LAW OFFICES OF
NIELSEN, MERKSAMER,
PARRINELLO, MUELLER & NAYLOR, LLP
A LIMITED LIABILITY PARTNERSHIP INCLUDING A PROFESSIONAL CORPORATION

SACRAMENTO
770 L STREET, SUITE 800
SACRAMENTO, CALIFORNIA 95814
TELEPHONE (916) 446-6752
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591 REDWOOD HIGHWAY, #4000
MILL VALLEY, CALIFORNIA 94941-3039
TELEPHONE (415) 389-6800
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SAN FRANCISCO
TWO EMBARCADERO CENTER, SUITE 200
SAN FRANCISCO, CALIFORNIA 94111
TELEPHONE (415) 389-6800
FAX (415) 388-6874

RECEIVED
FEC MAIL ROOM
2002 JAN -8 P 12:52

December 17, 2001

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

Dear Filing Officer:

Enclosed herewith please find the original signed copy of the following for:

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

for the period 03/01/98 Through 03/31/98 .

- [ ] Form 1
- [x] Form 3X (Amendment)
- [x] **Report to the Federal Election Commission via Certified Mail**
- [x] Report(s) to state filing official(s) sent via Certified Mail
- [ ] Other: _____

Please endorse this transmittal letter as acknowledgment of receipt of the enclosed report and return it in the stamped envelope provided.

cc: Florida
Massachusetts
Nevada
Texas

#7125.01

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM
2002 JAN -8 P 12:52

1. NAME OF COMMITTEE (in full)
TENET HEALTHCARE CORPORATION PAC

ADDRESS (number and street) ☐ Check if different than previously reported
3220 STATE ST.

CITY, STATE and ZIP CODE
SANTA BARBARA, CA 93105

2. FEC IDENTIFICATION NUMBER
C00113350

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

4. TYPE OF REPORT

(a) ☐ April 15 Quarterly Report
☐ July 15 Quarterly Report
☐ October 15 Quarterly Report
☐ January 31 Year End Report
☐ July 31 Mid Year Report (Non-election Year Only)
☐ Termination Report

Monthly Report Due On:

☐ February 20	☐ June 20	☐ October 20
☐ March 20	☐ July 20	☐ November 20
☒ April 20	☐ August 20	☐ December 20
☐ May 20	☐ September 20	☐ January 31

☐ 12-Day Pre-Election Report for the ____ _____ (Type of Election)
election on _____ _____ in the State of _____

☐ 30-Day Post-Election Report following the General Election
on _____ in the State of _____.

(b) Is this Report an Amendment? ☒ YES ☐ NO

SUMMARY

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5.	Covering Period 03/01/1998 through 03/31/1998		
6.	(a) Cash on Hand January 1, 1998		$ 41450.14
	(b) Cash on Hand at Beginning of Reporting Period	$ 66175.40	
	(c) Total Receipts (from Line 19)	$ 31381.86	$ 73692.12
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 97557.26	$ 115142.26
7.	Total Disbursements (from Line 30)	$ 10000.00	$ 27585.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 87557.26	$ 87557.26
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	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

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 JASON D. KAUNE, ASSISTANT TREASURER

Signature of Treasurer

Date 11/ 30 /01

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

FEC FORM 3X
(revised 8/98)

FE8AN121PDF

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE
TENET HEALTHCARE CORPORATION PAC

