#### 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) 00055547 3 COMMITTEE NAME **OFFICE USE ONLY** Border Health PAC Date Received **ELECTRONICALLY FILED** 11/05/2025 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 August 5 November 5 December 5 March 5 September 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 09/26/2025 10/25/2025

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### MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

# FORM MPAC COVER SHEET PG 2

2 COMMITTEE NAME				13 File		(Ethics Commission Filers)
Border Health PAC				000	55547	
4 COMMITTEE	1. Candidates	A. Supported				
ACTIVITY	(Identify by name or, if applicable, classify by party.)					
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
		A Company				
	Measures     (Describe by date and location	A. Supported				
	of election and nature of issue.)					
		B. Opposed				
	3. Officeholders					
	Assisted (Identify by name or, if applicable, classify by party.)					
.5 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED PLEDGES, LOANS, CONTRIBUTIONS M	OR GUARANTEES  IADE ELECTRONI	S OF LOANS, OR CALLY)	ГНАМ	\$	0.00
	2. TOTAL POLITICA				ļ. —	
	(OTHER THAN PLEI	DGES, LOANS, OF	R GUARANTEES OF LO	ANS)	\$	71,606.97
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	D POLITICAL EXPI	ENDITURES		\$	0.00
	4. TOTAL POLITICA	L EXPENDITUR	ES		\$	22,500.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL ( OF THE REPORTING		MAINTAINED AS OF TH	IE LAST DAY	\$	530,875.86
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL A LAST DAY OF THE I			AS OF THE	\$	0.00
.6 AFFIDAVIT	l				<u> </u>	
		true	ear, or affirm, under pena and correct and includes er Title 15, Election Code	s all information	at the ac required	ccompanying report is to be reported by me
				Mr. Ernie Per	ez	
			Signatu	ure of Campaign	Treasur	er
AFFIX NOTARY	STAMP / SEAL ABOVE					
Sworn to and subscribed	before me. by the said			. this the		day
of				,		
	- <u> , , , , , , , , , , , , , , , , ,</u>	•				
Signature of officer ad	ministering oath	Printed name of of	ficer administering oath	Title	e of office	er administering oath

#### **SUBTOTALS - MPAC**

## FORM MPAC COVER SHEET PG 3

				3 of 72
17 COMMITT	EE NAME	18 Filer ID	(Ethics C	ommission Filers)
Border H	ealth PAC	00055547		
	E SUBTOTALS SCHEDULE		SUB	TOTAL AMOUNT
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	71,606.97
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	PR	\$	
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORAL LABOR ORGANIZATION	ATION OR	\$	
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$	
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$	
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (	ORGANIZATION	\$	
9.	SCHEDULE E: LOANS		\$	
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	5	\$	22,500.00
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
14. X	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	43,761.62
15. X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	380.78

	MONEI	ARY POLITICAL (	CONTRIBUTIO	)NS		SCHEDUI	LE <b>A1</b>
	The Instruc	ction Guide explains how	to complete this f	orm.	1	Total pages Schedule A1: Sch: 1/64 Rpt: 4/72	
2	FILER NAME	L DAG			3	Filer ID (Ethics Commission	on Filers)
	Border Healt		_			00055547	
4	Date 10/17/2025	<ul> <li>5 Full name of contributor</li> <li>Ilinas-Cepeda, Jose Aleja</li> <li>6 Contributor address; City; S</li> </ul>		)	7	Amount of Contribution (\$)	\$80.00
_	Discharles	McAllen, TX 78504	A	<b>10</b>			
8	physician	pation / Job title (See Instructions	5)	9 Employer (See Instructions	5)		
	Date 10/17/2025	Full name of contributor  Aboujamous, Riad (Mr.)  Contributor address; City; S	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	\$25.00
		McAllen, TX 78504					
	Principal occu	l	3)	Employer (See Instructions	<u>                                       </u>		
	private inves		,		,		
	Date	Full name of contributor	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	10/17/2025	Abreu, Charity (Dr.)				( )	\$1,000.00
		Contributor address; City; State; Zip Code					
		Mission, TX 78572					
	Principal occu	I pation / Job title (See Instructions	3)	Employer (See Instructions	<u> </u>		
	Doctor		,		,		
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	10/17/2025	Agapito, Adrian (Dr.)  Contributor address; City; S	ate; Zip Code			.,	\$7.43
		Pharr, TX 78577					
	Principal occu Physician	pation / Job title (See Instructions	s)	Employer (See Instructions Self-employed	i)		
	Date	Full name of contributor	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	10/17/2025	Ahmed, Adnam (Dr.)					\$100.00
		Contributor address; City; S	ate; Zip Code				
		Edinburg, TX 78539					
	Principal occu Physician	pation / Job title (See Instructions	5)	Employer (See Instructions Self-employed	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE A1	
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 2/64 Rpt: 5/72	
2	FILER NAME Border Healt	n PAC		3	Filer ID (Ethics Commission 00055547	Filers)
4	Date 10/17/2025	<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
_	Deinsinal assu	McAllen, TX 78503	O Frankrija (Cas krativijationa	$\overline{\Gamma}$		
8	Doctor	pation / Job title (See Instructions)	9 Employer (See Instructions	S)		
	Date 10/17/2025	Contributor address; City; State; Zip Code	:)		Amount of Contribution (\$)	\$18.70
	Principal occu	Harlingen, TX 78550 pation / Job title (See Instructions)	Employer (See Instructions	 s)		
	private inves		p) (2.22	-,		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#: Alhroob, Assad (Dr.)  Contributor address; City; State; Zip Code	:)		Amount of Contribution (\$)	\$20.00
		Edinburg, TX 78539				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>I</u> S)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#: Ali, Sardar (Mr.)  Contributor address; City; State; Zip Code  Mission, TX 78572	:)		Amount of Contribution (\$)	\$50.00
	Principal occu Private inves	pation / Job title (See Instructions)	Employer (See Instructions self employed	<u>I</u> S)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#: Aliseda, Ernest (Mr.)  Contributor address; City; State; Zip Code  McAllen, TX 78504	:)		Amount of Contribution (\$)	\$60.00
	Principal occu Private Inves	pation / Job title (See Instructions) tor	Employer (See Instructions Self-employed	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: 3/64 Rpt: 6/72	
2	FILER NAME Border Healt	n PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 10/17/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$56.11
8	Principal occur	McAllen, TX 78504 pation / Job title (See Instructions)	Employer (See Instructions	·/_		
0	private inves		5 Employer (See instructions	)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#: Almedia, Hillary (Dr.)  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$56.11
		McAllen, TX 78503				
	Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 10/17/2025	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 occup	oation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#:_Alsabagh, Mourad (Dr.)  Contributor address; City; State; Zip Code  Edinburg, TX 78539	)		Amount of Contribution (\$)	\$250.00
	Principal occu physician	oation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 10/17/2025	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 occup	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 4/64 Rpt: 7/72	
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commissio 00055547	n Filers)
4	Date 10/17/2025	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$100.00
8	Drincinal occu	Mission, TX 78572 pation / Job title (See Instructions)	9 Employer (See Instructions			
0	doctor	Jation / Job title (See instructions)	5 Employer (See instructions	')		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#:_Aquino, Edwardo (Dr.)  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	<u>)</u>		
	Doctor		p.o) o. (000ou double.	,		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#:_Arafat, Numan (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	5)		
	Date 10/17/2025	Full name of contributor			Amount of Contribution (\$)	\$100.00
	Principal occu Physician	oation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 10/17/2025	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 (\$)	\$7.43
	Principal occu private inves	oation / Job title (See Instructions) tor	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E <b>A1</b>
	The Instruc	etion Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 5/64 Rpt: 8/72	
2	FILER NAME Border Healt	1 PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 10/17/2025	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$250.00
_	Drive sized a servi	McAllen, TX 78504	O Frankrija (Caa kastuustia na	<u></u>		
8	Principal occup Doctor	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 10/17/2025	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		<u></u>		
	Principal occup Doctor	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 10/17/2025	Full name of contributor			Amount of Contribution (\$)	\$75.00
		Edinburg, TX 78539				
	Principal occup Doctor	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#:_Asuage, Juan (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78504			Amount of Contribution (\$)	\$250.00
	Principal occup Doctor	oation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 10/17/2025	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 occup Doctor	pation / Job title (See Instructions)	Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTRIBUT	TIONS		SCHEDUL	E <b>A1</b>
	The Instruc	tion Guide explains how to complete thi	s form.	1	Total pages Schedule A1: Sch: 6/64 Rpt: 9/72	
2	FILER NAME Border Healt	n PAC		3	Filer ID (Ethics Commissio 00055547	n Filers)
4	Date 10/17/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$74.81
8	Principal occup	McAllen, TX 78503  nation / Job title (See Instructions)	9 Employer (See Instructions	 is)		
	private inves			,		
	Date 10/17/2025	Full name of contributor out-of-state PAC (II Badiga, Murthy (Dr.)  Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$250.00
	Dringing oggu	Weslaco, TX 78596	Employer (See Instruction			
	Doctor	pation / Job title (See Instructions)	Employer (See Instructions	15)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (II Barreda Jr., Raul (Dr.)  Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$10.00
		McAllen, TX 78503				
	Principal occup Doctor	pation / Job title (See Instructions)	Employer (See Instructions	ıs)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (II Barrera, Marcos (Mr.) Contributor address; City; State; Zip Code McAllen, TX 78504	D#:)		Amount of Contribution (\$)	\$125.00
	Principal occup private busin	ation / Job title (See Instructions) ess owner	Employer (See Instructions	ıs)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (II Barrera, Richard (Dr.)  Contributor address; City; State; Zip Code  Mission, TX 78573	D#:)		Amount of Contribution (\$)	\$210.31
	Principal occup Physician	oation / Job title (See Instructions)	Employer (See Instructions self-employed	ıs)		
			•			

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUI	LE <b>A1</b>
	The Instruc	etion Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 7/64 Rpt: 10/72	
2	FILER NAME Border Healt	1 PAC		3	Filer ID (Ethics Commission 00055547	on Filers)
4	Date 10/17/2025	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$10.00
8	Principal occur	Mission, TX 78572 pation / Job title (See Instructions)	9 Employer (See Instructions	·/_		
0	Doctor	valion / Job title (See Instructions)	e Employer (See instructions	)		
	Date 10/17/2025	Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$191.19
	Principal occu	McAllen, TX 78504 Dation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Physician		self-employed			
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#: Bernini, Juan (Dr.) Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$250.00
	D: : 1	Mission, TX 78572		<u></u>		
	Doctor	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#:_ Bose, Ashley (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78501	)		Amount of Contribution (\$)	\$50.00
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 10/17/2025	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> ;)		

	MONET	ARY POLITICAL CON	TRIBUTION	S		SCHEDUI	E A1
	The Instruc	ction Guide explains how to co	omplete this form	n.	1	Total pages Schedule A1: Sch: 8/64 Rpt: 11/72	
2	FILER NAME Border Healt	h PAC			3	Filer ID (Ethics Commission 00055547	on Filers)
4	Date 10/17/2025	<ul> <li>Full name of contributor out- Bracamontes, Yvonne (Dr.)</li> <li>Contributor address; City; State; Zip</li> </ul>		)	7	Amount of Contribution (\$)	\$100.00
_	Delicational	Mission, TX 78572	lo-	Farada a de la charactica de	Ĺ		
8	Doctor	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 10/17/2025	Full name of contributor out- Cadena, Sandra (Ms.)  Contributor address; City; State; Zip  McAllen, TX 78504		)		Amount of Contribution (\$)	\$5.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Private Inves	tor		Self-employed			
	Date 10/17/2025	Full name of contributor out-	-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$200.00
	5	McAllen, TX 78501			<u> </u>		
	Principal occu Doctor	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 10/17/2025	Full name of contributor out- Canals, Desi (Dr.)  Contributor address; City; State; Zip  Mission, TX 78573				Amount of Contribution (\$)	\$25.00
	Principal occu Doctor	oation / Job title (See Instructions)		Employer (See Instructions	()		
	Date 10/17/2025	Cantu, Alonzo (Mr.)				Amount of Contribution (\$)	\$1,000.00
	Principal occu private busin	oation / Job title (See Instructions) ess owner		Employer (See Instructions	)		

