

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 1301 Concord Terrace
 Check if different than previously reported. (ACC)
Sunrise FL 33323

2. **FEC IDENTIFICATION NUMBER** C00469205
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 10 22 2009 through 12 31 2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Karen Witte

Signature of Treasurer Electronically Filed by Karen Witte Date 01 29 2009

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only							
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FEC FORM 3X
(Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
1	0

D	D
2	2

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		0.00
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	0.00									
(c) Total Receipts (from Line 19)	99100.00	99100.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	99100.00	99100.00								
7. Total Disbursements (from Line 31)	99.40	99.40								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	99000.60	99000.60								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

**DETAILED SUMMARY PAGE
OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
1	0

D	D
2	2

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	99000.00	99000.00
(ii) Unitemized	100.00	100.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	99100.00	99100.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	99100.00	99100.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	99100.00	99100.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	99100.00	99100.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	99.40	99.40
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	99.40	99.40
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	99.40	99.40
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	99.40	99.40

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3	99100.00	99100.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	99100.00	99100.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	99.40	99.40
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	99.40	99.40

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 14
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Robert Balcom	Date of Receipt MM / DD / YYYY 12 / 28 / 2009
	Mailing Address 2257 Haversham Close	Transaction ID: SA11AI.4111
	City State Zip Code Richmond VA 23454	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	Political Contribution
Name of Employer Pediatrix Medical Group, Inc.	Occupation Regional President - Central Region	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

B.	Full Name (Last, First, Middle Initial) Vivian Lopez Blanco	Date of Receipt MM / DD / YYYY 12 / 21 / 2009
	Mailing Address 151 Crandon Blvd. 137	Transaction ID: SA11AI.4146
	City State Zip Code Key Biscayne FL 33149	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	Political Contribution
Name of Employer MEDNAX Services, Inc.	Occupation Treasurer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

C.	Full Name (Last, First, Middle Initial) Robert Bryant	Date of Receipt MM / DD / YYYY 12 / 30 / 2009
	Mailing Address 12717 W. Sunrise Blvd.	Transaction ID: SA11AI.4115
	City State Zip Code Sunrise FL 33323	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Political Contribution
Name of Employer MEDNAX Services, Inc.	Occupation SVP and CIO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	11000.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 14
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Joseph Calabro	Date of Receipt MM / DD / YYYY 12 / 21 / 2009
	Mailing Address 4155 NW 100 Avenue	Transaction ID: SA11AI.4117
	City State Zip Code Coral Springs FL 33065	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	Political Contribution
	Name of Employer Occupation MEDNAX Services, Inc. President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

B.	Full Name (Last, First, Middle Initial) David Clark	Date of Receipt MM / DD / YYYY 12 / 28 / 2009
	Mailing Address 7489 NW 117th Lane	Transaction ID: SA11AI.4121
	City State Zip Code Parkland FL 33076	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	Political Contribution
	Name of Employer Occupation Pediatrix Medical Group, Inc. COO-Pediatrix	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

C.	Full Name (Last, First, Middle Initial) David Edmonds	Date of Receipt MM / DD / YYYY 12 / 14 / 2009
	Mailing Address PO Box 82070	Transaction ID: SA11AI.4126
	City State Zip Code Las Vegas NV 89180	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Political Contribution
	Name of Employer Occupation Pokroy Medical Group of NV Neonatologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	10500.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 8 / 14
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Claire Fair

Mailing Address 3353 Emerald Oaks Drive
102

City State Zip Code
Hollywood FL 33021

FEC ID number of contributing federal political committee. **C**

Name of Employer MEDNAX Services, Inc. Occupation VP-Human Resources

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 8 / 2 0 0 9

Transaction ID: SA11AI.4128

Amount of Each Receipt this Period
5000.00

Political Contribution

B. Full Name (Last, First, Middle Initial)
Thomas W. Hawkins

Mailing Address 1716 SE 9th Street

City State Zip Code
Ft. Lauderdale FL 33305

FEC ID number of contributing federal political committee. **C**

Name of Employer MEDNAX Services, Inc. Occupation General Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 1 / 2 0 0 9

