)
4	Date 07/01/2025	Perez, Francisco (Dr.)	ete PAC (ID#:	)	7	Amount of Contribution (\$)	\$50.00
		Edinburg, TX 78539	1				
8	Principal occu Doctor	pation / Job title (See Instructions)	9	Employer (See Instructions	i)		
	Date 07/18/2025	Perez, Francisco (Dr.)				Amount of Contribution (\$)	\$50.00
	Principal occu	Edinburg, TX 78539 pation / Job title (See Instructions)		Employer (See Instructions			
	Doctor	oation 7 Job title (See Instructions)		Employer (See instructions	יי		
	Date 07/01/2025	Full name of contributor out-of-state  Perez, Guillermo (Dr.)  Contributor address; City; State; Zip Code	ute PAC (ID#:	)		Amount of Contribution (\$)	\$1,000.00
		McAllen, TX 78501					
	Principal occu Doctor	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 07/18/2025	Perez, Guillermo (Dr.)				Amount of Contribution (\$)	\$1,000.00
	Principal occu Doctor	oation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 07/01/2025	Full name of contributor out-of-state Perez, Nina (Ms.)  Contributor address; City; State; Zip Code Edinburg, TX 78539	e			Amount of Contribution (\$)	\$10.00
	Principal occu private inves	oation / Job title (See Instructions) tor		Employer (See Instructions	)		
			l .				

	MONEI	ARY POLITICAL CONTRIB	BUTIONS		SCHEDULI	<b>A1</b>
	The Instru	ction Guide explains how to complet	te this form.	1	Total pages Schedule A1: Sch: 93/128 Rpt: 96/136	
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission 00055547	ı Filers)
4	Date 07/18/2025	<ul> <li>Full name of contributor  out-of-state F Perez, Nina (Ms.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>	PAC (ID#:)	7	Amount of Contribution (\$)	\$10.00
8		Edinburg, TX 78539 pation / Job title (See Instructions)	9 Employer (See Instruction	ns)		
	Date 07/01/2025	Full name of contributor out-of-state Peynado, Herrietta (Ms.)  Contributor address; City; State; Zip Code	PAC (ID#:)		Amount of Contribution (\$)	\$28.68
	Principal occu	Mercedes, TX 78570 pation / Job title (See Instructions) tor	Employer (See Instruction	ns)		
	Date 07/18/2025	Full name of contributor out-of-state F Peynado, Herrietta (Ms.)  Contributor address; City; State; Zip Code	PAC (ID#:)		Amount of Contribution (\$)	\$28.68
	Principal occu	Mercedes, TX 78570 pation / Job title (See Instructions)	Employer (See Instruction	ns)		
	private inves	tor				
	Date 07/01/2025	Full name of contributor out-of-state Full name of contributor [Or.]  Contributor address; City; State; Zip Code	PAC (ID#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Physician	Mission, TX 78572 pation / Job title (See Instructions)	Employer (See Instruction Self-employed	ns)		
	Date 07/18/2025	Full name of contributor out-of-state Pierre-Louise, Michael (Dr.)  Contributor address; City; State; Zip Code  Mission, TX 78572			Amount of Contribution (\$)	\$50.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instruction Self-employed	ns)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE	<b>■ A1</b>
	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 94/128 Rpt: 97/136	
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission 00055547	Filers)
4	Date 07/01/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$10.00
8	Principal occu	McAllen, TX 78504 pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u>		
	private inves		2 Improjer (eee medaesiere	-,		
	Date 07/18/2025	Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$10.00
	Principal occur	McAllen, TX 78504 pation / Job title (See Instructions)	Employer (See Instructions	;) 		
	private inves		Employer (See mondellone	,		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_ Puttagunta, Sobha (Ms.)  Contributor address; City; State; Zip Code	)	•	Amount of Contribution (\$)	\$10.00
		McAllen, TX 78504				
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	5)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:_ Puttagunta, Sobha (Ms.)  Contributor address; City; State; Zip Code  McAllen, TX 78504		•	Amount of Contribution (\$)	\$10.00
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	5)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_Quach, Tin (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78504			Amount of Contribution (\$)	\$5.00
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	5)		
		·				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this t	form.	1	Total pages Schedule A1: Sch: 95/128 Rpt: 98/136	
2	FILER NAME Border Healt	n PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/18/2025	<ul> <li>Full name of contributor</li></ul>	_	7	Amount of Contribution (\$)	\$5.00
	Dringing agg	McAllen, TX 78504	Employer (See Instructions	<u></u>		
8	private inves	pation / Job title (See Instructions) tor	9 Employer (See Instructions	»)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_ Rafols, Rafael (Dr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00
	Dringing oggu	McAllen, TX 78503 pation / Job title (See Instructions)	Employer (See Instructions	<u></u>		
		If-employeed	Employer (See Instructions	·)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:_ Rafols, Rafael (Dr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00
		McAllen, TX 78503				
		pation / Job title (See Instructions)  If-employeed	Employer (See Instructions	5)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_Ramirez, Luis (Dr.)  Contributor address; City; State; Zip Code  Mission, TX 78572	)		Amount of Contribution (\$)	\$100.00
	Principal occu Doctor	oation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:_Ramos, Thelma (Ms.)  Contributor address; City; State; Zip Code  McAllen, TX 78504			Amount of Contribution (\$)	\$15.00
	Principal occu private busin	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	private busili					

	MONET	ARY POLITICAL CONTRIBU	ITIONS		SCHEDULE A1
	The Instruc	ction Guide explains how to complete t	this form.	1 Total pages Sch: 96/128	Schedule A1: 8 Rpt: 99/136
2	FILER NAME Border Healt	n PAC		<b>3</b> Filer ID (Et 00055547	thics Commission Filers)
4	Date 07/01/2025	<ul> <li>Full name of contributor</li></ul>		7 Amount of C	contribution (\$) \$5.00
8	Principal occu	McAllen, TX 78503 pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u> ns)	
Ŭ	private inves		Employer (See instructions	13)	
	Date 07/18/2025	Contributor address; City; State; Zip Code	C (ID#:)	Amount of C	contribution (\$) \$5.00
	Principal occu	McAllen, TX 78503 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ns)	
	private inves			,	
	Date 07/01/2025	Full name of contributor out-of-state PAC Reddy, Vangala J (Dr.)  Contributor address; City; State; Zip Code	C (ID#:)	Amount of C	ontribution (\$) \$200.00
		McAllen, TX 78504			
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	ns)	
	Date 07/18/2025	Full name of contributor out-of-state PAC Reddy, Vangala J (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78504	C (ID#:)		ontribution (\$) \$200.00
	Principal occu Doctor	oation / Job title (See Instructions)	Employer (See Instructions	ns)	
	Date 07/01/2025	Full name of contributor out-of-state PAC Rios, Adriana (Ms.)  Contributor address; City; State; Zip Code  Weslaco, TX 78599	C (ID#:)	Amount of C	contribution (\$) \$10.00
	Principal occu private inves	oation / Job title (See Instructions) tor	Employer (See Instructions	ns)	
			·		