	MONEI	ARY POLITICAL C	ONTRIBUTIO	DNS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how	to complete this f	orm.	1	Total pages Schedule A1: Sch: 9/64 Rpt: 12/72	
2	FILER NAME Border Healt	th PAC			3	Filer ID (Ethics Commission 00055547	on Filers)
4	Date 10/17/2025	<ul><li>5 Full name of contributor Cantu, David (Mr.)</li><li>6 Contributor address; City; Sta</li></ul>	out-of-state PAC (ID#:_		7	Amount of Contribution (\$)	\$30.00
_	Dringing con	McAllen, TX 78504		Employer (See Instructions	<u></u>		
8	private inves	pation / Job title (See Instructions) stor	'	9 Employer (See Instructions	5)		
	Date 10/17/2025	Full name of contributor Cantu, Leonel (Dr.) Contributor address; City; Sta	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	\$200.00
	Principal occu	Edinburg, TX 78539		Employer (See Instructions	<u>''</u>		
	Dr.	pation / Job title (See Instructions,		Employer (See Instructions	·)		
	Date 10/17/2025	Full name of contributor Cantu, Melissa (Ms.) Contributor address; City; Sta	out-of-state PAC (ID#:_	)	•	Amount of Contribution (\$)	\$100.00
		Pharr, TX 78577					
	Principal occu private inves	pation / Job title (See Instructions)	1	Employer (See Instructions	5)		
	Date 10/17/2025	Full name of contributor Caporusso, Joseph M. (Dr Contributor address; City; Sta McAllen, TX 78501			•	Amount of Contribution (\$)	\$50.00
	Principal occu Doctor	pation / Job title (See Instructions)	)	Employer (See Instructions	<u>l</u> S)		
	Date 10/17/2025	Full name of contributor Cardenas, Carlos J. (Dr.) Contributor address; City; Sta	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Doctor	pation / Job title (See Instructions)	)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTI	ONS		SCHEDUL	E <b>A1</b>
	The Instruc	etion Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 10/64 Rpt: 13/72	
2	FILER NAME Border Healt	1 PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 10/17/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$5.00
8	Principal occu	McAllen, TX 78504 pation / Job title (See Instructions)	9 Employer (See Instructions	 s)		
	private inves	or				
	Date 10/17/2025	Full name of contributor  out-of-state PAC (ID# Carreras, Jose (Dr.)  Contributor address; City; State; Zip Code	<u>;                                    </u>		Amount of Contribution (\$)	\$800.00
	Drive sixed assets	Mission, TX 78572	Franks von (Cook kooks votions	<u></u>		
	Dr	pation / Job title (See Instructions)	Employer (See Instructions	S)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID# Castaneda, Marissa (Ms.)  Contributor address; City; State; Zip Code	<u>;                                    </u>		Amount of Contribution (\$)	\$50.00
		Edinburg, TX 78539				
	Principal occup	oation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID# Castillo, James (Dr.)  Contributor address; City; State; Zip Code  Harlingen, TX 78550	±:)		Amount of Contribution (\$)	\$57.36
	Principal occup Physician	oation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID# Castillo, Melany (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78504	£)		Amount of Contribution (\$)	\$112.40
	Principal occup physician	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: 11/64 Rpt: 14/72	
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 10/17/2025	<ul> <li>Full name of contributor  out-of-state PAC (ID# Cavazos - Salas, Norma (Dr.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$100.00
_	Deire sin al access	Mission, TX 78572	To Frankrick (Construction			
8	Principal occu Dr.	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID# Changlani, Mahesh (Dr.)  Contributor address; City; State; Zip Code	:)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	McAllen, TX 78504 Dation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID# Chavez Paz, Juan (Dr.)  Contributor address; City; State; Zip Code	:)		Amount of Contribution (\$)	\$25.00
	Principal occu	McAllen, TX 78504 Dation / Job title (See Instructions)	Employer (See Instructions	<u> </u> S)		
	Physician		self-employed			
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID# Chen, Di (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 Instructions	<u>I</u> S)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID# Cherian, Ally (Ms.)  Contributor address; City; State; Zip Code  McAllen, TX 78504	:)		Amount of Contribution (\$)	\$20.00
	Principal occu private inves	oation / Job title (See Instructions) tor	Employer (See Instructions	S)		
			•			

	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: 12/64 Rpt: 15/72	
2	FILER NAME Border Healt	n PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 10/17/2025	<ul> <li>Full name of contributor  out-of-state PAC (ID#: Cooper-Dockery, Dona (Dr.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$125.00
8	Dringing aggr	McAllen, TX 78504	Employer (See Instructions	_		
0	M.D	pation / Job title (See Instructions)	Employer (See Instructions	')		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#: Cordoba-Kissee, Michelle (Dr.)  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$20.00
	Dringing Lagor	Edinburg, TX 78539	Franks von (Cook kastu et and	_		
	78542	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#: Coronado Garcia, Aida (Ms.)  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$19.12
		Brownsville, TX 78526				
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	i)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#: Cortes, Oscar (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78504			Amount of Contribution (\$)	\$250.00
	Principal occu Dr.	pation / Job title (See Instructions)	Employer (See Instructions	()		
	Date 10/17/2025	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	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: 13/64 Rpt: 16/72	
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission 00055547	on Filers)
4	Date 10/17/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$250.00
0	Dringing! goog	McAllen, TX 78504	D. Employer (See Instructions	·/		
8	Dr.	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#: Cruz, Edgar (Dr.)  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$250.00
	Deire sin al acces	McAllen, TX 78504	Formula van (Cara la atmostica a	$\overline{\Gamma}$		
	Doctor	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 10/17/2025	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 Dr.	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 10/17/2025	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	pation / Job title (See Instructions)	Employer (See Instructions Self-employed	5)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#: Deanda, David (Mr.)  Contributor address; City; State; Zip Code  Mission, TX 78574			Amount of Contribution (\$)	\$1,000.00
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTI	ONS		SCHEDUI	LE <b>A1</b>
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 14/64 Rpt: 17/72	
2	FILER NAME Border Healt	n PAC		3	Filer ID (Ethics Commission 00055547	on Filers)
4	Date 10/17/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$100.00
8	Principal occu	Edinburg, TX 78539 pation / Job title (See Instructions)	9 Employer (See Instructions	<u>=,</u>		
0	private inves		2 Employer (See instructions	٥)		
	Date 10/17/2025	Full name of contributor  out-of-state PAC (ID# Desai, Parul (Dr.)  Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$125.00
		McAllen, TX 78504	1	L		
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	S)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID# Divino, Haydee T. (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	S)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#Duran, Alberto (Dr.)  Contributor address; City; State; Zip Code  Mission, TX 78504	#:)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Dr	oation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID# Ebreo, Ellie (Ms.)  Contributor address; City; State; Zip Code  McAllen, TX 78504	#:)		Amount of Contribution (\$)	\$37.41
	Principal occu private inves	oation / Job title (See Instructions) tor	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: 15/64 Rpt: 18/72	
2	FILER NAME Border Healt	n PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 10/17/2025	<ul> <li>Full name of contributor  out-of-state PAC (ID# Echols, Minerva (Ms.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$20.00
8	Principal occur	Pharr, TX 78577 pation / Job title (See Instructions)	9 Employer (See Instructions	;) 		
Ŭ	private inves		2 Employer (See instructions	,,		
	Date 10/17/2025	Full name of contributor  out-of-state PAC (ID# Espinoza, Manuel (Dr.)  Contributor address; City; State; Zip Code	:)	•	Amount of Contribution (\$)	\$149.63
		Harlingen, TX 78550	1	_		
	Principal occur Doctor	pation / Job title (See Instructions)	Employer (See Instructions	S)		
	Date 10/17/2025	Full name of contributor  out-of-state PAC (ID# Falcon, Antonio (Dr.)  Contributor address; City; State; Zip Code	:)		Amount of Contribution (\$)	\$200.00
		Rio Grande, TX 78582				
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#Falcon, Maria Elena (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78504	:)	•	Amount of Contribution (\$)	\$250.00
	Principal occu Doctor	oation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 10/17/2025	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) for	Employer (See Instructions	s)		
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	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 16/64 Rpt: 19/72	
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission 00055547	on Filers)
4	Date 10/17/2025	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_Forse, Armour (Dr.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$100.00
_		McAllen, TX 78503	1	_		
8	physician	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#:_ Francis, Mary (Ms.)  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$114.71
	Dringing agg	McAllen, TX 78503	Employer (See Instructions	·/_		
	Doctor	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#:_Galindo, Eugenio (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	5)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#:_ Garcia, Carlos (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	s)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#:_Garcia, Cynthia (Dr.)  Contributor address; City; State; Zip Code  Harlingen, TX 78550			Amount of Contribution (\$)	\$200.00
	Principal occu doctor	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBU	TIONS	SCHEDULE A1
	The Instruc	ction Guide explains how to complete th	nis form.	1 Total pages Schedule A1: Sch: 17/64 Rpt: 20/72
2	FILER NAME Border Healt	n PAC		3 Filer ID (Ethics Commission Filers) 00055547
4	Date 10/17/2025	<ul> <li>Full name of contributor  out-of-state PAC (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	is)
	Date 10/17/2025	Full name of contributor out-of-state PAC ( Garcia, Nancy (Ms.)  Contributor address; City; State; Zip Code  Mission, TX 78572	(ID#:)	Amount of Contribution (\$) \$20.00
		pation / Job title (See Instructions)	Employer (See Instructions	s)
	private inves	tor		
	Date 10/17/2025	Full name of contributor  uut-of-state PAC ( Garcia, Norma A. (Dr.)  Contributor address; City; State; Zip Code	( D#:)	Amount of Contribution (\$) \$250.00
		McAllen, TX 78503		
	Principal occu Doctor	oation / Job title (See Instructions)	Employer (See Instructions	s)
	Date 10/17/2025	Full name of contributor out-of-state PAC ( Garcia, Oscar (Dr.)  Contributor address; City; State; Zip Code  Mission, TX 78572	(ID#:)	Amount of Contribution (\$) \$1,000.00
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	is)
	Date 10/17/2025	Full name of contributor out-of-state PAC ( Garcia, Pamela (Ms.)  Contributor address; City; State; Zip Code  Mission, TX 78572	(ID#:)	Amount of Contribution (\$) \$15.00
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	is)
			- '	

	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: 18/64 Rpt: 21/72	
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 10/17/2025	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$150.00
8	Dringing! goog	McAllen, TX 78504	D. Employer (See Instructions			
0	Doctor	pation / Job title (See Instructions)	9 Employer (See Instructions	')		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#:_Garcia, Samuel (Dr.)  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
	Dringing! aggr	McAllen, TX 78504	Employer (See Instructions	_		
	Dr.	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#: Garcia Lopez, Javier (Mr.) 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	)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#:_Garza, Edwardo (Mr.)  Contributor address; City; State; Zip Code  McAllen, TX 78504			Amount of Contribution (\$)	\$9.56
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	)		
	Date 10/17/2025	Full name of contributor out-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	pation / Job title (See Instructions) tor	Employer (See Instructions	)		
		1				