REPORT COVERING PERIOD
FROM 02/01/1998 TO: 03/31/1998

	COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	11871.92	42393.25	11(a)(i)
ii. Unitemized	19007.94	30798.96	11(a)(ii)
iii. Total (add i and ii) >	30881.86	73192.12	11(a)(iii)
b. Political Party Committees	0.00	0.00	11(b)
c. Other Political Committees (such as PACs)	500.00	500.00	11(c)
d. Total Contributions (add a iii, b and c) >	31381.86	73692.12	11(d)
12. Transfers From Affiliated/Other Party Committees	0.00	0.00	12
13. All Loans Received	0.00	0.00	13
14. Loan Repayments Received	0.00	0.00	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00	16
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00	17
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	31381.86	73692.12	19
20. Total Federal Receipts (subtract line 16 from line 19) >	31381.86	73692.12	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal (from Schedule H4)			
i. Federal Share	0.00	0.00	21(a)(i)
ii. Non-Federal Share	0.00	0.00	21(a)(ii)
b. Other Federal Operating Expenditures	0.00	0.00	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >	0.00	0.00	21(c)
22. Transfers to Affiliated/Other Party Committees	0.00	0.00	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	6,000.00	17,910.00	23
24. Independent Expenditures (use Schedule E)	0.00	0.00	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00	25
26. Loan Repayments Made	0.00	0.00	26
27. Loans Made	0.00	0.00	27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees	0.00	15.00	28(a)
b. Political Party Committees	0.00	0.00	28(b)
c. Other Political Committees (such as PACs)	0.00	0.00	28(c)
d. Total Contribution Refunds (add a, b and c) >	0.00	15.00	28(d)
29. Other Disbursements	4,000.00	9,700.00	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	10000.00	27585.00	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	10000.00	27585.00	31
III. NetContributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	31381.86	73692.12	32
33. Total Contribution Refunds (from line 28d)	0.00	15.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	31381.86	73677.12	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	0.00	0.00	35
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00	36
37. Net Operating Expenditures (subtract line 36 from 35) >	0.00	0.00	37

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full)

TENET HEALTHCARE CORPORATION PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William Durham 2838 Camp Street New Orleans, LA 70115	Tenet Healthcare Corporation	03/02/1998	$500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Vice President, Finance Aggregate Year-to-Date $ 500.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Bartlett 210 Turtle Creek Circle Oldsmar, FL 34677	Palms of Pasadena Hospital	03/03/1998	$500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Chief Executive Officer Aggregate Year-to-Date $ 535.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Randall L. Hoover 341 E. Livingston Place Metairie, LA 70005	Memorial Medical Center	03/03/1998	$250.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Chief Executive Officer Aggregate Year-to-Date $ 250.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kim Mendenhall 15246 Friends Street Pacific Palisades, CA 90272	Tenet Healthcare Corporation	03/03/1998	$500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Vice President Aggregate Year-to-Date $ 500.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dale Brewer, M.D. 3122 Wynfield Terrace Court St. Louis, MO 63129	Deaconess Health System	03/04/1998	$250.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Physician Aggregate Year-to-Date $ 250.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Douglas Perushak, M.D. 12461 W. Watson Sunset Hill, MO 63127	Deaconess Health System	03/04/1998	$500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Physician Aggregate Year-to-Date $ 500.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Steve Dominguez 17830 Prairie Northridge, CA 91325	Tenet Healthcare Corporation	03/05/1998	$500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Senior Vice President Aggregate Year-to-Date $ 675.00		

SUBTOTAL of Receipts This Page (optional) 3000.00

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

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 2 OF 8

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full)