	MONET	ARY POLITICAL CON	ITRIBUTION	S		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to co	omplete this for	n.	1	Total pages Schedule A1: Sch: 97/128 Rpt: 100/136	
2	FILER NAME Border Healt	h PAC			3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/01/2025	Rios, Adriana (Ms.)	t-of-state PAC (ID#: p Code		7	Amount of Contribution (\$)	\$10.00
8	Principal occu	Weslaco, TX 78599 pation / Job title (See Instructions)	9	Employer (See Instructions	<u>)</u>		
•	private inves				,		
	Date 07/01/2025	Rios Jr, Jesus (Mr.)  Contributor address; City; State; Zip		)		Amount of Contribution (\$)	\$250.00
	Principal occu	McAllen, TX 78504 pation / Job title (See Instructions)		Employer (See Instructions	<u>                                      </u>		
	private inves	tor					
	Date 07/18/2025	Full name of contributor out  Rios Jr, Jesus (Mr.)  Contributor address; City; State; Zig	t-of-state PAC (ID#: o Code	)		Amount of Contribution (\$)	\$250.00
		McAllen, TX 78504					
	Principal occu private inves	pation / Job title (See Instructions) tor		Employer (See Instructions	i)		
	Date 07/01/2025	Full name of contributor out Rivera, Jaime (Ms.)  Contributor address; City; State; Zip  Edinburg, TX 78539				Amount of Contribution (\$)	\$3.82
	Principal occu private inves	pation / Job title (See Instructions) tor		Employer (See Instructions	)		
	Date 07/18/2025	Full name of contributor out Rivera - menchaca, Jennifer (Ms Contributor address; City; State; Zip	······································			Amount of Contribution (\$)	\$10.00
	Principal occu private inves	pation / Job title (See Instructions) tor		Employer (See Instructions	i)		
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	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this t	form.	1	Total pages Schedule A1: Sch: 98/128 Rpt: 101/136	
2	FILER NAME Border Healt	n PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/18/2025	6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$10.00
8	Principal occur	Edinburg, TX 78539 pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u>		
•	private inves			,		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_ Robalino, Benjamin (Dr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
	Dringing Lagor	McAllen, TX 78504	Farmley or (Co. ) In atmustic to	<u></u>		
	Doctor	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:_Robalino, Benjamin (Dr.)  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
		McAllen, TX 78504				
	Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_Robles, Luis H. (Dr.)  Contributor address; City; State; Zip Code  Brownsville, TX 78520	)		Amount of Contribution (\$)	\$100.00
	Principal occu Doctor	oation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_Rodriguez, Edgar (Dr.)  Contributor address; City; State; Zip Code  Edinburg, TX 78539			Amount of Contribution (\$)	\$100.00
	Principal occu Physician	oation / Job title (See Instructions)	Employer (See Instructions	s)		
			,			

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDULI	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 99/128 Rpt: 102/136	
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/18/2025	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_Rodriguez, Edgar (Dr.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$100.00
		Edinburg, TX 78539	_			
8	Principal occu Physician	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_Rodriguez, Maria (Ms.)  Contributor address; City; State; Zip Code  Weslaco, TX 78596			Amount of Contribution (\$)	\$10.00
		pation / Job title (See Instructions)	Employer (See Instructions	)		
	private inves	tor				
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:_ Rodriguez, Maria (Ms.)  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$10.00
		Weslaco, TX 78596				
	Principal occu private inves	oation / Job title (See Instructions) tor	Employer (See Instructions	)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_Rodriguez, Ofelia (Dr.)  Contributor address; City; State; Zip Code  Mcallen, TX 78504			Amount of Contribution (\$)	\$50.00
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:_Rodriguez, Ofelia (Dr.)  Contributor address; City; State; Zip Code  Mcallen, TX 78504			Amount of Contribution (\$)	\$50.00
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDULI	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 100/128 Rpt: 103/136	6
2	FILER NAME Border Healt	n PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/01/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$18.75
_		McAllen, TX 78504				
8	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 07/18/2025	Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$18.75
	Principal occu Physician	McAllen, TX 78504 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 07/01/2025	Full name of contributor  out-of-state PAC (ID#: Rodriguez-Ayala, Heriberto (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78502			Amount of Contribution (\$)	\$56.11
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 07/18/2025	Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$56.11
	Principal occu	McAllen, TX 78502 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#: Rodriguez-Rico, Daniella (Dr.)  Contributor address; City; State; Zip Code  Mission, TX 78572			Amount of Contribution (\$)	\$229.43
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUT	IONS		SCHEDULE A1
	The Instruc	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 101/128 Rpt: 104/136
2	FILER NAME Border Healt	n PAC		3	Filer ID (Ethics Commission Filers) 00055547
4	Date 07/18/2025	<ul> <li>Full name of contributor  out-of-state PAC (ID Rodriguez-Rico, Daniella (Dr.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>	)	7	Amount of Contribution (\$) \$229.43
8	Principal occur	Mission, TX 78572 pation / Job title (See Instructions)	9 Employer (See Instructions	<u>c)</u>	
0	Doctor	oation / Job title (See instructions)	B Employer (See Instructions	5)	
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID Ruiz, Henry (Dr.)  Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$) \$1,000.00
	Dringinal occur	McAllen, TX 78504 pation / Job title (See Instructions)	Employer (See Instructions	e)	
	Doctor	valion / Job title (See matrictions)	Employer (See Instructions	3)	
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID Ruiz, Henry (Dr.)  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$) \$1,000.00
		McAllen, TX 78504			
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	s)	
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID Ruiz, Rosalva (Ms.)  Contributor address; City; State; Zip Code  Pharr, TX 78577	)		Amount of Contribution (\$) \$10.00
	Principal occu private inves	oation / Job title (See Instructions) tor	Employer (See Instructions	s)	
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID Ruiz, Rosalva (Ms.)  Contributor address; City; State; Zip Code  Pharr, TX 78577	#:)		Amount of Contribution (\$) \$10.00
	Principal occu private inves	oation / Job title (See Instructions) tor	Employer (See Instructions	s)	
			•		