	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: 19/64 Rpt: 22/72	
2	FILER NAME Border Healt	n PAC		3	Filer ID (Ethics Commission 00055547	Filers)
4	Date 10/17/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$) \$	1,000.00
_	Dringing! aggs	Edinburg, TX 78539	O Employer (See Instructions	_		
8	Doctor	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#:_ Garza, Jesus (Dr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$150.00
	Principal occu	McAllen, TX 78501 pation / Job title (See Instructions)	Employer (See Instructions	<u>)</u>		
	doctor		Employer (Geo mondonerio	,		
	Date 10/17/2025	Full name of contributor	)		Amount of Contribution (\$)	\$10.00
		Mission, TX 78572				
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	i)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#:_ Garza, Jose Rene (Mr.)  Contributor address; City; State; Zip Code  McAllen, TX 78504			Amount of Contribution (\$) \$	31,000.00
	Principal occu private busin	oation / Job title (See Instructions) ess owner	Employer (See Instructions	)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#:_Garza, Kareena (Mrs.)  Contributor address; City; State; Zip Code  Edinburg, TX 78539			Amount of Contribution (\$)	\$3.82
	Principal occu private inves	oation / Job title (See Instructions) tor	Employer (See Instructions	i)		
		·				

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUL	E <b>A1</b>
	The Instruc	tion Guide explains how to complete this t	orm.	1	Total pages Schedule A1: Sch: 20/64 Rpt: 23/72	
2	FILER NAME Border Healt	1 PAC		3	Filer ID (Ethics Commissio 00055547	n Filers)
4	Date 10/17/2025	<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	s)		
	Date 10/17/2025	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
		oation / Job title (See Instructions)	Employer (See Instructions	<u> </u>   S)		
	private inves	or				
	Date 10/17/2025	Full name of contributor	)		Amount of Contribution (\$)	\$1,000.00
		mcallen, TX 78503				
	Principal occu Doctor	oation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#:_Giraldo, Alvaro (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78504		•	Amount of Contribution (\$)	\$100.00
	Principal occu Dr.	oation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 10/17/2025	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	oation / 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: 21/64 Rpt: 24/72	
2	FILER NAME Border Healt	1 PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 10/17/2025	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_Gomez, Juan Pablo (Dr.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$200.00
8	Principal occur	McAllen, TX 78504 pation / Job title (See Instructions)	9 Employer (See Instructions			
0	Doctor	valion / 300 title (See instructions)	e Employer (See instructions	')		
	Date 10/17/2025	Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
	Principal occur	Edinburg, TX 78539  pation / Job title (See Instructions)	Employer (See Instructions	<u>.</u>		
	private inves			,		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#:_ Gomez-Martinez, Marissa (Dr.) Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$20.00
		Edinburg, TX 78539				
	Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#:_Gonzales, Elizabeth Ann (Ms.)  Contributor address; City; State; Zip Code  Alamo, TX 78516			Amount of Contribution (\$)	\$3.82
	Principal occup	oation / Job title (See Instructions) cor	Employer (See Instructions	)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#:_Gonzalez, Ada (Mrs.)  Contributor address; City; State; Zip Code  Alamo, TX 78516			Amount of Contribution (\$)	\$84.44
	Principal occup	pation / Job title (See Instructions) ess owner	Employer (See Instructions	i)		
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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: 22/64 Rpt: 25/72	_
2	FILER NAME Border Healt	n PAC		3	Filer ID (Ethics Commission Filers) 00055547	
4	Date 10/17/2025	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$) \$5.0	0
_	Dringing age	Edinburg, TX 78542	• Employer (Coo Instructions	_		
8	principal occu private inves		9 Employer (See Instructions	5)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#:_ Gonzalez, Alfredo  Contributor address; City; State; Zip Code  Pharr, TX 78577			Amount of Contribution (\$) \$50.0	0
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	<u>(</u>		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#:_Gonzalez, Jaime A. (Mr.)  Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$1,000.0	0
	Deinsinal assu	Edinburg, TX 78539	Franksian (Cook Instructions	_		_
	private busin	eation / Job title (See Instructions) ess owner	Employer (See Instructions	5)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#:_ Gonzalez, Jesus (Mr.)  Contributor address; City; State; Zip Code  Edinburg, TX 78542			Amount of Contribution (\$) \$25.0	0
	Principal occu private inves	oation / Job title (See Instructions) tor	Employer (See Instructions	()		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#:_ Gonzalez, Roberto (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78503			Amount of Contribution (\$) \$25.0	0
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDU	LE <b>A1</b>
	The Instruc	etion Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 23/64 Rpt: 26/72	
2	FILER NAME Border Healt	n PAC		3	Filer ID (Ethics Commission 00055547	on Filers)
4	Date 10/17/2025	<ul> <li>Full name of contributor  out-of-state PAC (ID#: Gonzalez Jr, Alfonso (Mr.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$10.00
8	Principal occur	Brownsville, TX 78521 pation / Job title (See Instructions)	9 Employer (See Instructions	·/_		
0	private inves		5 Employer (See Instructions	)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#: Griego, Enrique (Dr.)  Contributor address; City; State; Zip Code  Pharr, TX 78577			Amount of Contribution (\$)	\$1,000.00
	Principal occu	oation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	M.D.					
	Date 10/17/2025	Full name of contributor	)		Amount of Contribution (\$)	\$112.22
		Edinburg, TX 78539	1			
	Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#: Guardia, Juan A. (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78504	)		Amount of Contribution (\$)	\$500.00
	Principal occu Doctor	oation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 10/17/2025	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 doctor	pation / Job title (See Instructions)	Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTRIBUT	IONS		SCHEDUI	LE <b>A1</b>
	The Instruc	etion Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 24/64 Rpt: 27/72	
2	FILER NAME Border Healt	n PAC		3	Filer ID (Ethics Commission 00055547	on Filers)
4	Date 10/17/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$74.81
_		McAllen, TX 78502	10.5 1 (0.1 1 11	Ţ		
8	private busin	pation / Job title (See Instructions) ess owner	9 Employer (See Instructions	S)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID Guerra, R.Marcy (Dr.)  Contributor address; City; State; Zip Code	)#:)		Amount of Contribution (\$)	\$250.00
	Drincinal occur	Edinburg, TX 78541 pation / Job title (See Instructions)	Employer (See Instructions	e)		
	Dr.	valion / Job title (See instructions)	Employer (See instructions	5)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID Gummadi, Sarada (Dr.)  Contributor address; City; State; Zip Code	) 		Amount of Contribution (\$)	\$25.00
		Mission, TX 78572				
	Principal occu Doctor	oation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID Gutierrez, Marco (Dr.)  Contributor address; City; State; Zip Code  Edinburg, TX 78539	)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Doctor	oation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID Gutierrez, Miguel (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78501	#:)		Amount of Contribution (\$)	\$250.00
	Principal occu Dr.	oation / Job title (See Instructions)	Employer (See Instructions	s)		
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	MONET	ARY POLITICAL CONTRI	BUTION	IS		SCHEDUI	E A1
	The Instruc	ction Guide explains how to comple	ete this for	m.	1	Total pages Schedule A1: Sch: 25/64 Rpt: 28/72	
2	FILER NAME Border Healt	n PAC			3	Filer ID (Ethics Commission 00055547	on Filers)
4	Date 10/17/2025	Guzman, Eduardo (Dr.)	e PAC (ID#:	)	7	Amount of Contribution (\$)	\$50.00
_	Delicalization	Penitas, TX 78504	la la	Fanda and (Carabantana)	Ĺ		
8	Doctor	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 10/17/2025	Haddad, Roberto (Mr.)  Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$10.00
	Principal occu	McAllen, TX 78501 Dation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Private Inves	tor					
	Date 10/17/2025	Full name of contributor	e PAC (ID#:			Amount of Contribution (\$)	\$1,000.00
		McAllen, TX 78503					
	Principal occu Doctor	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 10/17/2025	Hance, Courtney (Ms.)				Amount of Contribution (\$)	\$5.00
	Principal occu private inves	oation / Job title (See Instructions) tor		Employer (See Instructions	· )		
	Date 10/17/2025	Full name of contributor out-of-state Hensler, Blake (Mr.)  Contributor address; City; State; Zip Code  Edinburg, TX 78539	e PAC (ID#:	)		Amount of Contribution (\$)	\$25.00
	Principal occu private inves	oation / Job title (See Instructions) tor		Employer (See Instructions	i)		
			, 				

	MONET	ARY POLITICAL CO	NIRIBUTIO	NS		SCHEDUI	E A1
	The Instruc	ction Guide explains how to	complete this fo	orm.	1	Total pages Schedule A1: Sch: 26/64 Rpt: 29/72	
2	FILER NAME Border Healt	h PAC			3	Filer ID (Ethics Commission 00055547	on Filers)
_					_		
4	Date 10/17/2025	<ul><li>5 Full name of contributor Hensler, Monique (Ms.)</li><li>6 Contributor address; City; State;</li></ul>	out-of-state PAC (ID#: Zip Code		1	Amount of Contribution (\$)	\$25.00
Ω	Principal occu	Edinburg, TX 78539 pation / Job title (See Instructions)		Employer (See Instructions			
0	private inves			e Employer (See instructions	)		
						Λ	
	Date 10/17/2025	_	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$1,000.00
	10/11/2025	Hernandez, Ambrosio (Dr.)					\$1,000.00
		Contributor address; City; State;	Zip Code				
		San Juan, TX 78589					
	Principal occu Doctor	pation / Job title (See Instructions)		Employer (See Instructions	)		
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	10/17/2025	Hernandez, Cristela (Dr.)					\$200.00
		Contributor address; City; State;	Zip Code				
		Edinburg TV 70520					
	Dringing con	Edinburg, TX 78539	Ī	Employer (Coo Instructions			
	physician	pation / Job title (See Instructions)		Employer (See Instructions	)		
	· ·						
	Date	<b>—</b>	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	10/17/2025	Hernandez, Lisa (Ms.)					\$20.00
		Contributor address; City; State;	Zip Code				
		Edinburg, TX 78539					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
	private inves				,		
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	10/17/2025	Hernandez, Max (Dr.)	out of state 1710 (1211	,		(4)	\$1,000.00
		Contributor address; City; State;	Zip Code				•
			,				
		McAllen, TX 78504					
	Principal occu	oation / Job title (See Instructions)		Employer (See Instructions	)		
	Dr.						