CENET HEALTHCARE CORPORATION PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Richard Gold 7609 North Cypresshead Drive Parkland, FL 33067 Receipt For: Primary General Other (specify):	West Boca Medical Center Occupation: Chief Executive Officer Aggregate Year-to-Date $ 500.00	03/05/1998	$500.00
B. John Holland 1510 Sweetedge Dr Alpharetta, GA 30004 Receipt For: Primary General Other (specify):	North Fulton Regional Hospital Occupation: Chief Executive Officer Aggregate Year-to-Date $ 500.00	03/05/1998	$500.00
C. Gregory D. Starnes 418 Greenacres Drive Crawfordsville, IN 47933 Receipt For: Primary General Other (specify):	Culver Union Hospital Occupation: Chief Executive Officer Aggregate Year-to-Date $ 500.00	03/05/1998	$500.00
D. Robert Maher 47 Colonia Drive Shrewsbury, MA 01545 Receipt For: Primary General Other (specify):	St. Vincent Hospital Occupation: Chief Executive Officer Aggregate Year-to-Date $ 500.00	03/06/1998	$500.00
E. Steven Scout 921 Wynhaven Lane Wallwin, MO 63011 Receipt For: Primary General Other (specify):	Deaconess Health System Occupation: Chief Executive Officer Aggregate Year-to-Date $ 750.00	03/09/1998	$750.00
F. Keith Swanney 16214 San Dominique San Antonio, TX 78232 Receipt For: Primary General Other (specify):	Southwest General Hospital Occupation: Chief Executive Officer Aggregate Year-to-Date $ 500.00	03/09/1998	$500.00
F. Kathy Warmath 208 Dogwood Drive Lebanon, TN 37087 Receipt For: Primary General Other (specify):	University Medical Center Occupation: Director, Home Health Aggregate Year-to-Date $ 300.00	03/09/1998	$300.00

SUBTOTAL of Receipts This Page (optional) $550.00

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

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 3 OF 8

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Carolyn B. Carpenter 233 Pinewood Lane Rock Hill, SC 29730 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Piedmont Healthcare System Occupation: Assistant Administrator Aggregate Year-to-Date $ 250.00	03/10/1998	$250.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Martin James Fischer 639 High Lake Drive Baton Rouge, LA 70810 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Southern Medical Corporation Occupation: Chief Executive Officer Aggregate Year-to-Date $ 500.00	03/10/1998	$500.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
William Deming 1561 Cureton Court Rock Hill, SC 29732 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Piedmont Healthcare System Occupation: Associate Administrator Aggregate Year-to-Date $ 250.00	03/10/1998	$250.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Jim Stagner 110 Belle Meade Searcy AR, 72 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Central Arkansas Hospital Occupation: Chief Financial Officer Aggregate Year-to-Date $ 250.00	03/13/1998	$250.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Steven Altmiller 6211 Edenbrook Drive Sugar Land, TX 77479 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Twelve Oaks Hospital Occupation: Chief Executive Officer Aggregate Year-to-Date $ 640.00	03/14/1998	$20.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
John Bartlett 230 Turtle Creek Circle Oldsmar, FL 34677 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Palms of Pasadena Hospital Occupation: Chief Executive Officer Aggregate Year-to-Date $ 535.00	03/10/1998	$5.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Harold R. (Hal) Chilton 1032 Vista Grande Paso Robles, CA 93446 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Sierra Vista Regional Med.Ctr. Occupation: Chief Executive Officer Aggregate Year-to-Date $ 280.00	03/14/1998	$40.00

SUBTOTAL of Receipts This Page (optional) 1315.00

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

SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page | PAGE 9 OF 9 | FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
A. Maxine T. Cooper 19401 Sandpebble Circle Huntington Beach, CA 92648 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Placentia Linda Comm. Hospital Chief Executive Officer Aggregate Year-to-Date $ 400.00	03/14/1998	$100.00
B. Steve Dominguez 17800 Prairie Northridge, CA 91325 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Tenet Healthcare Corporation Senior Vice President Aggregate Year-to-Date $ 675.00	03/14/1998	$35.00
C. Trevor Fetter 1530 Mimosa Lane Santa Barbara, CA 93108 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Tenet Healthcare Corporation Chief Financial Officer Aggregate Year-to-Date $ 280.00	03/14/1998	$40.00
D. Michael Focht, Sr. P.O. Box 703 Santa Ynez, CA 93460-0703 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Tenet Healthcare Corporation President Aggregate Year-to-Date $ 269.50	03/14/1998	$35.50
E. Lex Quinn 707 Claymoor Odessa, TX 79764 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Odessa Regional Hospital Chief Executive Officer Aggregate Year-to-Date $ 500.00	03/14/1998	$250.00
F. David Mauss 16477 Santa Bianca Hacienda Heights, CA 91745 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Garden Grove Hospital Vice President, Development Aggregate Year-to-Date $ 700.00	03/14/1998	$100.00
F. David Mayeux 2455 Robin Drive Roanoke, TX 76262 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Tenet Healthcare Corporation Executive Vice President Aggregate Year-to-Date $ 560.00	03/14/1998	$80.00