	MONET	ARY POLITICAL CONTRIBUT	IONS		SCHEDU	LE A1
	The Instruc	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 102/128 Rpt: 105/136	
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission 00055547	on Filers)
4	Date 07/01/2025	<ul> <li>5 Full name of contributor  out-of-state PAC (ID Saenz, Elvia (Ms.)</li> <li>6 Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$1,000.00
8	Dringing agg	Mcallen, TX 78504	Employer (See Instructions	<u></u>		
0	private busin	pation / Job title (See Instructions) ess owner	9 Employer (See Instructions	5)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID Saenz, Elvia (Ms.)  Contributor address; City; State; Zip Code	) #:)		Amount of Contribution (\$)	\$1,000.00
	Dringinal occu	Mcallen, TX 78504	Employer (See Instructions	c)		
	Principal occupation / Job title (See Instructions)  private business owner  Employer (See Instructions)		5)			
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID Saenz, J.J (Dr.)  Contributor address; City; State; Zip Code	) #:)		Amount of Contribution (\$)	\$1,000.00
		McAllen, TX 78503				
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID Saenz, J.J (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78503	)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Doctor	oation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID Saenz, Javier (Dr.)  Contributor address; City; State; Zip Code  Mission, TX 78572	) #:)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULI	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 103/128 Rpt: 106/136	6
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/18/2025	<ul> <li>Full name of contributor  out-of-state PAC (ID# Saenz, Javier (Dr.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$1,000.00
8	Principal occu	Mission, TX 78572 pation / Job title (See Instructions)	9 Employer (See Instructions	e)		
Ü	Doctor	oution 7 300 title (See instructions)	2 Employer (See Instructions	3)		
	Date 07/18/2025	Contributor address; City; State; Zip Code	:)		Amount of Contribution (\$)	\$25.00
	Principal occu	McAllen, TX 78504 pation / Job title (See Instructions)	Employer (See Instructions	 s)		
	private inves					
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID# Saenz, Jennifer (Ms.)  Contributor address; City; State; Zip Code	:)		Amount of Contribution (\$)	\$25.00
		McAllen, TX 78504				
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	s)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID# Saenz, Vanessa (Ms.)  Contributor address; City; State; Zip Code  Edinburg, TX 78541	:)		Amount of Contribution (\$)	\$10.00
	Principal occu private inves	oation / Job title (See Instructions) tor	Employer (See Instructions	s)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID# Saenz, Vanessa (Ms.)  Contributor address; City; State; Zip Code  Edinburg, TX 78541	:)		Amount of Contribution (\$)	\$10.00
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE <b>A1</b>
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 104/128 Rpt: 107/13	36
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission 00055547	on Filers)
4	Date 07/01/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$10.00
8	Principal occu	McAllen, TX 78504 pation / Job title (See Instructions)	9 Employer (See Instructions	 s)		
	private inves	tor				
	Date 07/18/2025	Contributor address; City; State; Zip Code	:)		Amount of Contribution (\$)	\$10.00
	Principal occu	McAllen, TX 78504 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	private inves			-,		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID# Safir, Larry (Mr.)  Contributor address; City; State; Zip Code	:)		Amount of Contribution (\$)	\$1,000.00
		Mcallen, TX 78503				
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	S)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID# Safir, Larry (Mr.)  Contributor address; City; State; Zip Code  Mcallen, TX 78503	:)		Amount of Contribution (\$)	\$1,000.00
	Principal occu private inves	oation / Job title (See Instructions) tor	Employer (See Instructions	5)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID# Saladino, Nicole (Ms.)  Contributor address; City; State; Zip Code  Mission, TX 78572	:)		Amount of Contribution (\$)	\$5.00
	Principal occu private inves	oation / Job title (See Instructions) tor	Employer (See Instructions	5)		
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	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDULE	<b>A1</b>
	The Instru	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 105/128 Rpt: 108/136	
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission 00055547	Filers)
4	Date 07/18/2025	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$5.00
8	Principal occu	Mission, TX 78572  pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	private inves	·		,		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#: Saldivar, Aida (Ms.)  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$10.00
	Dringing aggr	McAllen, TX 78504	Employer (See Instructions			
	private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#: Saldivar, Aida (Ms.)  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$10.00
		McAllen, TX 78504				
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_Salinas, Annabelle (Ms.)  Contributor address; City; State; Zip Code  McAllen, TX 78501			Amount of Contribution (\$)	\$5.00
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:Salinas, Annabelle (Ms.)  Contributor address; City; State; Zip Code  McAllen, TX 78501			Amount of Contribution (\$)	\$5.00
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDULI	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 106/128 Rpt: 109/136	6
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/01/2025	<ul> <li>Full name of contributor  out-of-state PAC (ID#:</li></ul>	)	7	Amount of Contribution (\$)	\$150.00
_		Mission, TX 78572				
8	Principal occu Dr.	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/18/2025	Full name of contributor	)		Amount of Contribution (\$)	\$150.00
	Principal occu	Mission, TX 78572 pation / Job title (See Instructions)	Employer (See Instructions	) 		
	Dr.	oution / Job title (See instructions)	Employer (See manuchons	')		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#: Salinas, Michael A. (Mr.)  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$10.00
		McAllen, TX 78503				
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	i)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:Salinas, Miguel A. (Mr.)  Contributor address; City; State; Zip Code  McAllen, TX 78503			Amount of Contribution (\$)	\$18.00
	Principal occu private inves	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	\$10.00
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	i)		
		<u>'</u>				