	MONET	ARY POLITICAL CONTRIBU	TIONS	5		SCHEDUI	E A1
	The Instruc	tion Guide explains how to complete t	his form		1	Total pages Schedule A1: Sch: 27/64 Rpt: 30/72	
2	FILER NAME Border Healt	n PAC			3	Filer ID (Ethics Commission 00055547	on Filers)
4	Date 10/17/2025	<ul> <li>Full name of contributor</li></ul>			7	Amount of Contribution (\$)	\$10.00
8	Principal occu	McAllen, TX 78504  nation / Job title (See Instructions)	9 ⊟	imployer (See Instructions	)		
	private inves			, . , . (	,		
	Date 10/17/2025	Full name of contributor out-of-state PAC Honrubia, Dynio (Dr.)  Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$150.00
	Dringing! aggs	McAllen, TX 78504		mpleyer (Cae Instructions			
	Dr.	pation / Job title (See Instructions)		imployer (See Instructions	)		
	Date 10/17/2025	Full name of contributor out-of-state PAC Honrubia, Vincent (Dr.)  Contributor address; City; State; Zip Code	(ID#:	)		Amount of Contribution (\$)	\$1,000.00
		McAllen, TX 78503					
	Principal occu Dr.	oation / Job title (See Instructions)	E	imployer (See Instructions	)		
	Date 10/17/2025	Full name of contributor out-of-state PAC Iglesias, Norma (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78504				Amount of Contribution (\$)	\$1,000.00
	Principal occu Doctor	oation / Job title (See Instructions)	E	mployer (See Instructions	)		
	Date 10/17/2025	Full name of contributor out-of-state PAC Igoa, Jose (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78503				Amount of Contribution (\$)	\$250.00
	Principal occu Doctor	oation / Job title (See Instructions)	E	mployer (See Instructions	)		
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	MONET	ARY POLITICAL CONTRIBI	UTION	IS		SCHEDUI	LE <b>A1</b>
	The Instruc	tion Guide explains how to complete	this for	m.	1	Total pages Schedule A1: Sch: 28/64 Rpt: 31/72	
2	FILER NAME Border Healt	n PAC			3	Filer ID (Ethics Commission 00055547	on Filers)
4	Date 10/17/2025	<ul> <li>Full name of contributor  out-of-state PA  Irigoyen, Fructuoso (Dr.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>		)	7	Amount of Contribution (\$)	\$200.00
_		McAllen, TX 78501					
8	Principal occup  Doctor	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 10/17/2025	Full name of contributor out-of-state PA  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	auton 7 305 title (See instructions)		Employer (See Instructions	')		
	Date 10/17/2025	Full name of contributor out-of-state PA Jimenez-Flores, Danielle (Dr.)  Contributor address; City; State; Zip Code	AC (ID#:	)		Amount of Contribution (\$)	\$200.00
		Mission, TX 78572					
	Principal occup	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 10/17/2025	Full name of contributor out-of-state PA Joule, Donna-Gail (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78501		)		Amount of Contribution (\$)	\$25.00
	Principal occup Doctor	oation / Job title (See Instructions)		Employer (See Instructions	()		
	Date 10/17/2025	Full name of contributor out-of-state PA Kalaf, Nelson (Dr.)  Contributor address; City; State; Zip Code  Mcallen, TX 78504				Amount of Contribution (\$)	\$1,000.00
	Principal occup Doctor	oation / Job title (See Instructions)		Employer (See Instructions	)		
			•				

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 29/64 Rpt: 32/72	
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission 00055547	on Filers)
4	Date 10/17/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$250.00
		Rio Grande, TX 78582				
8	Principal occu Doctor	pation / Job title (See Instructions)	9 Employer (See Instructions	S)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#: Khademi, Kambiz (Mr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$40.00
	Principal occu	McAllen, TX 78502 pation / Job title (See Instructions)	Employer (See Instructions	<u>:)</u>		
	private inves	·	Employer (See instructions	۰)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#: Khan, Muhammad (Dr.) Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$20.00
		Mission, TX 78572				
	Principal occu physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#: Kiani, Gholam (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)		
	Date 10/17/2025	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 (\$)	\$250.00
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	S)		
		<u>'</u>				

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 30/64 Rpt: 33/72	
2	FILER NAME Border Healt	1 PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 10/17/2025	<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)	9 Employer (See Instructions	<u>:)</u>		
0	private inves		Employer (See instructions	>)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#:_ Lazaro, Fernando (Mr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
	Dringing! aggu	McAllen, TX 78503	Employer (Coo Instructions	<u></u>		
	private inves	pation / Job title (See Instructions) For	Employer (See Instructions	5)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#:_ Leal, Ramiro (Dr.) Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$50.00
		McAllen, TX 78504				
	Principal occup	oation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#:_Ledesma, Raul (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78504	)	•	Amount of Contribution (\$)	\$250.00
	Principal occu Doctor	oation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 10/17/2025	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	oation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIB	BUTION	NS		SCHEDULE	E <b>A1</b>
	The Instruc	tion Guide explains how to complete	e this for	·m.	1	Total pages Schedule A1: Sch: 31/64 Rpt: 34/72	
2	FILER NAME Border Healt	n PAC			3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 10/17/2025	<ul> <li>Full name of contributor</li></ul>	-		7	Amount of Contribution (\$)	\$10.00
8	Principal occur	Mercedes, TX 78570 pation / Job title (See Instructions)	ام	Employer (See Instructions	·/		
0	private inves			Employer (See instructions	·)		
	Date 10/17/2025	Full name of contributor out-of-state P Levine, Lyuba (Dr.)  Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$93.52
	Principal occur	McAllen, TX 78504  nation / Job title (See Instructions)		Employer (See Instructions	·/ 		
	private inves			Employer (See instructions	)		
	Date 10/17/2025	Full name of contributor out-of-state P Limas, Flor (Dr.)  Contributor address; City; State; Zip Code	PAC (ID#:	)		Amount of Contribution (\$)	\$57.36
		McAllen, TX 78504					
	Principal occu Doctor	oation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 10/17/2025	Full name of contributor out-of-state P Lin, Rick (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78504	-			Amount of Contribution (\$)	\$25.00
	Principal occu Doctor	oation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 10/17/2025	Full name of contributor out-of-state P 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	5)		
			•				

	MONET	ARY POLITICAL CONTRIBUTIO	ONS		SCHEDULE A1
	The Instruc	etion Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 32/64 Rpt: 35/72
2	FILER NAME Border Healt	n PAC		3	Filer ID (Ethics Commission Filers) 00055547
4	Date 10/17/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$) \$1,000.00
8	Principal occu	Manchaca, TX 78652 pation / Job title (See Instructions)	9 Employer (See Instructions	;) 	
•	private inves			,	
	Date 10/17/2025	Contributor address; City; State; Zip Code	)		Amount of Contribution (\$) \$5.00
	Principal occu	McAllen, TX 78501 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ;)	
	private inves		, . <b>,</b> . (	,	
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#:_Loggiodice, Nelson (Mr.)  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$) \$30.00
		Pharr, TX 78577			
	Principal occu private inves	pation / Job title (See Instructions)	Employer (See Instructions	5)	
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#:_Loja, Wilmer (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78503	)		Amount of Contribution (\$) \$100.00
	Principal occu Dr.	oation / Job title (See Instructions)	Employer (See Instructions	5)	
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#:_Lopez, Jose (Dr.)  Contributor address; City; State; Zip Code  Palmhurst, TX 78573			Amount of Contribution (\$) \$56.11
	Principal occu doctor	oation / 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: 33/64 Rpt: 36/72	
2	FILER NAME Border Healt	n PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 10/17/2025	Lopez, Pamela (Ms.)  6 Contributor address; City; State; Zip C	state PAC (ID#:)  ode	7	Amount of Contribution (\$)	\$25.00
8	Principal occu	Pharr, TX 78577 pation / Job title (See Instructions)	9 Employer (See Instruction	ons)		
•	private inves			,		
	Date 10/17/2025	Lopez Jr., Alfredo (Dr.)  Contributor address; City; State; Zip C	state PAC (ID#:)  ode		Amount of Contribution (\$)	\$100.00
	Principal occu	McAllen, TX 78504 pation / Job title (See Instructions)	Employer (See Instruction	ons)		
	Dr	,		,		
	Date 10/17/2025	Full name of contributor out-of- Lozano, Rodolfo (Dr.)  Contributor address; City; State; Zip C	state PAC (ID#:) ode		Amount of Contribution (\$)	\$1,000.00
		Mission, TX 78574				
	Principal occu Dr.	pation / Job title (See Instructions)	Employer (See Instruction	ons)		
	Date 10/17/2025	Lozano, Sergio (Mr.)	state PAC (ID#:) ode		Amount of Contribution (\$)	\$25.00
	Principal occu private inves	oation / Job title (See Instructions) tor	Employer (See Instruction	ons)		
	Date 10/17/2025	Full name of contributor out-of- Mabulac, Deborah (Ms.)  Contributor address; City; State; Zip C	state PAC (ID#:)  ode		Amount of Contribution (\$)	\$19.12
	Principal occu private inves	oation / Job title (See Instructions) tor	Employer (See Instruction	ons)		
			·			

	MONEI	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	E A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 34/64 Rpt: 37/72	
2	FILER NAME	L DAG		3	Filer ID (Ethics Commission	on Filers)
	Border Healt				00055547	
4	Date 10/17/2025	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$10.00
		McAllen, TX 78504				
8	Principal occu private inves	pation / Job title (See Instructions) tor	9 Employer (See Instructions	5)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#: Mangi, Salil (Dr.)  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Dringinal occu	McAllen, TX 78504	Employer (See Instructions	·/		
	Dr.	pation / Job title (See Instructions)	Employer (See Instructions	•)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#: Mangoo-Karim, Robert (Dr.)  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$125.00
		McAllen, TX 78503				
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#: Manoharan, Paulrajan (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	s)		
	Date 10/17/2025	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	5)		

	MONEI	ARY POLITICAL (	CONTRIBUTIO	DNS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how	to complete this f	orm.	1	Total pages Schedule A1: Sch: 35/64 Rpt: 38/72	
2	FILER NAME Border Healt	h PAC			3	Filer ID (Ethics Commission 00055547	n Filers)
_			<u> </u>		Ļ		
4	Date 10/17/2025	<ul><li>5 Full name of contributor Marichalar, Luis (Mr.)</li><li>6 Contributor address; City; St</li></ul>	out-of-state PAC (ID#:_	)	' 	Amount of Contribution (\$)	\$250.00
Ω	Principal occu	McAllen, TX 78504 pation / Job title (See Instructions	<u> </u>	9 Employer (See Instructions			
0	Private Inves		7)	3 Employer (See mstructions	·)		
			<u> </u>		_		
	Date	Full name of contributor	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	<b>#100.00</b>
	10/17/2025	Marina, Jose Mario (Dr.)					\$100.00
		Contributor address; City; St	ate; Zip Code				
		Mission, TX 78573					
	Principal occu	pation / Job title (See Instructions	)	Employer (See Instructions	5)		
	physician						
	Date	Full name of contributor	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	10/17/2025	Marquez, Luis A. (Mr.)	_				\$5.00
		Contributor address; City; St	ate; Zip Code		l		
		,	, ,				
		Harlingen, TX 78552					
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	5)		
	private inves	tor					
	Date	Full name of contributor	out-of-state PAC (ID#:_	)	Π	Amount of Contribution (\$)	
	10/17/2025	Martinez, Ricardo (Dr.)	out of outle 1710 (12			(+)	\$250.00
	10/11/12010	Contributor address; City; St	ato: Zin Codo				4200.00
		Continuator address, City, Si	ate, Zip Code				
		Edinburg, TX 78539					
	Principal occu	pation / Job title (See Instructions	3)	Employer (See Instructions	<u> </u>		
	Doctor	`	,	Self-employed	,		
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Г	Amount of Contribution (\$)	
	10/17/2025	Mata, Nelson (Dr.)	Uni-oi-state PAC (ID#			Amount of Contribution (4)	\$250.00
	10/11/2023				ļ		Ψ230.00
		Contributor address; City; St	ate; Zip Code				
		McAllen, TX 78501					
	Principal occu	pation / Job title (See Instructions	.)	Employer (See Instructions	:) 		
	Dr.	panon / Job tille (See IIISHUCHONS	7)	Employer (See Instructions	"		
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	MONET	ARY POLITICAL CONTRIBU	UTIONS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete	this form.	1	Total pages Schedule A1: Sch: 36/64 Rpt: 39/72	
2	FILER NAME Border Healt	n PAC		3	Filer ID (Ethics Commissio 00055547	n Filers)
4	Date 10/17/2025	<ul> <li>Full name of contributor  out-of-state PAG Mathavan, Rajeen (Dr.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$38.24
		McAllen, TX 78504				
8	Principal occu Physician	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 10/17/2025	Full name of contributor out-of-state PAG McNutt, Kimberly (Ms.)  Contributor address; City; State; Zip Code  McAllen, TX 78504	AC (ID#:)		Amount of Contribution (\$)	\$25.00
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	private inves			_		
	Date 10/17/2025	Full name of contributor out-of-state PAG Medina, Bertha (Dr.)  Contributor address; City; State; Zip Code	AC (ID#:)		Amount of Contribution (\$)	\$1,000.00
		McAllen, TX 78501				
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 10/17/2025	Full name of contributor out-of-state PAG Medina, Javier (Dr.)  Contributor address; City; State; Zip Code  Mission, TX 78574	AC (ID#:)		Amount of Contribution (\$)	\$250.00
	Principal occu M.D.	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 10/17/2025	Full name of contributor out-of-state PAG Medina, Lorena (Ms.)  Contributor address; City; State; Zip Code  Edinburg, TX 78539	AC (ID#:)		Amount of Contribution (\$)	\$5.00
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	s)		