Transaction ID: SA11AI.4132

Amount of Each Receipt this Period
5000.00

Political Contribution

C. Full Name (Last, First, Middle Initial)
Robert Jarrett

Mailing Address 5851 Holmberg Road
Apt. 3211

City State Zip Code
Parkland FL 33067

FEC ID number of contributing federal political committee. **C**

Name of Employer MEDNAX Services, Inc. Occupation VP Medical Affairs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 8 / 2 0 0 9

Transaction ID: SA11AI.4134

Amount of Each Receipt this Period
5000.00

Political Contribution

SUBTOTAL of Receipts This Page (optional) ► **15000.00**

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 9 / 14
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Eric Kurzweil

Mailing Address PO Box 307

City State Zip Code
Wolcott CO 81655

FEC ID number of contributing federal political committee. **C**

Name of Employer: Pediatrix Medical Group, Inc.
Occupation: Regional President - Mountain Region

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 12 / 29 / 2009
Transaction ID: SA11AI.4138
 Amount of Each Receipt this Period: 5000.00
 Political Contribution

B. Full Name (Last, First, Middle Initial)
Tony Lacaze

Mailing Address 4342 Indian Creek Lane

City State Zip Code
Frisco TX 75034

FEC ID number of contributing federal political committee. **C**

Name of Employer: Pediatrix Medical Group, Inc.
Occupation: Regional VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 12 / 29 / 2009
Transaction ID: SA11AI.4140
 Amount of Each Receipt this Period: 5000.00
 Political Contribution

C. Full Name (Last, First, Middle Initial)
Christine Lewandowski

Mailing Address 2100 NE 34th Street

City State Zip Code
Lighthouse Point FL 33064

FEC ID number of contributing federal political committee. **C**

Name of Employer: MEDNAX Services, Inc.
Occupation: VP Patient Accounts

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 12 / 29 / 2009
Transaction ID: SA11AI.4142
 Amount of Each Receipt this Period: 1000.00
 Political Contribution

SUBTOTAL of Receipts This Page (optional) ► **11000.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 14
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Beverly Gail Lim

Mailing Address 201 NE 4th Street

City State Zip Code
Boca Raton FL 33432

FEC ID number of contributing federal political committee. **C**

Name of Employer: Pediatrix Medical Group, Inc.
Occupation: VP Program Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt: 12 / 29 / 2009
Transaction ID: SA11AI.4144
Amount of Each Receipt this Period: 2000.00
Political Contribution

B.

Full Name (Last, First, Middle Initial)
Jorge McCormack

Mailing Address 7 Brightwater Circle

City State Zip Code
St. Petersburg FL 33704

FEC ID number of contributing federal political committee. **C**

Name of Employer: Pediatrix Medical Group of FL
Occupation: Medical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: SA11AI.4148
Amount of Each Receipt this Period: 1000.00
Political Contribution

C.

Full Name (Last, First, Middle Initial)
Roger J. Medel

Mailing Address 12923 Grand Oaks Drive

City State Zip Code
Davie FL 33330

FEC ID number of contributing federal political committee. **C**

Name of Employer: MEDNAX Services, Inc.
Occupation: CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt: 12 / 29 / 2009
Transaction ID: SA11AI.4150
Amount of Each Receipt this Period: 5000.00
Political Contribution

SUBTOTAL of Receipts This Page (optional) ► **8000.00**

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 14
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Frederick Miller	Date of Receipt MM / DD / YYYY 12 / 28 / 2009
	Mailing Address 12709 NW 15th Street	Transaction ID: SA11AI.4152
	City State Zip Code Coral Springs FL 33071	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	Political Contribution
Name of Employer Pediatrix Medical Group, Inc.	Occupation President-Pediatrix Division	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

B.	Full Name (Last, First, Middle Initial) Stephen Moffitt	Date of Receipt MM / DD / YYYY 12 / 17 / 2009
	Mailing Address 45 Adams Drive	Transaction ID: SA11AI.4154
	City State Zip Code Belle Mead NJ 08502	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Political Contribution
Name of Employer Pediatrix Medical Group, PA	Occupation Neonatologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