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E <b>A1</b>
	The Instruc	etion Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 107/128 Rpt: 110/13	6
2	FILER NAME Border Healt	1 PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/18/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$10.00
8	Principal occur	Mission, TX 78572	9 Employer (See Instructions	·/-		
0	private inves		9 Employer (See Instructions	)		
	Date 07/01/2025	Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$125.00
	Principal occu	Mission, TX 78572  pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ;)		
	doctor	,	, , , ( - · · · · · · · · · · · · · · · · · ·	,		
	Date 07/18/2025	Full name of contributor  uut-of-state PAC (ID#: Sanchez, Elisa Garza (Dr.)  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$125.00
		Mission, TX 78572				
	Principal occu doctor	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_Sanchez, Richard (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78504			Amount of Contribution (\$)	\$149.63
	Principal occu doctor	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:Sanchez, Richard (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78504			Amount of Contribution (\$)	\$149.63
	Principal occu doctor	pation / Job title (See Instructions)	Employer (See Instructions	;)		

	MONET	ARY POLITICAL CONTRII	BUTION	NS		SCHEDULE	<b>■ A1</b>
	The Instru	ction Guide explains how to comple	ete this for	m.	1	Total pages Schedule A1: Sch: 108/128 Rpt: 111/136	6
2	FILER NAME Border Healt	n PAC			3	Filer ID (Ethics Commission 00055547	Filers)
4	Date 07/01/2025	Sandoval, Gilberto (Mr.)	PAC (ID#:		7	Amount of Contribution (\$)	\$10.00
8	Principal occu	Brownsville, TX 78520 pation / Job title (See Instructions)	<u> </u>	Employer (See Instructions	:) 		
Ŭ	private inves		ľ	Employer (See mondelone	',		
	Date 07/18/2025	Full name of contributor out-of-state Sandoval, Gilberto (Mr.)  Contributor address; City; State; Zip Code	PAC (ID#:	)		Amount of Contribution (\$)	\$10.00
	Dringing! aggs	Brownsville, TX 78520		Employer (See Instructions	<u></u>		
	private inves	pation / Job title (See Instructions) tor		Employer (See Instructions	)		
	Date 07/01/2025	Full name of contributor out-of-state Sandoval, Oscar (Mr.)  Contributor address; City; State; Zip Code	PAC (ID#:			Amount of Contribution (\$)	\$25.00
		Edcouch, TX 78538					
	Principal occu private inves	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 07/18/2025	Sandoval, Oscar (Mr.)	PAC (ID#:	)		Amount of Contribution (\$)	\$25.00
	Principal occu private inves	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 07/01/2025	Full name of contributor out-of-state Sarmiento Cano, Juan P. Javier (Dr.) Contributor address; City; State; Zip Code McAllen, TX 78504	PAC (ID#:	)		Amount of Contribution (\$)	\$50.00
	Principal occu Doctor	oation / Job title (See Instructions)		Employer (See Instructions	5)		
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	MONET	ARY POLITICAL CONTRIBUT	IONS		SCHEDUL	E <b>A1</b>
	The Instruc	tion Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 109/128 Rpt: 112/13	6
2	FILER NAME Border Healt	n PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/18/2025	<ul> <li>Full name of contributor</li></ul>	#:)	7	Amount of Contribution (\$)	\$50.00
8	Principal occur	McAllen, TX 78504 pation / Job title (See Instructions)	9 Employer (See Instructions	e)		
0	Doctor	adion / Job dile (See Instructions)	e Employer (See Instructions	5)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID Seas, Manuel (Dr.)  Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$250.00
	Deirechart	McAllen, TX 78504	T Faralassa (Caralassa taraka at			
	Doctor	pation / Job title (See Instructions)	Employer (See Instructions	S)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID Seas, Manuel (Dr.)  Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$250.00
		McAllen, TX 78504				
	Principal occup	oation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID Serna, Samuel (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78504	#:)		Amount of Contribution (\$)	\$100.00
	Principal occu doctor	oation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID Serna, Samuel (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78504	#:)		Amount of Contribution (\$)	\$100.00
	Principal occu doctor	oation / Job title (See Instructions)	Employer (See Instructions	s)		
			•			

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 110/128 Rpt: 113/13	6
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/01/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$1,000.00
_		McAllen, TX 78503				
8	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#: Shuaib, Tawid (Dr.)  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$1,000.00
		McAllen, TX 78503		Ĺ		
	Doctor	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#: Siberman, Herschi (Dr.)  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$200.00
		McAllen, TX 78504				
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:_Siberman, Herschi (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78504			Amount of Contribution (\$)	\$200.00
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_Siedow, Stephen (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78504			Amount of Contribution (\$)	\$25.00
	Principal occu physician	pation / Job title (See Instructions)	Employer (See Instructions	)		
		1				