	MONEI	ARY POLITICAL (	CONTRIBUTION	DNS		SCHEDUI	E A1
	The Instruc	ction Guide explains how	to complete this f	orm.	1	Total pages Schedule A1: Sch: 37/64 Rpt: 40/72	
2	FILER NAME	h DAC			3	Filer ID (Ethics Commission	on Filers)
	Border Healt		_			00055547	
4	Date 10/17/2025	<ul> <li>5 Full name of contributor</li> <li>Medina, Martha Carmen (</li> <li>6 Contributor address; City; S</li> </ul>		)	7	Amount of Contribution (\$)	\$100.00
		McAllen, TX 78504					
8	Principal occu private inves	pation / Job title (See Instructions tor	3)	9 Employer (See Instructions	5)		
					_	Amount of Contribution (Φ)	
	Date	Full name of contributor	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	ф1 000 00
	10/17/2025	Mego, Carlos (Dr.)  Contributor address; City; S	tate; Zip Code				\$1,000.00
		McAllen, TX 78501					
	Principal occu Doctor	pation / Job title (See Instructions	s)	Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:_	)	Г	Amount of Contribution (\$)	
	10/17/2025	Mendez, Oscar (Dr.)	out of state 1 Ac (IDH			randant of Contribution (¢)	\$187.04
		Contributor address; City; S	tate; Zip Code				
		Mission, TX 78572					
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	5)		
	physician						
	Date	Full name of contributor	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	10/17/2025	Mendez, Salvador (Dr.)  Contributor address; City; S	tate; Zip Code				\$250.00
		McAllen, TX 78503					
	Principal occu Dr.	pation / Job title (See Instructions	s)	Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	10/17/2025	Mercado, Manuel (Dr.)	_				\$250.00
		Contributor address; City; S	ate; Zip Code				
		McAllen, TX 78504					
	Principal occu Dr.	pation / Job title (See Instructions	s)	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: 38/64 Rpt: 41/72	
2	FILER NAME Border Healt	n PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 10/17/2025	<ul> <li>Full name of contributor</li></ul>	_	7	Amount of Contribution (\$)	\$35.00
8	Principal occur	Mission, TX 78572 pation / Job title (See Instructions)	9 Employer (See Instructions	<u>)</u>		
•	private inves			,		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#:_Milano, Emil (Dr.)  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Delicalization	McAllen, TX 78504	Frankrije (Ozakastina)	_		
	Doctor	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#:_ Milov, Simon (Dr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
		Harlingen, TX 78552				
	Principal occu physician	oation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#:_Mirmohammadi, Rowena (Ms.)  Contributor address; City; State; Zip Code  McAllen, TX 78504	)		Amount of Contribution (\$)	\$250.00
	Principal occu private inves	oation / Job title (See Instructions) tor	Employer (See Instructions	)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#:_Mitchell, Jo Ann (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78502			Amount of Contribution (\$)	\$9.35
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUT	TONS		SCHEDU	LE <b>A1</b>
	The Instruc	ction Guide explains how to complete thi	is form.	1	Total pages Schedule A1: Sch: 39/64 Rpt: 42/72	
2	FILER NAME Border Healt	n PAC		3	Filer ID (Ethics Commission 00055547	on Filers)
4	Date 10/17/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$50.00
_		McAllen, TX 78504		<u> </u>		
8	Principal occur Doctor	pation / Job title (See Instructions)	9 Employer (See Instructions	ıs)		
	Date 10/17/2025	Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$250.00
		McAllen, TX 78504 pation / Job title (See Instructions)	Employer (See Instructions	ns)		
	Doctor			_		
	Date 10/17/2025	Full name of contributor out-of-state PAC (I Montes, Jorge A. (Dr.)  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00
		Edinburg, TX 78539				
	Principal occu Doctor	oation / Job title (See Instructions)	Employer (See Instructions	ns)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (I Montes, Laura (Dr.)  Contributor address; City; State; Zip Code  Edinburg, TX 78539	D#:)		Amount of Contribution (\$)	\$25.00
	Principal occu Doctor	oation / Job title (See Instructions)	Employer (See Instructions	ns)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (I Morales, Carlos E (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78503	D#:)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	ns)		
			•			

	MONET	ARY POLITICAL CONTRIBUT	IONS		SCHEDUL	E <b>A1</b>
	The Instruc	tion Guide explains how to complete thi	s form.	1	Total pages Schedule A1: Sch: 40/64 Rpt: 43/72	
2	FILER NAME Border Healt	1 PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 10/17/2025	<ul> <li>Full name of contributor  out-of-state PAC (ID Moreno, Juan (Mr.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$15.00
8	Principal occu	Alton, TX 78574  Dation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u> s)		
	private inves	or				
	Date 10/17/2025	Full name of contributor  out-of-state PAC (III  Moreno, Leonel (Dr.)  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$250.00
		Mission, TX 78503				
	Principal occu <sub>l</sub> Doctor	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (IE Mulukutla, Surya Narayan (Dr.)  Contributor address; City; State; Zip Code	)#: <u> </u>		Amount of Contribution (\$)	\$50.00
		Edinburg, TX 78539				
	Principal occu physician	oation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (III Munoz, Roberto (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78504	D#:)		Amount of Contribution (\$)	\$112.22
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (IE Nagaraj, Namitha (Dr.)  Contributor address; City; State; Zip Code  Mission, TX 78572	) #:)		Amount of Contribution (\$)	\$25.00
	Principal occup	oation / Job title (See Instructions)	Employer (See Instructions	s)		
			- 1			

	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: 41/64 Rpt: 44/72	
2	FILER NAME Border Healt	1 PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 10/17/2025	<ul> <li>Full name of contributor  out-of-state PAC (ID#: Nunez, Zoraly (Ms.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$275.00
8	Principal occu	McAllen, TX 78503 pation / Job title (See Instructions)	9 Employer (See Instructions	<u></u>		
•	private inves			-,		
	Date 10/17/2025	Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$7.48
	Principal occu	Edinburg, TX 78539  pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	private inves	or				
	Date 10/17/2025	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	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 10/17/2025	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	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#: Ohabor, Chioma (Ms.)  Contributor address; City; State; Zip Code  McAllen, TX 78504		•	Amount of Contribution (\$)	\$50.00
	Principal occu Private Inves	oation / Job title (See Instructions) tor	Employer (See Instructions	<u>.</u> S)		

	MONET	ARY POLITICAL C	ONTRIBUTIO	NS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 42/64 Rpt: 45/72	
2	FILER NAME Border Healt	h PAC			3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 10/17/2025	<ul><li>5 Full name of contributor</li><li>Ohabor, Constantine (Ms.)</li><li>6 Contributor address; City; Sta</li></ul>			7	Amount of Contribution (\$)	\$10.00
8	Principal occur	McAllen, TX 78504 pation / Job title (See Instructions)	, le	9 Employer (See Instructions	;) 		
Ŭ	Private Inves			2 Employer (See Mondellons	,,		
	Date 10/17/2025	Full name of contributor Olgin, Gaudencio (Dr.) Contributor address; City; Sta			•	Amount of Contribution (\$)	\$125.00
		Edinburg, TX 78539					
	Principal occup physician	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Date 10/17/2025	Full name of contributor Oliveira, Noel E (Dr.) Contributor address; City; Sta	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$250.00
		Mission, TX 78572					
	Principal occup Doctor	oation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 10/17/2025	Full name of contributor Orfanos, John (Dr.) Contributor address; City; Sta		)		Amount of Contribution (\$)	\$400.00
	Principal occup Doctor	pation / Job title (See Instructions)	i .	Employer (See Instructions	5)		
	Date 10/17/2025	Full name of contributor Orozco, Jorge (Mr.) Contributor address; City; Sta	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$5.00
	Principal occup	pation / Job title (See Instructions)		Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTRIBU	JTIONS	SCHEDULE A1
	The Instru	ction Guide explains how to complete t	this form.	1 Total pages Schedule A1: Sch: 43/64 Rpt: 46/72
2	FILER NAME Border Healt	n PAC		3 Filer ID (Ethics Commission Filers) 00055547
4	Date 10/17/2025	<ul> <li>Full name of contributor  out-of-state PAC Otero, Fernando (Dr.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7 Amount of Contribution (\$) \$1,000.00
	Dringing ogg	mcallen, TX 78502	Employer (See Instruction	
8	Doctor	pation / Job title (See Instructions)	9 Employer (See Instructions	5)
	Date 10/17/2025	Contributor address; City; State; Zip Code	C (ID#:)	Amount of Contribution (\$) \$100.00
	Principal occu	Mission, TX 78572 Dation / Job title (See Instructions)	Employer (See Instructions	s)
	Doctor			
	Date 10/17/2025	Full name of contributor out-of-state PAC Ozuna, Ronnie (Mr.)  Contributor address; City; State; Zip Code	C (ID#:)	Amount of Contribution (\$) \$9.57
		McAllen, TX 78504		
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	s)
	Date 10/17/2025	Full name of contributor out-of-state PAG Padilla, Maritza (Ms.)  Contributor address; City; State; Zip Code  Weslaco, TX 78599	C (ID#:)	Amount of Contribution (\$) \$74.81
	Principal occu private inves	oation / Job title (See Instructions) tor	Employer (See Instructions	s)
	Date 10/17/2025	Full name of contributor out-of-state PAC Palacios, Esteban (Mr.)  Contributor address; City; State; Zip Code  Edinburg, TX 78540	C (ID#:)	Amount of Contribution (\$) \$50.00
	Principal occu private inves	oation / Job title (See Instructions) tor	Employer (See Instructions	5)
			•	

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 44/64 Rpt: 47/72	
2	FILER NAME Border Healt	n PAC		3	Filer ID (Ethics Commission 00055547	on Filers)
4	Date 10/17/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$75.00
_		Edinburg, TX 78539				
8	Principal occu Physician	pation / Job title (See Instructions)	9 Employer (See Instructions	;)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#: Palimar, P (Dr.)  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
		McAllen, TX 78504	5 1 (0 1 : "	Ĺ		
	Dr.	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 10/17/2025	Full name of contributor  out-of-state PAC (ID#: Pechero, Guillermo (Dr.)  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
		McAllen, TX 78504				
	Principal occu Dr.	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 10/17/2025	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	)		
	Date 10/17/2025	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 private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUT	TONS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this	is form.	1	Total pages Schedule A1: Sch: 45/64 Rpt: 48/72	
2	FILER NAME Border Healt	n PAC		3	Filer ID (Ethics Commissio 00055547	n Filers)
4	Date 10/17/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$5.00
•	Dringinal occu	Mission, TX 78574	Employer (See Instruction	c)		
8	private inves	pation / Job title (See Instructions) tor	9 Employer (See Instructions	5)		
	Date 10/17/2025	Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$5.00
	Principal occu	Edinburg, TX 78539  pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Private Inves	tor				
	Date 10/17/2025	Full name of contributor	D#:)		Amount of Contribution (\$)	\$200.00
		McAllen, TX 78502-5360				
	Principal occu private busin	pation / Job title (See Instructions) ess owner	Employer (See Instructions	s)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (IE Perez, Florencia  Contributor address; City; State; Zip Code  McAllen, TX 78503	D#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Doctor	oation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (IE Perez, Francisco (Dr.)  Contributor address; City; State; Zip Code  Edinburg, TX 78539	D#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Doctor	oation / Job title (See Instructions)	Employer (See Instructions	s)		
			•			