SUBTOTAL of Receipts This Page (optional)	633.50
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full)

TENET HEALTHCARE CORPORATION PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
A. Leonard Rosenfeld 1502 Pecos Drive Southlake, TX 76092 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Tenet Healthcare Corporation Occupation: Vice President, Specialty Ops. Aggregate Year-to-Date $ 280.00	03/14/1998	$40.00
B. Charles R. Slaton 317 Nordin Lane Russellville, AR 72802 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Tenet Healthcare Corporation Occupation: Regional Vice President Aggregate Year-to-Date $ 201.88	03/14/1998	$28.84
C. Donald Thayer 901 Bristol Court Southlake, TX 76092 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Tenet Healthcare Corporation Occupation: Vice President, R & D Aggregate Year-to-Date $ 532.34	03/14/1998	$4.62
D. Gustavo Valdespino 5 Sunburst Irvine, CA 92612 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Tenet Healthcare Corporation Occupation: Vice President Aggregate Year-to-Date $ 220.00	03/14/1998	$40.00
E. Neil S. Hanley 7000 Oak Forest Lane Bethesda MD, 20 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Tenet Healthcare Corporation Occupation: Vice President, Ethics Aggregate Year-to-Date $ 250.00	03/16/1998	$250.00
F. Steve Saltzman 1670 Trotters Lane Stone Mountain, GA 30087 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Atlanta Medical Center Occupation: Senior Vice President Aggregate Year-to-Date $ 400.00	03/17/1998	$400.00
F. Donna Nichols 18731 Gibbons Drive Dallas, TX 75287 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Tenet Healthcare Corporation Occupation: Director, Information Systems Aggregate Year-to-Date $ 250.00	03/19/1998	$250.00

SUBTOTAL of Receipts This Page (optional) 1013.46

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

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 6 OF 9

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Dennis Phillips 4310 4th Street Circle N.W. Hickory, NC 28601 Receipt For: Primary General Other (specify):	Frye Regional Medical Center Occupation: Chief Executive Officer Aggregate Year-to-Date $ 250.00	03/24/1998	$250.00
B. Ronald Whittenburg 3431 Hawthorne Circle Poplar Bluff, MO 63901 Receipt For: Primary General Other (specify):	Lucy Lee Healthcare System Occupation: Chief Executive Officer Aggregate Year-to-Date $ 250.00	03/24/1998	$250.00
C. Deborah Stringer 3458 Paseo Ancho Carlsbad, CA 92009 Receipt For: Primary General Other (specify):	Tenet Healthcare Corporation Occupation: Vice President, Development Aggregate Year-to-Date $ 300.00	03/25/1998	$300.00
D. Cecinta Citlalli Abbott 5640 Risborough Drive Plano, TX 75093 Receipt For: Primary General Other (specify):	Tenet Healthcare Corporation Occupation: Vice President, A & D Aggregate Year-to-Date $ 500.00	03/25/1998	$500.00
E. Kenneth Rivers 624 Fairlee Avenue Bradbury, CA 91010 Receipt For: Primary General Other (specify):	St. Luke Medical Center Occupation: Chief Executive Officer Aggregate Year-to-Date $ 500.00	03/26/1998	$500.00
F. Steven Altmiller 6211 Edenbrook Drive Sugar Land, TX 77479 Receipt For: Primary General Other (specify):	Twelve Oaks Hospital Occupation: Chief Executive Officer Aggregate Year-to-Date $ 640.00	03/28/1998	$20.00
F. John Bartlett 230 Turtle Creek Circle Oldsmar, FL 34677 Receipt For: Primary General Other (specify):	Palms of Pasadena Hospital Occupation: Chief Executive Officer Aggregate Year-to-Date $ 535.00	03/28/1998	$5.00