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDULI	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 111/128 Rpt: 114/136	5
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/18/2025	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_Siedow, Stephen (Dr.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>	)	7	Amount of Contribution (\$)	\$25.00
_		McAllen, TX 78504		_		
8	Principal occu physician	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 07/01/2025	Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$15.00
	Principal occu	Weslaco, TX 78596 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ;)		
	private inves		, , , , , , , , , , , , , , , , , , ,	,		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#: Sifuentes, Pamela (Ms.)  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$15.00
		Weslaco, TX 78596				
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	5)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_Singh, Manish (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78503			Amount of Contribution (\$)	\$250.00
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:_Singh, Manish (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78503			Amount of Contribution (\$)	\$250.00
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTI	ONS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 112/128 Rpt: 115/13	6
2	FILER NAME Border Healt	n PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/01/2025	<ul> <li>Full name of contributor  out-of-state PAC (ID# Solis, Hilda (Ms.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$25.00
8	Principal occu	McAllen, TX 78501 pation / Job title (See Instructions)	9 Employer (See Instructions	 s)		
	private inves					
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID# Solis, Hilda (Ms.)  Contributor address; City; State; Zip Code	<u>;                                    </u>	•	Amount of Contribution (\$)	\$25.00
	Dringing aggr	McAllen, TX 78501	Employer (See Instructions	<u>''</u>		
	private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	5)		
	Date 07/01/2025	Full name of contributor  out-of-state PAC (ID# Soto, Hector (Dr.)  Contributor address; City; State; Zip Code	<u>;</u> )		Amount of Contribution (\$)	\$250.00
		McAllen, TX 78503				
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	S)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID# Soto, Hector (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78503	<u>;                                    </u>		Amount of Contribution (\$)	\$250.00
	Principal occu Doctor	oation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID# Sustaita, Raul (Mr.)  Contributor address; City; State; Zip Code  Donna, TX 78537	;)	•	Amount of Contribution (\$)	\$25.00
	Principal occu private inves	oation / Job title (See Instructions) tor	Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTRIBUTI	ONS		SCHEDUL	E <b>A1</b>
	The Instruc	etion Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 113/128 Rpt: 116/13	6
2	FILER NAME Border Healt	1 PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/01/2025	<ul> <li>Full name of contributor  out-of-state PAC (ID Sustaita, Raul (Mr.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$25.00
8	Principal occu	Donna, TX 78537 pation / Job title (See Instructions)	9 Employer (See Instructions	 s)		
	private inves			,		
	Date 07/01/2025	Full name of contributor  out-of-state PAC (ID Swarup, Jyothi (Dr.)  Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$100.00
	Dringing! aggs	McAllen, TX 78504	Employer (Co.) Instructions	<u></u>		
	Doctor	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID Swarup, Jyothi (Dr.)  Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$100.00
		McAllen, TX 78504				
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 07/01/2025	Full name of contributor  out-of-state PAC (ID Tamez, Daniel (Mr.)  Contributor address; City; State; Zip Code  Alton, TX 78573	#:)		Amount of Contribution (\$)	\$3.82
	Principal occu private inves	oation / Job title (See Instructions) cor	Employer (See Instructions	s)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID Tamez, Daniel (Mr.)  Contributor address; City; State; Zip Code  Alton, TX 78573	#:)		Amount of Contribution (\$)	\$3.82
	Principal occu private inves	oation / Job title (See Instructions)	Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTRIBUTI	ONS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 114/128 Rpt: 117/136	6
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/01/2025	<ul> <li>Full name of contributor  out-of-state PAC (ID# Tey, Alejandro (Dr.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$250.00
_		Edinburg, TX 78539	T	_		
8	Principal occu M.D.	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID# Tey, Alejandro (Dr.)  Contributor address; City; State; Zip Code	:)		Amount of Contribution (\$)	\$250.00
	Principal occu	Edinburg, TX 78539 pation / Job title (See Instructions)	Employer (See Instructions	-, 		
	M.D.	oalion 7 300 title (See instructions)	Employer (See instructions	>)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID# Tharp, Maribel (Ms.)  Contributor address; City; State; Zip Code	:)		Amount of Contribution (\$)	\$15.00
		Mission, TX 78572				
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	s)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID# Tharp, Maribel (Ms.)  Contributor address; City; State; Zip Code  Mission, TX 78572	:)	•	Amount of Contribution (\$)	\$15.00
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	5)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#Tijerina, Erica (Ms.)  Contributor address; City; State; Zip Code  Pharr, TX 78577	:)		Amount of Contribution (\$)	\$20.00
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	5)		
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	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 115/128 Rpt: 118/136	6
2	FILER NAME Border Healt	n PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/01/2025	<ul> <li>Full name of contributor</li></ul>	_	7	Amount of Contribution (\$)	\$20.00
8	Principal occur	Pharr, TX 78577 pation / Job title (See Instructions)	9 Employer (See Instructions	·/		
0	private inves		Employer (See instructions	)		
	Date 07/01/2025	Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00
	Principal occu	McAllen, TX 78504 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ;)		
	private inves		h - 3 - (	,		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:_ Tovar, Sandra (Ms.)  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$10.00
		McAllen, TX 78504				
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	5)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_ Trejo, Jose (Mr.)  Contributor address; City; State; Zip Code  McAllen, TX 78501	)		Amount of Contribution (\$)	\$250.00
	Principal occu private busin	oation / Job title (See Instructions) ess owner	Employer (See Instructions	5)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:_ Trejo, Jose (Mr.)  Contributor address; City; State; Zip Code  McAllen, TX 78501			Amount of Contribution (\$)	\$250.00
	Principal occu private busin	oation / Job title (See Instructions) ess owner	Employer (See Instructions	5)		
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	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 116/128 Rpt: 119/136	ô
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/01/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$250.00
8	Dringing agg	McAllen, TX 78504 pation / Job title (See Instructions)	9 Employer (See Instructions	·/		
0	Doctor	Jalion / Job lilie (See instructions)	9 Employer (See Instructions	·)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID# Trevino, Ernesto  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
	Dringing age	McAllen, TX 78504	Employer (Con Instructions	<u></u>		
	Doctor	pation / Job title (See Instructions)	Employer (See Instructions	·)		
	Date 07/01/2025	Full name of contributor  out-of-state PAC (ID# Trevino, Kyara J. (Ms.)  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$5.00
		La Joya, TX 78560				
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	5)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID# Trevino, Kyara J. (Ms.)  Contributor address; City; State; Zip Code  La Joya, TX 78560	)		Amount of Contribution (\$)	\$5.00
	Principal occu private inves	oation / Job title (See Instructions) tor	Employer (See Instructions	5)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID# Turley, Susan (Mrs.)  Contributor address; City; State; Zip Code  McAllen, TX 78504	:)		Amount of Contribution (\$)	\$250.00
	Principal occu private busin	oation / Job title (See Instructions) ess owner	Employer (See Instructions	5)		
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	MONET	ARY POLITICAL CONTRIBUT	IONS		SCHEDUL	E <b>A1</b>
	The Instruc	etion Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 117/128 Rpt: 120/13	6
2	FILER NAME Border Healt	1 PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/18/2025	<ul> <li>Full name of contributor  out-of-state PAC (IE Turley, Susan (Mrs.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$250.00
_	Delicational	McAllen, TX 78504	D. Frankrije (Co. hodenski			
8	private busin	pation / Job title (See Instructions) ess owner	9 Employer (See Instructions	S)		
	Date 07/01/2025	Contributor address; City; State; Zip Code	)#:)		Amount of Contribution (\$)	\$250.00
	Principal occur	Mission, TX 78572  pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Doctor			-,		
	Date 07/18/2025	Full name of contributor	)		Amount of Contribution (\$)	\$250.00
		Mission, TX 78572				
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (IE Uribe, Lourdes (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78504	)		Amount of Contribution (\$)	\$50.00
	Principal occu Doctor	oation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (IE Valladares, Teresa (Dr.)  Contributor address; City; State; Zip Code  Mission, TX 78572	; )#:)		Amount of Contribution (\$)	\$100.00
	Principal occu M.D	oation / Job title (See Instructions)	Employer (See Instructions	s)		
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	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDULI	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 118/128 Rpt: 121/136	6
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/18/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$100.00
		Mission, TX 78572				
8	Principal occu M.D	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 07/01/2025	Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$250.00
	Principal occu Doctor	Rio Grande , TX 78582 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#: Vasquez, Jose, A (Dr.)  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
		Rio Grande , TX 78582				
	Doctor	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_ Veeramachaneni, Ravindra (Dr.)  Contributor address; City; State; Zip Code  Mission, TX 78572			Amount of Contribution (\$)	\$25.00
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:_ Veeramachaneni, Ravindra (Dr.)  Contributor address; City; State; Zip Code  Mission, TX 78572	)		Amount of Contribution (\$)	\$25.00
	Principal occu Doctor	oation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 119/128 Rpt: 122/13	6
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/01/2025	<ul> <li>Full name of contributor  out-of-state PAC (ID#: Vela, Carlos Ian (Mr.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$38.24
8	Principal occur	Edinburg, TX 78539 pation / Job title (See Instructions)	9 Employer (See Instructions	)		
Ū	private inves		2 Employer (See manucuona	,		
	Date 07/18/2025	Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$38.24
	Principal occu	Edinburg, TX 78539  pation / Job title (See Instructions)	Employer (See Instructions	)		
	private inves			,		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#: Vela, Efraim (Dr.)  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
		McAllen, TX 78503				
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#: Vela, Efraim (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78503	)		Amount of Contribution (\$)	\$250.00
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#: Vela, Oscar Rene (Mr.)  Contributor address; City; State; Zip Code  Edinburg, TX 78539			Amount of Contribution (\$)	\$10.00
	Principal occu Private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDULE	<b>A1</b>
	The Instruc	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 120/128 Rpt: 123/136	j
2	FILER NAME Border Healt	n PAC		3	Filer ID (Ethics Commission 00055547	Filers)
4	Date 07/18/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$10.00
8	Principal occur	Edinburg, TX 78539 pation / Job title (See Instructions)	Employer (See Instructions	)		
•	Private inves		Employer (eee meadelier	,		
	Date 07/01/2025	Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$10.00
	Principal occu	Mission, TX 78572  pation / Job title (See Instructions)	Employer (See Instructions	)		
	private inves		. , ,	•		
	Date 07/18/2025	Full name of contributor  out-of-state PAC (ID#: Vela, Susana (Ms.)  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$10.00
		Mission, TX 78572				
	Principal occu private inves	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$10.00
	Principal occu private inves	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#: Velazquez, Orlando (Mr.)  Contributor address; City; State; Zip Code  Mission, TX 78572			Amount of Contribution (\$)	\$10.00
	Principal occu private inves	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 121/128 Rpt: 124/13	6
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/01/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$10.00
8	Principal occu	Raymondville, TX 78580 pation / Job title (See Instructions)	Employer (See Instructions	)		
	private inves			,		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$10.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	private inves	tor				
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#: Vera, Eloy (Mr.)  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$100.00
		rio Grande City, TX 78582				
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#: Vera, Eloy (Mr.)  Contributor address; City; State; Zip Code  rio Grande City, TX 78582	)		Amount of Contribution (\$)	\$100.00
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#: Villarreal, Rose Maria (Ms.)  Contributor address; City; State; Zip Code  McAllen, TX 78504			Amount of Contribution (\$)	\$250.00
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	)		
		<u>'</u>				