	MONEI	ARY POLITICAL CONTRIBU	UTIONS	SCHEDULE A1
	The Instruc	ction Guide explains how to complete	this form.	1 Total pages Schedule A1: Sch: 46/64 Rpt: 49/72
2	FILER NAME Border Healt	h PAC		3 Filer ID (Ethics Commission Filers) 00055547
4	Date 10/17/2025	<ul> <li>Full name of contributor  out-of-state PA Perez, Guillermo (Dr.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>	AC (ID#:)	7 Amount of Contribution (\$) \$1,000.00
8	Principal occu Doctor	McAllen, TX 78501 pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u> 
	Date 10/17/2025	Full name of contributor out-of-state PA Perez, Nina (Ms.)  Contributor address; City; State; Zip Code  Edinburg, TX 78539	AC (ID#:)	Amount of Contribution (\$) \$10.00
	Principal occu private inves	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 
	Date 10/17/2025	Full name of contributor out-of-state PA Peynado, Herrietta (Ms.)  Contributor address; City; State; Zip Code	AC (ID#:)	Amount of Contribution (\$) \$28.68
	•	Mercedes, TX 78570 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ;)
	Date 10/17/2025	Full name of contributor out-of-state PA Pierre-Louise, Michael (Dr.)  Contributor address; City; State; Zip Code  Mission, TX 78572	AC (ID#:)	Amount of Contribution (\$) \$50.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions Self-employed	s)
	Date 10/17/2025	Full name of contributor out-of-state PA Pillai, Revi (Mr.)  Contributor address; City; State; Zip Code  McAllen, TX 78504	AC (ID#:)	Amount of Contribution (\$) \$9.56
	Principal occu private inves	pation / Job title (See Instructions) tor	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: 47/64 Rpt: 50/72	
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 10/17/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$50.00
_	Deinainal assu	McAllen, TX 78504	O Franks on (Cas Instructions	_		
8	Doctor	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 10/17/2025	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	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	private inves	tor				
	Date 10/17/2025	Full name of contributor	)		Amount of Contribution (\$)	\$5.00
		McAllen, TX 78504				
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	i)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#:_Rafols, Rafael (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78503	)		Amount of Contribution (\$)	\$25.00
		oation / Job title (See Instructions) If-employeed	Employer (See Instructions	()		
	Date 10/17/2025	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	()		

	MONET	ARY POLITICAL CONTRIBUT	TONS		SCHEDUL	E <b>A1</b>
	The Instruc	tion Guide explains how to complete thi	is form.	1	Total pages Schedule A1: Sch: 48/64 Rpt: 51/72	
2	FILER NAME Border Healt	n PAC		3	Filer ID (Ethics Commissio 00055547	n Filers)
4	Date 10/17/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$15.00
8	Principal occur	McAllen, TX 78504 pation / Job title (See Instructions)	9 Employer (See Instruction:	) 		
0	private busin		employer (See instructions	15)		
	Date 10/17/2025	Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$5.00
	Principal occur	McAllen, TX 78503 pation / Job title (See Instructions)	Employer (See Instruction:	) 		
	private inves		Employer (See instructions	13)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (II Reddy, Vangala J (Dr.)  Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$200.00
		McAllen, TX 78504				
	Principal occu Doctor	oation / Job title (See Instructions)	Employer (See Instruction:	ıs)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (I Rios, Adriana (Ms.)  Contributor address; City; State; Zip Code  Weslaco, TX 78599	D#:)		Amount of Contribution (\$)	\$10.00
	Principal occu private inves	oation / Job title (See Instructions) or	Employer (See Instruction	ıs)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (II Rios Jr, Jesus (Mr.)  Contributor address; City; State; Zip Code  McAllen, TX 78504	D#:)		Amount of Contribution (\$)	\$250.00
	Principal occu private inves	oation / Job title (See Instructions) or	Employer (See Instruction	ıs)		
			•			

	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: 49/64 Rpt: 52/72	
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commissio 00055547	n Filers)
4	Date 10/17/2025	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_Rivera, Jaime (Ms.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$3.32
8	Principal occu	Edinburg, TX 78539  pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	private inves		py (	,		
	Date 10/17/2025	Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$10.00
	Principal occu	Edinburg, TX 78539  pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	private inves	·	, . , . (	,		
	Date 10/17/2025	Full name of contributor  out-of-state PAC (ID#:_ Robalino, Benjamin (Dr.)  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$350.00
		McAllen, TX 78504				
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 10/17/2025	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	)		
	Date 10/17/2025	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	pation / Job title (See Instructions)	Employer (See Instructions	)		
		·				

	MONEI	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 50/64 Rpt: 53/72	
2	FILER NAME			3	Filer ID (Ethics Commission	on Filers)
	Border Healt				00055547	
4	Date 10/17/2025	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$1,000.00
Ω	Principal occu	Mcallen, TX 78504 pation / Job title (See Instructions)	9 Employer (See Instructions	6)		
0	Doctor	Dalion / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 10/17/2025	Full name of contributor			Amount of Contribution (\$)	\$18.75
		McAllen, TX 78504	1			
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#: Rodriguez-Ayala, Heriberto (Dr.)  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$56.11
		McAllen, TX 78502				
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 10/17/2025	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 (\$)	\$429.43
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#: Ruiz, Henry (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	s)		

	MONEI	ARY POLITICAL CO	NIRIBUIIO	INS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to	complete this fo	orm.	1	Total pages Schedule A1: Sch: 51/64 Rpt: 54/72	
2	FILER NAME Border Healt	n PAC			3	Filer ID (Ethics Commission 00055547	on Filers)
_			•		_		
4	Date 10/17/2025	<ul><li>Full name of contributor Ruiz, Rosalva (Ms.)</li><li>Contributor address; City; State</li></ul>	out-of-state PAC (ID#: ; Zip Code	)	7	Amount of Contribution (\$)	\$10.00
		Pharr, TX 78577	1				
8	private inves	pation / Job title (See Instructions) tor		9 Employer (See Instructions	)		
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	10/17/2025	Saenz, Elvia (Ms.)		,		, ,	\$1,000.00
		Contributor address; City; State	; Zip Code				,
		Mcallen, TX 78504					
		pation / Job title (See Instructions)		Employer (See Instructions	)		
	private busin	ess owner					
	Date	Full name of contributor	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	10/17/2025	Saenz, J.J (Dr.)					\$1,000.00
		Contributor address; City; State	; Zip Code				
		McAllen, TX 78503					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
	Doctor						
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	10/17/2025	Saenz, Javier (Dr.)	_	·		<b>(·</b> ,	\$1,000.00
		Contributor address; City; State	; Zip Code				,
		Mission, TX 78572					
	Principal occu Doctor	pation / Job title (See Instructions)		Employer (See Instructions	)		
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	10/17/2025	Saenz, Jennifer (Ms.)	out-of-state 1 AC (ID#	······································		γιποαπι οι Contribution (φ)	\$25.00
	10/11/12010	Contributor address; City; State					420.00
		Communication address, City, State	, zip couc				
		McAllen, TX 78504		<u> </u>			
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
	private inves	tor					
			'				

	MONET	ARY POLITICAL CONTRIBU	JTIONS		SCHEDUL	E <b>A1</b>
	The Instru	etion Guide explains how to complete t	this form.	1	Total pages Schedule A1: Sch: 52/64 Rpt: 55/72	
2	FILER NAME Border Healt	n PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 10/17/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$25.00
_	Dringing agg	Mcallen, TX 78502	O Employer (Con Instructions			
8	Private inves	pation / Job title (See Instructions) tor	9 Employer (See Instructions	S)		
	Date 10/17/2025	Contributor address; City; State; Zip Code	C (ID#:)		Amount of Contribution (\$)	\$10.00
	Principal occu	Edinburg, TX 78541 pation / Job title (See Instructions)	Employer (See Instructions	s)		
	private inves					
	Date 10/17/2025	Full name of contributor out-of-state PAC Saffels, Nathan (Mr.)  Contributor address; City; State; Zip Code	C (ID#:)		Amount of Contribution (\$)	\$10.00
		McAllen, TX 78504				
	Principal occu private inves	pation / Job title (See Instructions) For	Employer (See Instructions	s)		
	Date 10/17/2025	Full name of contributor out-of-state PAC Safir, Larry (Mr.) Contributor address; City; State; Zip Code Mcallen, TX 78503	C (ID#:)		Amount of Contribution (\$)	\$250.00
	Principal occu private inves	oation / Job title (See Instructions) cor	Employer (See Instructions	s)		
	Date 10/17/2025	Full name of contributor out-of-state PAC Saladino, Nicole (Ms.)  Contributor address; City; State; Zip Code  Mission, TX 78572	C (ID#:)		Amount of Contribution (\$)	\$5.00
	Principal occu private inves	oation / Job title (See Instructions) cor	Employer (See Instructions	s)		
			1			

	MONEI	ARY POLITICAL (	CONTRIBUTION	)NS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how	to complete this f	orm.	1	Total pages Schedule A1: Sch: 53/64 Rpt: 56/72	
2	FILER NAME Border Healt	h PAC			3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 10/17/2025	<ul><li>5 Full name of contributor Saldivar, Aida (Ms.)</li><li>6 Contributor address; City; St</li></ul>	out-of-state PAC (ID#:_		7	Amount of Contribution (\$)	\$10.00
8	Principal occu private inves	McAllen, TX 78504 pation / Job title (See Instructions	s)	9 Employer (See Instructions	<u> </u> ;)		
	Date 10/17/2025	Full name of contributor Salinas, Annabelle (Ms.) Contributor address; City; S McAllen, TX 78501	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$5.00
	Principal occu private inves	pation / Job title (See Instructions	s)	Employer (See Instructions	<u> </u> 5)		
	Date 10/17/2025	Full name of contributor Salinas, Mariano (Dr.) Contributor address; City; S	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	\$150.00
	·	Mission, TX 78572 pation / Job title (See Instructions	s)	Employer (See Instructions	s)		
	Date 10/17/2025	Full name of contributor Salinas, Miguel A. (Mr.) Contributor address; City; S McAllen, TX 78503	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$10.00
	Principal occu private inves	pation / Job title (See Instructions tor	5)	Employer (See Instructions	5)		
	Date 10/17/2025	Full name of contributor Salinas, Samuel (Mr.) Contributor address; City; S Mission, TX 78572	out-of-state PAC (ID#:_ate; Zip Code			Amount of Contribution (\$)	\$10.00
	Principal occu private inves	pation / Job title (See Instructions tor	s)	Employer (See Instructions	5)		