SUBTOTAL of Receipts This Page (optional) 1825.00

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

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 7 OF 8

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full)

TENET HEALTHCARE CORPORATION PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Harold E. (Hal) Chilton 1032 Vista Grande Paso Robles, CA 93446 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Sierra Vista Regional Med.Ctr. Occupation: Chief Executive Officer Aggregate Year-to-Date $ 280.00	03/28/1998	$40.00
B. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation / Aggregate Year-to-Date**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Maxine T. Cooper 19401 Sandpebble Circle Huntington Beach, CA 92646 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Placentia Linda Comm. Hospital Occupation: Chief Executive Officer Aggregate Year-to-Date $ 400.00	03/28/1998	$100.00
C. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation / Aggregate Year-to-Date**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Steve Dominguez 17830 Prairie Northridge, CA 91325 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Tenet Healthcare Corporation Occupation: Senior Vice President Aggregate Year-to-Date $ 675.00	03/28/1998	$25.00
D. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation / Aggregate Year-to-Date**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Trevor Fetter 1530 Mimosa Lane Santa Barbara, CA 93108 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Tenet Healthcare Corporation Occupation: Chief Financial Officer Aggregate Year-to-Date $ 280.00	03/28/1998	$40.00
E. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation / Aggregate Year-to-Date**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Michael Rochl, Sr. P.O. Box 703 Santa Ynez, CA 93460-0703 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Tenet Healthcare Corporation Occupation: President Aggregate Year-to-Date $ 269.50	03/28/1998	$38.50
F. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation / Aggregate Year-to-Date**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
David Kraus 16477 Santa Bianca Hacienda Heights, CA 91745 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Garden Grove Hospital Occupation: Vice President, Development Aggregate Year-to-Date $ 700.00	03/28/1998	$100.00
F. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation / Aggregate Year-to-Date**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
David Mayeux 2455 Robin Drive Roanoke, TX 76262 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Tenet Healthcare Corporation Occupation: Executive Vice President Aggregate Year-to-Date $ 560.00	03/28/1998	$80.00

SUBTOTAL of Receipts This Page (optional) 429.50

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

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
A. Leonard Rosenfeld 1502 Pecos Drive Southlake, TX 76092 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Tenet Healthcare Corporation Occupation: Vice President, Specialty Ops. Aggregate Year-to-Date $ 280.00	03/28/1998	$40.00
B. Charles R. Slaton 217 Nordin Lane Russellville, AR 72802 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Tenet Healthcare Corporation Occupation: Regional Vice President Aggregate Year-to-Date $ 201.88	03/28/1998	$28.34
C. Donald Thayer 901 Bristol Court Southlake, TX 76092 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Tenet Healthcare Corporation Occupation: Vice President, R & D Aggregate Year-to-Date $ 532.34	03/28/1998	$4.62
D. Gustavo Valdespino 5 Sunburst Irvine, CA 92612 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Tenet Healthcare Corporation Occupation: Vice President Aggregate Year-to-Date $ 220.00	03/28/1998	$40.00
E. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) 113.46

TOTAL This Period (last page this line number only) 11873.92

SCHEDULE A **ITEMIZED RECEIPTS**

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PAGE 1 OF 1

FOR LINE NUMBER 11(C)

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NAME OF COMMITTEE (in Full)

TENET HEALTHCARE CORPORATION PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
AFA-PAC 325 Seventh Street NW Washington, DC 20004	Unknown	03/11/1996	$500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Unknown Aggregate Year-to-Date $ 500.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date $		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date $		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date $		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date $		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date $		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date $		

SUBTOTAL of Receipts This Page (optional)	500.00
TOTAL This Period (last page this line number only)	500.00

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Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

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JMD — PREPARER

1-8-02 — DATE PREPARED

(6/2000)