	MONET	ARY POLITICAL CONTR	RIBUTION	IS		SCHEDUL	E <b>A1</b>
	The Instruc	etion Guide explains how to comp	lete this for	m.	1	Total pages Schedule A1: Sch: 122/128 Rpt: 125/136	6
2	FILER NAME Border Healt	n PAC			3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/18/2025	<ul> <li>Full name of contributor  out-of-st</li> <li>Villarreal, Rose Maria (Ms.)</li> <li>Contributor address; City; State; Zip Cod</li> </ul>		)	7	Amount of Contribution (\$)	\$250.00
8	Principal occur	McAllen, TX 78504 pation / Job title (See Instructions)	la la	Employer (See Instructions			
0	private invest		ľ	Employer (See mstructions	')		
	Date 07/01/2025	Villarreal, Veronica (Ms.)  Contributor address; City; State; Zip Cod		)		Amount of Contribution (\$)	\$224.44
	Principal occu	McAllen, TX 78504 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	private inves				•		
	Date 07/18/2025	Full name of contributor out-of-st Villarreal, Veronica (Ms.)  Contributor address; City; State; Zip Cod	ate PAC (ID#:			Amount of Contribution (\$)	\$224.44
		McAllen, TX 78504					
	Principal occup private inves	pation / Job title (See Instructions) For		Employer (See Instructions	i)		
	Date 07/01/2025	Villarreal, Victor (Dr.)		)		Amount of Contribution (\$)	\$90.00
	Principal occup Doctor	pation / Job title (See Instructions)		Employer (See Instructions	)		
	Date 07/18/2025	Full name of contributor out-of-st Villarreal, Victor (Dr.)  Contributor address; City; State; Zip Coo Pharr, TX 78577	ate PAC (ID#:			Amount of Contribution (\$)	\$90.00
	Principal occup Doctor	oation / Job title (See Instructions)		Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDUI	E A1
	The Instruc	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 123/128 Rpt: 126/13	36
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission 00055547	on Filers)
4	Date 07/01/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$112.22
8	Principal occu	Edinburg, TX 78539 pation / Job title (See Instructions)	Employer (See Instructions			
0	private inves		Employer (See Instructions	')		
	Date 07/18/2025	Full name of contributor			Amount of Contribution (\$)	\$112.22
	Dringing aggr	Edinburg, TX 78539	Employer (Con Instructions	_		
	private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#: Villescas III, Gavino M. (Mr.)  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$56.11
		San Juan, TX 78589				
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	i)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#: Villescas III, Gavino M. (Mr.)  Contributor address; City; State; Zip Code  San Juan, TX 78589			Amount of Contribution (\$)	\$56.11
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#: Viswamitra, Saroje (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78504			Amount of Contribution (\$)	\$1,000.00
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 124/128 Rpt: 127/13	36
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/18/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$1,000.00
0	Dringing aggr	McAllen, TX 78504	Employer (See Instructions	_		
8	Doctor	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 07/01/2025	Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
	Principal occu	McAllen, TX 78504 Dation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	private busin	ess owner				
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#: Walker, Ray (Mr.)  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$250.00
		McAllen, TX 78504				
	Principal occu private busin	pation / Job title (See Instructions) ess owner	Employer (See Instructions	5)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#: Wang, Ann (Dr.)  Contributor address; City; State; Zip Code  Palmhurst, TX 78573	)		Amount of Contribution (\$)	\$10.00
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#: Wang, Ann (Dr.)  Contributor address; City; State; Zip Code  Palmhurst, TX 78573			Amount of Contribution (\$)	\$10.00
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	· )		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDULI	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 125/128 Rpt: 128/136	6
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/01/2025	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$50.00
_		McAllen, TX 78504				
8	Principal occu Doctor	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:_ Wilson, Teresa (Dr.)  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
	Deinsinal assu	McAllen, TX 78504		$\overline{}$		
	Doctor	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_ Woloski, Deborah (Ms.)  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$20.00
		Mission, TX 78572				
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	i)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:_ Woloski, Deborah (Ms.)  Contributor address; City; State; Zip Code  Mission, TX 78572			Amount of Contribution (\$)	\$20.00
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	5)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_ Wong, Antonio (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78504			Amount of Contribution (\$)	\$250.00
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	()		