	MONEI	ARY POLITICAL CONTRIBU	UTIONS	SCHEDULE A1
	The Instruc	ction Guide explains how to complete	this form.	1 Total pages Schedule A1: Sch: 54/64 Rpt: 57/72
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Border Healt			00055547
4	Date 10/17/2025	<ul> <li>Full name of contributor</li></ul>	AC (ID#:)	7 Amount of Contribution (\$) \$125.00
		Mission, TX 78572		
8	Principal occu doctor	oation / Job title (See Instructions)	9 Employer (See Instructions	5)
	Date 10/17/2025	Full name of contributor out-of-state PA Sanchez, Richard (Dr.)  Contributor address; City; State; Zip Code	AC (ID#:)	Amount of Contribution (\$) \$149.63
		McAllen, TX 78504		
	Principal occu doctor	pation / Job title (See Instructions)	Employer (See Instructions	s)
	Date 10/17/2025	Full name of contributor out-of-state PA Sandoval, Gilberto (Mr.)  Contributor address; City; State; Zip Code	AC (ID#:)	Amount of Contribution (\$) \$10.00
		Brownsville, TX 78520		
	Principal occu private inves	oation / Job title (See Instructions) tor	Employer (See Instructions	;)
	Date 10/17/2025	Full name of contributor out-of-state PA Sandoval, Oscar (Mr.)  Contributor address; City; State; Zip Code  Edcouch, TX 78538	AC (ID#:)	Amount of Contribution (\$) \$25.00
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	;)
	Date 10/17/2025	Full name of contributor  out-of-state PA Sarmiento Cano, Juan P. Javier (Dr.)  Contributor address; City; State; Zip Code  McAllen, TX 78504	AC (ID#:)	Amount of Contribution (\$) \$50.00
	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: 55/64 Rpt: 58/72	
2	FILER NAME Border Healt	n PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 10/17/2025	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$250.00
8	Dringing aggr	McAllen, TX 78504	• Employer (See Instructions	_		
0	Doctor	pation / Job title (See Instructions)	9 Employer (See Instructions	')		
	Date 10/17/2025	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>		
	doctor	,	, . , · ( - · · · · · · · · · · · · · · · · ·	,		
	Date 10/17/2025	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				
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 10/17/2025	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	oation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 10/17/2025	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	oation / Job title (See Instructions)	Employer (See Instructions	()		
		,				

	MONET	ARY POLITICAL CONTRIBU	JTION	NS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete	this for	m.	1	Total pages Schedule A1: Sch: 56/64 Rpt: 59/72	
2	FILER NAME Border Healt	n PAC			3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 10/17/2025	<ul> <li>Full name of contributor  out-of-state PA  Sifuentes, Pamela (Ms.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>	-		7	Amount of Contribution (\$)	\$15.00
8	Principal occur	Weslaco, TX 78596 pation / Job title (See Instructions)	l <sub>o</sub>	Employer (See Instructions	·/		
0	private inves		9	Employer (See Instructions	·)		
	Date 10/17/2025	Full name of contributor out-of-state PA Singh, Manish (Dr.)  Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$250.00
		McAllen, TX 78503			Ĺ		
	Principal occur Doctor	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 10/17/2025	Full name of contributor out-of-state PA Solis, Hilda (Ms.)  Contributor address; City; State; Zip Code	C (ID#:	)		Amount of Contribution (\$)	\$25.00
		McAllen, TX 78501					
	Principal occu private inves	pation / Job title (See Instructions) tor		Employer (See Instructions	5)		
	Date 10/17/2025	Full name of contributor out-of-state PA Soto, Hector (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 10/17/2025	Full name of contributor out-of-state PA Sustaita, Raul (Mr.)  Contributor address; City; State; Zip Code  Donna, TX 78537				Amount of Contribution (\$)	\$25.00
	Principal occu private inves	pation / Job title (See Instructions) tor		Employer (See Instructions	5)		
			l				

	MONET	ARY POLITICAL CONTRIBU	TIONS	so	CHEDULE A1
	The Instruc	ction Guide explains how to complete th	nis form.	1 Total pages Sched Sch: 57/64 Rpt:	
2	FILER NAME Border Healt	h PAC		3 Filer ID (Ethics C 00055547	Commission Filers)
4	Date 10/17/2025	<ul> <li>Full name of contributor</li></ul>		7 Amount of Contribu	ution (\$) \$100.00
_		McAllen, TX 78504	- I		
8	Principal occu Doctor	pation / Job title (See Instructions)	9 Employer (See Instructions	ns)	
	Date 10/17/2025	Full name of contributor out-of-state PAC ( Tamez, Daniel (Mr.)  Contributor address; City; State; Zip Code  Alton, TX 78573	(ID#:)	Amount of Contribu	s3.82
	Principal occu private inves	pation / Job title (See Instructions)	Employer (See Instructions	ns)	
	Date 10/17/2025	Full name of contributor out-of-state PAC ( Tey, Alejandro (Dr.)  Contributor address; City; State; Zip Code	(ID#:)	Amount of Contribu	s250.00
	Principal occu M.D.	Edinburg, TX 78539 pation / Job title (See Instructions)	Employer (See Instructions	ns)	
	Date 10/17/2025	Full name of contributor out-of-state PAC ( Tharp, Maribel (Ms.)  Contributor address; City; State; Zip Code  Mission, TX 78572	(ID#:)	Amount of Contribu	ution (\$) \$15.00
	Principal occu private inves	pation / Job title (See Instructions)	Employer (See Instructions	ns)	
	Date 10/17/2025	Full name of contributor out-of-state PAC (Tijerina, Erica (Ms.)  Contributor address; City; State; Zip Code  Pharr, TX 78577	(ID#:)	Amount of Contribu	stion (\$) \$20.00
	Principal occu private inves	pation / Job title (See Instructions) tor	Employer (See Instructions	ns)	

	MONET	ARY POLITICAL CONTRIBUT	TIONS		SCHEDUL	E <b>A1</b>
	The Instruc	etion Guide explains how to complete th	nis form.	1	Total pages Schedule A1: Sch: 58/64 Rpt: 61/72	
2	FILER NAME Border Healt	n PAC		3	Filer ID (Ethics Commissio 00055547	n Filers)
4	Date 10/17/2025	<ul> <li>Full name of contributor  out-of-state PAC (         Tovar, Sandra (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			-,		
	Date 10/17/2025	Full name of contributor  out-of-state PAC ( Trejo, Jose (Mr.)  Contributor address; City; State; Zip Code	(ID#:)		Amount of Contribution (\$)	\$250.00
	D: : 1	McAllen, TX 78501		<u> </u>		
	private busin	pation / Job title (See Instructions) ess owner	Employer (See Instructions	S)		
	Date 10/17/2025	Full name of contributor out-of-state PAC ( Trevino, Ernesto  Contributor address; City; State; Zip Code	(ID#:)		Amount of Contribution (\$)	\$250.00
		McAllen, TX 78504				
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 10/17/2025	Full name of contributor out-of-state PAC ( Trevino, Kyara J. (Ms.)  Contributor address; City; State; Zip Code  La Joya, TX 78560	(ID#:)		Amount of Contribution (\$)	\$5.00
	Principal occup	oation / Job title (See Instructions) cor	Employer (See Instructions	s)		
	Date 10/17/2025	Full name of contributor out-of-state PAC ( Turley, Susan (Mrs.)  Contributor address; City; State; Zip Code  McAllen, TX 78504	(ID#:)		Amount of Contribution (\$)	\$250.00
	Principal occup	oation / Job title (See Instructions) ess owner	Employer (See Instructions	s)		
			I			

	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: 59/64 Rpt: 62/72	
2	FILER NAME Border Healt	h PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 10/17/2025	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$250.00
_		Mission, TX 78572				
8	Principal occur Doctor	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#: Uribe, Lourdes (Dr.)  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
	Principal occur	McAllen, TX 78504 pation / Job title (See Instructions)	Employer (See Instructions			
	Doctor	odion, oop the (eee mandelons)	Employer (dee mandenoria	,		
	Date 10/17/2025	Full name of contributor  out-of-state PAC (ID#: Valladares, Teresa (Dr.)  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$100.00
		Mission, TX 78572				
	Principal occu M.D	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 10/17/2025	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	)		
	Date 10/17/2025	Full name of contributor  out-of-state PAC (ID#:			Amount of Contribution (\$)	\$25.00
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions	)		

	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: 60/64 Rpt: 63/72	
2	FILER NAME Border Healt	n PAC		3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 10/17/2025	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$38.24
_	Deireciand	Edinburg, TX 78539	O Faralassa (Os a la structiona	Ĺ		
8	private inves		9 Employer (See Instructions	5)		
	Date 10/17/2025	Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$250.00
	Principal occur	McAllen, TX 78503 pation / Job title (See Instructions)	Employer (See Instructions	) 		
	Doctor	pation / 305 title (See manuctions)	Employer (See instructions	')		
	Date 10/17/2025	Full name of contributor  uut-of-state PAC (ID#:_Vela, Oscar Rene (Mr.)  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$10.00
		Edinburg, TX 78539				
	Principal occup	pation / Job title (See Instructions) tor	Employer (See Instructions	5)		
	Date 10/17/2025	Full name of contributor out-of-state PAC (ID#: Vela, Susana (Ms.)  Contributor address; City; State; Zip Code  Mission, TX 78572	)		Amount of Contribution (\$)	\$10.00
	Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 10/17/2025	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 occup	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONEI	ARY POLITICAL (	CONTRIBUTIO	)NS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how	to complete this f	orm.	1	Total pages Schedule A1: Sch: 61/64 Rpt: 64/72	
2	FILER NAME	h DAC			3	Filer ID (Ethics Commissio	n Filers)
	Border Healt				L	00055547	
4	Date 10/17/2025			7	Amount of Contribution (\$)	\$10.00	
		Raymondville, TX 78580					
8	Principal occu private inves	pation / Job title (See Instructions	)	9 Employer (See Instructions	5)		
					_		
	Date	Full name of contributor	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	<b>#</b> 4.00.00
	10/17/2025	Vera, Eloy (Mr.)					\$100.00
		Contributor address; City; St	ate; Zip Code				
		rio Grande City, TX 78582	2				
		pation / Job title (See Instructions	)	Employer (See Instructions	s)		
	private inves	tor					
	Date	Full name of contributor	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	10/17/2025 Villarreal, Rose Maria (Ms.)				\$250.00		
		Contributor address; City; St	ate; Zip Code				
		McAllen, TX 78504					
	Principal occu	pation / Job title (See Instructions	)	Employer (See Instructions	5)		
	private inves	tor					
	Date	Full name of contributor	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	10/17/2025 Villarreal, Victor (Dr.)  Contributor address; City; State; Zip Code					\$90.00	
		Pharr, TX 78577					
	Principal occu Doctor	pation / Job title (See Instructions	)	Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:_			Amount of Contribution (\$)	
	10/17/2025	Villegas, Gustavo (Mr.)					\$112.22
		Contributor address; City; St	ate; Zip Code				
		Edinburg, TX 78539					
	Principal occu private inves	pation / Job title (See Instructions tor	)	Employer (See Instructions	s)		

	MONET	ARY POLITICAL CON	TRIBUTION	IS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to co	mplete this for	m.	1	Total pages Schedule A1: Sch: 62/64 Rpt: 65/72	
2	FILER NAME Border Healt	h PAC			3	Filer ID (Ethics Commission 00055547	on Filers)
4	Date 10/17/2025	<ul> <li>Full name of contributor  out- Villescas III, Gavino M. (Mr.)</li> <li>Contributor address; City; State; Zip</li> </ul>		)	7	Amount of Contribution (\$)	\$56.11
_		San Juan, TX 78589					
8	private inves	pation / Job title (See Instructions) tor	9	Employer (See Instructions	5)		
	Date 10/17/2025	Viswamitra, Saroje (Dr.)  Contributor address; City; State; Zip				Amount of Contribution (\$)	\$1,000.00
	Principal occu	McAllen, TX 78504 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Doctor	,			,		
	Date 10/17/2025	Full name of contributor out- Walker, Ray (Mr.)  Contributor address; City; State; Zip	of-state PAC (ID#:	)		Amount of Contribution (\$)	\$250.00
		McAllen, TX 78504					
	Principal occu private busin	pation / Job title (See Instructions) ess owner		Employer (See Instructions	i)		
	Date 10/17/2025	Wang, Ann (Dr.)		)		Amount of Contribution (\$)	\$10.00
	Principal occu Doctor	oation / Job title (See Instructions)		Employer (See Instructions	)		
	Date 10/17/2025	Wilson, Teresa (Dr.)	of-state PAC (ID#:			Amount of Contribution (\$)	\$50.00
	Principal occu Doctor	oation / Job title (See Instructions)		Employer (See Instructions	)		
			,				