C.	Full Name (Last, First, Middle Initial) John Pepia	Date of Receipt MM / DD / YYYY 12 / 28 / 2009
	Mailing Address 20160 Ocean Key Drive	Transaction ID: SA11AI.4159
	City State Zip Code Boca Raton FL 33498	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	Political Contribution
Name of Employer MEDNAX Services, Inc.	Occupation VP Accounting & Finance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	11000.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 12 / 14
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Arnold M. Poole	Date of Receipt MM / DD / YYYY 12 / 29 / 2009
	Mailing Address 5300 Olde Milbrook Drive	Transaction ID: SA11AI.4161
	City State Zip Code Glen Allen VA 23060	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Political Contribution
	Name of Employer: Pediatrix Medical Group, Inc. Occupation: Regional VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) Alan Spitzer	Date of Receipt MM / DD / YYYY 12 / 17 / 2009
	Mailing Address 5868 NW 125th Terrace	Transaction ID: SA11AI.4173
	City State Zip Code Coral Springs FL 33076	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	Political Contribution
	Name of Employer: MEDNAX Services, Inc. Occupation: SVP Reserach & Education Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00	

C.	Full Name (Last, First, Middle Initial) Michael Stanley	Date of Receipt MM / DD / YYYY 12 / 16 / 2009
	Mailing Address 6452 Fianna Hills Drive	Transaction ID: SA11AI.4191
	City State Zip Code Ft. Worth TX 76132	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	Political Contribution
	Name of Employer: Pediatrix Medical Group, Inc. Occupation: Regional President-South Central Reg. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	11000.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 13 / 14
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Julia Stones

Mailing Address 6541 NE 20th Terrace

City Ft. Lauderdale State FL Zip Code 33308

FEC ID number of contributing federal political committee. **C**

Name of Employer MEDNAX Services, Inc. Occupation Director of Marketing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 12 / 22 / 2009
Transaction ID: SA11AI.4177
Amount of Each Receipt this Period 1500.00
Political Contribution

B. Full Name (Last, First, Middle Initial)
Gary A. Twiggs

Mailing Address 770 The City Dr. South Suite 4000

City Orange State CA Zip Code 92868

FEC ID number of contributing federal political committee. **C**

Name of Employer Pediatrix Medical Group, Inc. Occupation Regional President - Pacific Region

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 12 / 31 / 2009
Transaction ID: SA11AI.4180
Amount of Each Receipt this Period 5000.00
Political Contribution

C. Full Name (Last, First, Middle Initial)
Philip Vaughn

Mailing Address 11558 Morning Grove Dr.

City Las Vegas State NV Zip Code 89135

FEC ID number of contributing federal political committee. **C**

Name of Employer Pokroy Medical Group of NV Occupation Director of Operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 12 / 29 / 2009
Transaction ID: SA11AI.4182
Amount of Each Receipt this Period 5000.00
Political Contribution

SUBTOTAL of Receipts This Page (optional) ► 11500.00

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 14 / 14
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Karl Wagner		Date of Receipt
	Mailing Address 1476 Victoria Isle Dr.		<input type="text" value="12"/> <input type="text" value="21"/> <input type="text" value="2009"/>
	City	State	Zip Code
	Weston	FL	33327
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer MEDNAX Services, Inc.		Occupation CFO	Transaction ID: SA11AI.4184
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="5000.00"/>
		<input type="text" value="5000.00"/>	Political Contribution

B.	Full Name (Last, First, Middle Initial) Odell Wilson		Date of Receipt
	Mailing Address 7348 Old Pecos Trail ME		<input type="text" value="12"/> <input type="text" value="16"/> <input type="text" value="2009"/>
	City	State	Zip Code
	Albuquerque	NM	87113
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Pediatrix Medical Group of NM		Occupation Neo/Medical Director	Transaction ID: SA11AI.4186
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="5000.00"/>
		<input type="text" value="5000.00"/>	Political Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="10000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="99000.00"/>