	MONET	ARY POLITICAL CONTRIBUTI	ONS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 126/128 Rpt: 129/13	6
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 07/18/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$250.00
_	Delicalization	McAllen, TX 78504	D. Faralana (O. a. lantanation			
8	Doctor	pation / Job title (See Instructions)	9 Employer (See Instructions	S)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID# Yanez, Sandra (Ms.)  Contributor address; City; State; Zip Code  Alton, TX 78573	±:)		Amount of Contribution (\$)	\$25.00
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	private inves			_		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID# Yanez, Sandra (Ms.)  Contributor address; City; State; Zip Code	<u>*:)</u>		Amount of Contribution (\$)	\$25.00
		Alton, TX 78573				
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	s)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID) Yarra, Subbarao (Dr.) Contributor address; City; State; Zip Code McAllen, TX 78504	<i>t</i> :)		Amount of Contribution (\$)	\$100.00
	Principal occu Doctor	oation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID# Yarra, Subbarao (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78504	#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Doctor	oation / Job title (See Instructions)	Employer (See Instructions	s)		
			•			

	MONEI	ARY POLITICAL CONTRIBUTIO	NS		SCHEDULI	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 127/128 Rpt: 130/136	6
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission 00055547	ı Filers)
1	Date	5 Full name of contributor out-of-state PAC (ID#:	,	7	Amount of Contribution (\$)	
•	07/01/2025	Zamir, Asif (Dr.)  6 Contributor address; City; State; Zip Code		-	, another of Contabation (C)	\$250.00
Ω	Principal occu	Mission, TX 78572 pation / Job title (See Instructions)	9 Employer (See Instructions			
Ü	doctor	Salion / Sob title (See Instituctions)	Employer (See instructions)	,		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:Zamir, Asif (Dr.)  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$250.00
		Mission, TX 78572				
	Principal occu doctor	pation / Job title (See Instructions)	Employer (See Instructions)	)		
	Date 07/01/2025	Full name of contributor  uut-of-state PAC (ID#:Zamora, Maria Luisa (Ms.)  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$10.00
		McAllen, TX 78504				
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions)	)		
	Date 07/18/2025	Full name of contributor out-of-state PAC (ID#:Zamora, Maria Luisa (Ms.)  Contributor address; City; State; Zip Code  McAllen, TX 78504	)		Amount of Contribution (\$)	\$10.00
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions)	)		
	Date 07/01/2025	Full name of contributor out-of-state PAC (ID#:_Zayed, Fuad (Dr.)  Contributor address; City; State; Zip Code  Alton, TX 78573			Amount of Contribution (\$)	\$75.00
	Principal occu physician	pation / Job title (See Instructions)	Employer (See Instructions)	)		

	MONET	ARY POLITICAL CONTRIBUTION	DNS	SCHEDULE A1
	The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 128/128 Rpt: 131/136
2	FILER NAME Border Heal			3 Filer ID (Ethics Commission Filers) 00055547
4	Date 07/18/2025	<ul> <li>Full name of contributor</li></ul>		7 Amount of Contribution (\$) \$75.00
		Alton, TX 78573		
8	Principal occu physician	upation / Job title (See Instructions)	Employer (See Instructions self-employed	s)

### POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Co

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarice Magnet/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Credit Card Payment	al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 1/2 Rpt: 132/136	Border Health PAC 00055547
4 Date	5 Payee name
07/01/2025	Becerra, Xavier (Mr.)
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$39,200.00	12655 W Jefferson
Expenditure from corporate funds	Los Angeles, CA 90066
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee
	Contribution
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
	T governor or camornia
Date	Payee name
06/30/2025	Huffman, Joan (The Honorable)
Amount (\$)	Payee address; City; State; Zip Code
\$50,000.00	129 Circle Way Suite 101
Expenditure from corporate funds	Lake Jackson, TX 77566
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	H Huffman, Joan (Sen.) State Senator District 17
Date	Payee name
07/16/2025	Leo, Lita (Ms.)
Amount (\$)	D 11 0' 0' 0 1
Amount (Φ)	Payee address; City; State; Zip Code
\$2,000.00	Payee address; City; State; Zip Code  2810 S. Business Hwy 281
\$2,000.00	
\$2,000.00  Expenditure from corporate funds  PURPOSE	2810 S. Business Hwy 281
\$2,000.00  Expenditure from corporate funds  PURPOSE OF	2810 S. Business Hwy 281  Edinburg, TX 78539  (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By  (b) Description Check if travel outside of Texas. Complete Schedule T.
\$2,000.00  Expenditure from corporate funds  PURPOSE	2810 S. Business Hwy 281  Edinburg, TX 78539  (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
\$2,000.00  Expenditure from corporate funds  PURPOSE OF	2810 S. Business Hwy 281  Edinburg, TX 78539  (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By  (b) Description Check if travel outside of Texas. Complete Schedule T.
\$2,000.00  Expenditure from corporate funds  PURPOSE OF EXPENDITURE	2810 S. Business Hwy 281  Edinburg, TX 78539  (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contribution
\$2,000.00  Expenditure from corporate funds  PURPOSE OF EXPENDITURE  Complete ONLY if direct	2810 S. Business Hwy 281  Edinburg, TX 78539  (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee  Candidate/Officeholder name  Candidate/Officeholder name  Office sought  Office held
\$2,000.00  Expenditure from corporate funds  PURPOSE OF EXPENDITURE	2810 S. Business Hwy 281  Edinburg, TX 78539  (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee  Candidate/Officeholder name  Candidate/Officeholder name  Office sought  Office held
\$2,000.00  Expenditure from corporate funds  PURPOSE OF EXPENDITURE  Complete ONLY if direct	2810 S. Business Hwy 281  Edinburg, TX 78539  (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee  Candidate/Officeholder name  Candidate/Officeholder name  Office sought  Office held

### POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee L	egal Services			Vages	/Contract Labor		OTHER (enter a	category not listed above)	
				The Instruction G	bulue explains	now to co	тріє					
1	Total pages Schedule F1: Sch: 2/2 Rpt: 133/136	2	FILER NAME Border Healt	h PAC				3		Filer ID 00055547	(Ethics Commission File	rs)
4	Date	5	Payee name									
	06/27/2025		Patrick, Dan	(Mr.)								
6	Amount (\$)	7	Payee address	s; City;	State;	; Zip Co	de					
	\$150,000.00		p.o. box 120	68								
	Expenditure from corporate funds		Austin, TX 78	3711								
8	PURPOSE	(a)	Category (See	Categories listed at	the ton of this sch	iedule)	(b)	Description				
	OF EXPENDITURE	,	Contributions	s/Donations M fficeholder/Po	ade By		,	Check if travel ou Check if Austin, T			•	
9	Complete ONLY if direct		Candidate/Offic	eholder name	(	Office sou	ght			Office h	eld	
	expenditure to benefit C/O	<sup>⊢</sup> F	Patrick, Dan (	_t. Gen.)						Lieuten	ant Governor	
	Date		Payee name									
	06/30/2025		Ouintanilla, O	Omar (Mr.)								
	Amount (\$)	_	Payee address	s; City;	State	; Zip Co	nde					
	\$500.00		1300 Housto	•	State,	, Zip Oc	uc					
	Ψ500.00		1300 1100310	II Avenue								
	Expenditure from corporate funds		McAllen, TX	78501								
	PURPOSE OF EXPENDITURE	(a)	Contributions	Categories listed at s/Donations M fficeholder/Po	ade By		(b)	Description Check if travel ou Check if Austin, T				
	Complete ONLY if direct		Candidate/Offic	eholder name	C	Office sou	ght			Office he	eld	
	expenditure to benefit C/OI	۱ (	Quintanilla, O	mar (Mr.)	(	City of M	cAll	en - City				
	Date		Payee name									
	06/27/2025		Zaffirini, Judi	th (Sen.)								
	Amount (\$)		Payee address		State	; Zip Co	ndo.					
	( )		,		Siale,	, Ζιρ Οι	ue					
	\$25,000.00		1407 Washir	igion Sireei								
	Expenditure from corporate funds		Laredo, TX 7	8040								
	PURPOSE OF EXPENDITURE	(a)	Contributions	Categories listed at	ade By		(b)				plete Schedule T.	
			Candidate/O	fficeholder/Po	IITICAI COMM	nttee		Contribution	ı X, (	onicenolaer livinç	g expense	
	Complete ONLY if direct		Candidate/Offic	eholder name	(	Office sou	ght			Office he	eld	
	expenditure to benefit C/OI		Zaffirini, Judith				-				enator District 21	
			-	- *								

## NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

### SCHEDULE I

	The Instruction Guide explains how to con	nplete this form.
1 Total pages Schedule I:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 1/2 Rpt:	Border Health PAC	00055547
4 Date	5 Payee name	
07/10/2025	Corner Stone Cafe	
6 Amount (\$)	7 Payee Address; City; State; Zip	
8,654.88	1105 W. Trenton	
Expenditure from corporate funds	edinburg, TX 78539	
8 PURPOSE OF		Description (See instructions regarding type of information required.)
EXPENDITURE		neals/beverage expenditure for membership neeting
	"	10001119
Date	Payee name	
06/30/2025	Fishing For Hope/ Hope Family Health Center	
Amount (\$)	Payee Address; City; State; Zip	
8,000.00	2332 Jordan	
Expenditure from	Ma Allera TV 70502	
corporate funds	McAllen, TX 78503	
PURPOSE OF		Description (See instructions regarding type of information required.) Onation
EXPENDITURE	Candidate/Officeholder/Political Committee	onauon
Date	Payee name	
06/30/2025	Just Energy	
Amount (\$)	Payee Address; City; State; Zip	
242.84	P.O.Box650518	
Expenditure from	Dallag TV 75265	
corporate funds	Dallas, TX 75265	
PURPOSE OF		Description (See instructions regarding type of information required.)  Iffice electricity expenditure
EXPENDITURE	omoc overneda/Nemai Expense	nice electricity experiulture
Date	Payee name	
06/30/2025	Lone Star National Bank	
Amount (\$)	Payee Address; City; State; Zip	
43.00	p.o. box 1127	
Expenditure from		
corporate funds	pharr, TX 78577	
PURPOSE OF	(a) Category (See instructions for examples of acceptable categories)  Accounting/Banking	Description (See instructions regarding type of information required.)
EXPENDITURE	Accounting/Banking D	alik selvice lee

### NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

### SCHEDULE I

	MADE FROM POLITICAL CONTRIBUTIONS									
	The Instruction Guide explains how to complete this form.									
1	Total pages Schedule I: Sch: 2/2 Rpt:	2	FILER NAME Border Health PAC		3	Filer ID 00055547	(Ethics Commission Filers)			
4	Date 07/21/2025	5	Payee name Water Tower Village, Ltd							
6	Amount (\$)  1,331.25  Expenditure from corporate funds	7	Payee Address; City; State; Zip 5221 N McColl Road  Mcallen, TX 78502							
8	PURPOSE OF EXPENDITURE	(a)	Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense  (b) Description lease ren			-	ing type of information required.)			

# INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 136/136 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Border Health PAC 00055547 Date 8 Amount (\$) 5 Name of person from whom amount is received 06/30/2025 \$414.38 Lone Star National Bank 6 Address of person from whom amount is received; City; State; Zip Code mcallen, TX 78502 7 Purpose for which amount is received Check if political contribution returned to filer