	MONET	ARY POLITICAL CO	NTRIBUTION	S		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to	complete this for	n.	1	Total pages Schedule A1: Sch: 63/64 Rpt: 66/72	
2	FILER NAME Border Healt	n PAC			3	Filer ID (Ethics Commission 00055547	n Filers)
4	Date 10/17/2025	Woloski, Deborah (Ms.)  6 Contributor address; City; State;	out-of-state PAC (ID#: Zip Code		7	Amount of Contribution (\$)	\$20.00
8	Principal occu	Mission, TX 78572 pation / Job title (See Instructions)	9	Employer (See Instructions	<u> </u>		
	private inves				,		
	Date 10/17/2025	Wong, Antonio (Dr.)  Contributor address; City; State;		)		Amount of Contribution (\$)	\$250.00
	Principal occur	McAllen, TX 78504 pation / Job title (See Instructions)		Employer (See Instructions	<u>.</u>		
	Doctor	salon, oos alle (oos moladelens)		Employer (eee meadone)	,		
	Date 10/17/2025	Full name of contributor Yanez, Sandra (Ms.)  Contributor address; City; State;	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$25.00
		Alton, TX 78573					
	Principal occup	pation / Job title (See Instructions)		Employer (See Instructions	()		
	Date 10/24/2025	Full name of contributor Yarra, Subbarao (Dr.)  Contributor address; City; State; McAllen, TX 78504				Amount of Contribution (\$)	\$100.00
	Principal occu Doctor	oation / Job title (See Instructions)		Employer (See Instructions	()		
	Date 10/17/2025	Zamir, Asif (Dr.)	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$250.00
	Principal occup doctor	oation / Job title (See Instructions)		Employer (See Instructions	5)		
			·				

	MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
	The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 64/64 Rpt: 67/72
2	FILER NAME Border Health PAC	3 Filer ID (Ethics Commission Filers) 00055547
4	Date 10/17/2025  5 Full name of contributor out-of-state PAC (ID#:) Zamora, Maria Luisa (Ms.)  6 Contributor address; City; State; Zip Code	7 Amount of Contribution (\$) \$10.0
_	McAllen, TX 78504	
8	Principal occupation / Job title (See Instructions)  9 Employer (See Instruction private investor	ons)
	Date Full name of contributor out-of-state PAC (ID#:)  Zayed, Fuad (Dr.)  Contributor address; City; State; Zip Code  Alton, TX 78573	Amount of Contribution (\$)
	Principal occupation / Job title (See Instructions)  physician  Employer (See Instruction self-employed	ons)

## 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 Committee
Credit Card Payment

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

Credit Card Layment	The Instruction Guide explains how to comp	lete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 1/3 Rpt: 68/72	Border Health PAC	00055547
4 Date	5 Payee name	
10/14/2025	Bustos, Hector (Judge)	
6 Amount (\$)	7 Payee address; City; State; Zip Code P.O. Box 1079	
\$2,500.00	P.O. BOX 1079	
Expenditure from corporate funds	Edinburg, TX 78540	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Contributions/Donations Made By	Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE	Candidate/Officeholder/Political Committee	Check if Austin, TX, officeholder living expense
		CONTRIBUTION
9 Complete ONLY if direct	Candidate/Officeholder name Office sought	t Office held
expenditure to benefit C/OI	H Bustos, Hector (Judge)	City of Edinburg Municipal Court
Date	Payee name	
10/21/2025	Gonzalez, Rodulfo (Judge)	
Amount (\$)	Payee address; City; State; Zip Code	
\$5,000.00	100 N. Closner	
Expenditure from corporate funds	Edinburg, TX 78539	
PURPOSE OF	5 (con timegener more)	Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought  Gonzalez, Rodulfo (Judge)	t Office held Hidalgo County Court at Law #1
Data		Though County Court at Law #1
Date 10/21/2025	Payee name Hinojosa, Laura (Ms.)	
Amount (\$)	Payee address; City; State; Zip Code	
\$5,000.00	100 N. Closner	
Expenditure from corporate funds	Edinburg, TX 78539	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	) Description
OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Carialdate/Oniceriolde// Onited Committee	contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	
experientare to beliefit 5/5.	<sup>1</sup> Hinojosa, Laura (Ms.)	Hidalgo County District Clerk

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

#### SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Food/Beverage Expense Gift/Awards/Memorials Expe Legal Services	Polling I	Expens Expens			Travel in District Travel Out of Di		
	Credit Card Payment		The Instruction Guide	explains how to d	omple	ete this form.				
1	Total pages Schedule F1: Sch: 2/3 Rpt: 69/72	2 FILER NAMI Border Hea					3	Filer ID 00055547	(Ethics Commission	n Filers)
4	Date	5 Payee name					<u> </u>			
•	09/29/2025		me Jerry (Judge)							
-	Amount (\$)	<b>7</b> Payee addre		State; Zip C	`ode					
U	\$2,500.00		I Acres Suite D	State, Zip C	oue					
	Expenditure from corporate funds	Pharr, TX 7	'8577							
8	PURPOSE OF EXPENDITURE	Contributio	ee Categories listed at the top ns/Donations Made Officeholder/Politica	Ву	(b)	=		de of Texas. Com officeholder living	plete Schedule T. g expense	
9	Complete ONLY if direct expenditure to benefit C/Oh		iceholder name / (Judge)	Office so	ought			Office he Justice	eld of Peace Pct 2 P	ર્ગ 2
	Date	Payee name								
	09/30/2025	Pena, Jaso	n (Mr.)							
	Amount (\$)	Payee addre	ess; City;	State; Zip C	Code					
	\$2,500.00	708 E. Edir	burg Suite B							
	Expenditure from corporate funds	Edinburg, 1	TX 78542							
	PURPOSE OF EXPENDITURE	Contributio	ee Categories listed at the top ns/Donations Made Officeholder/Politica	Ву	(b)	<b>=</b>		de of Texas. Com officeholder livinດຸ	plete Schedule T. J expense	
	Complete ONLY if direct		iceholder name	Office so	ught			Office he	eld	
	expenditure to benefit C/OH	<sup>†</sup> Pena, Jason	(Judge)					Justice	of Peace Pct.5, I	Pl 1
	Date 10/14/2025	Payee name Pena Jr, Ju	an Jose (Judge)							
	Amount (\$)	Payee addre	ess; City;	State; Zip C	Code					
	\$2,500.00	730 N. Bre	yfogle suite A							
	Expenditure from corporate funds	Mission, T>	〈 78572							
	PURPOSE	(a) Category (S	ee Categories listed at the top	of this schedule)	(b)	Description				
	OF EXPENDITURE		ns/Donations Made Officeholder/Politica					de of Texas. Com , officeholder livinç	plete Schedule T. g expense	
	Complete ONLY if direct		iceholder name	Office so	ught			Office he	eld	
	expenditure to benefit C/OH Pena Jr, Juan Jose (Judge)  Justice of Peace Pct 3 , Pl 2									

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

#### SCHEDULE F1

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

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Sch: 3/3 Rpt: 70/72  Border Health PAC  4 Date	Polling Expense Travel in District see Printing Expense Travel Out of District Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  Explains how to complete this form.
4 Date 10/16/2025 5 Payee name Villarreal Jr, Tino (Mr.) 6 Amount (\$) \$2,500.00 1001 E. Elizabeth St  Expenditure from corporate funds Brownsville, TX 78520  8 PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Candidate/Officeholder/Political Committee  (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense contribution  9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held	3 Filer ID (Ethics Commission Filers)
Villarreal Jr, Tino (Mr.)  6 Amount (\$) 7 Payee address; City; State; Zip Code \$2,500.00 \$1001 E. Elizabeth St  Expenditure from corporate funds  Brownsville, TX 78520  8 PURPOSE OF EXPENDITURE  (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  9 Complete ONLY if direct Candidate/Officeholder name  Office sought  Office held	00055547
6 Amount (\$) 7 Payee address; City; State; Zip Code \$2,500.00 \$2,500.00 \$1001 E. Elizabeth St  Expenditure from corporate funds  Brownsville, TX 78520  8 PURPOSE OF EXPENDITURE  (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  9 Complete ONLY if direct Candidate/Officeholder name  Office sought  Office held	•
\$2,500.00 1001 E. Elizabeth St  Expenditure from corporate funds  Brownsville, TX 78520  8 PURPOSE OF EXPENDITURE  (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  9 Complete ONLY if direct Candidate/Officeholder name  Office sought  Office held	
Expenditure from corporate funds  Brownsville, TX 78520  8 PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee  Candidate/Officeholder/Political Committee  Candidate/Officeholder name  Office sought  Office held	State; Zip Code
Brownsville, TX 78520  8 PURPOSE OF EXPENDITURE  (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	
OF EXPENDITURE  Contributions/Donations Made By Candidate/Officeholder/Political Committee  Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense contribution  9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held	
Contributions/Donations Made By Candidate/Officeholder/Political Committee  Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete T. Check if Austin, TX, officeholder living expense contribution  9 Complete ONLY if direct Candidate/Officeholder name  Office sought  Office held	of this schedule) (b) Description
Candidate/Officeholder/Political Committee     Contribution      Complete ONLY if direct	Check if travel outside of Texas. Complete Schedule T.
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held	
and a state of the	Contribution
and a state of the	Office cought Office hold
	Brownsville City Commissioner,

## NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

### SCHEDULE |

	The Instruction Guide explains how to c	omplete this form.
Total pages Schedule I: Sch: 1/1 Rpt:	2 FILER NAME Border Health PAC	3 Filer ID (Ethics Commission Filers) 00055547
4 Date	5 Payee name	,
10/23/2025	Flores, JJ (Mr.)	
6 Amount (\$)	7 Payee Address; City; State; Zip	
2,430.37	612 W. Nolana #415	
Expenditure from corporate funds	McAllen, TX 78504	
8 PURPOSE OF	(a) Category (See instructions for examples of acceptable categories)	·
EXPENDITURE	Salaries/Wages/Contract Labor	contract labor
Date	Payee name	
10/01/2025	HOSPAC	
Amount (\$)	Payee Address; City; State; Zip	
10,000.00	1108 Lavaca Suite 700	
Expenditure from		
corporate funds	Austin, TX 78701	
PURPOSE OF		Description (See instructions regarding type of information required.)
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee	Donation expenditure
Date	Payee name	
10/07/2025	Water Tower Village, Ltd	
Amount (\$)	Payee Address; City; State; Zip	
1,331.25	5221 N McColl Road	
Expenditure from		
corporate funds	Mcallen, TX 78502	
PURPOSE OF	(a) Category (See instructions for examples of acceptable categories)	•
EXPENDITURE	Office Overhead/Rental Expense	office lease expenditure
Date	Payee name	
10/03/2025	vamos scholarship	
Amount (\$)	Payee Address; City; State; Zip	
30,000.00	800 N. Main	
Expenditure from		
corporate funds	McAllen, TX 78501	
PURPOSE OF	(a) Category (See instructions for examples of acceptable categories)	•
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee	donation expeniture

# 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: 72/72 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Border Health PAC 00055547 Date 8 Amount (\$) 5 Name of person from whom amount is received 09/30/2025 \$380.78 Lone Star National Bank 6 Address of person from whom amount is received; City; State; Zip Code mcallen, TX 78502 Purpose for which amount is received Check if political contribution returned to filer qtrly interest income