01/13/2004 16 : 42

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

TENET HEALTHCARE CORPORATION PAC

ADDRESS (number and street) ▼ 3820 STATE STREET

Check if different than previously reported. (ACC)

SANTA BARBARA | CA | 93105

2. **FEC IDENTIFICATION NUMBER** ▼ C00119354

CITY ▲ STATE ▲ ZIPCODE ▲

3. IS THIS REPORT — X 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)
- X 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 07 01 2003 through 12 31 2003

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 Ms. Susan Limon

Signature of Treasurer Electronically Filed by Ms. Susan Limon Date 01 13 2004

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							

FEC FORM 3X
(Rev. 02/2003)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name
TENET HEALTHCARE CORPORATION PAC

Report Covering the Period: From: 07 01 2003 To: 12 31 2003

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2003		54382.13
(b) Cash on Hand at Begining of Reporting Period	63092.13	
(c) Total Receipts (from Line 19)	44323.10	95783.10
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	107415.23	150165.23
7. Total Disbursements (from Line 31)	50121.75	92871.75
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	57293.48	57293.48
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	

X 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. 02/2003)

Write or Type Committee Name

TENET HEALTHCARE CORPORATION PAC

Report Covering the Period: From: 07 01 2003 To: 12 31 2003

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)	40283.60	
(ii) Unitemized	4039.50	
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ▶	44323.10	95783.10
(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) ..... ▶	44323.10	95783.10
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))	44323.10	95783.10
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	44323.10	95783.10

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	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)) ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	29471.00	62971.00
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	20650.75	29900.75
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))	50121.75	92871.75
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)	50121.75	92871.75

DETAILED SUMMARY PAGE

of Disbursements

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)	44323.10	95783.10
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	44323.10	95783.10
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 81
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): LINDA P MCNEILL
Mailing Address: 3901 S. POST OAK AVE
City: NEW ORLEANS State: LA Zip Code: 70131-8413
FEC ID number of contributing federal political committee: C
Name of Employer: MEADOWCREST HOSPITAL
Occupation: DIR, CLIN PROC IMPROV 2
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40350077477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial): GAYLE M MIELKE
Mailing Address: 11901 N. 34TH AVENUE
City: OMAHA State: NE Zip Code: 68112-1177
FEC ID number of contributing federal political committee: C
Name of Employer: CREIGHTON UNIVERSITY MEDICAL CENTER
Occupation: NURSE MANAGER
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40442537477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial): WILLIAM R WATTS
Mailing Address: 7504 DANFIELD CT
City: DALLAS State: TX Zip Code: 75252-6823
FEC ID number of contributing federal political committee: C
Name of Employer: TENET HEALTHSYSTEM-TEXAS
Occupation: SR DIR, INFO SYSTEMS
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40720847477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 390.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 81
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): RAYMOND J FOSTER
Mailing Address: 31-792 AVENIDA VALDEZ
City: CATHEDRAL CITY | State: CA | Zip Code: 92234-2780
FEC ID number of contributing federal political committee: C
Name of Employer: DESERT REGIONAL MEDICAL CENTER
Occupation: DIRECTOR
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40521877477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial): JEFFREY N YARMEL
Mailing Address: 235 TRIANON LANE
City: VILLANOVA | State: PA | Zip Code: 19085-1444
FEC ID number of contributing federal political committee: C
Name of Employer: WARMINSTER HOSPITAL
Occupation: CEO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 499.98
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40675897477
Amount of Each Receipt this Period: 249.99
P/R Deduction ($19.23 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial): CHRISTOPHER DI CICCO
Mailing Address: 1138 BRIANS WAY
City: WAYNE | State: PA | Zip Code: 19087-2244
FEC ID number of contributing federal political committee: C
Name of Employer: GRADUATE HOSPITAL
Occupation: CEO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40675837477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 639.99

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 81
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[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): RICHARD FREEMAN
Mailing Address: 1423 WESLEYS RUN
City: GLADWYNE State: PA Zip Code: 19035-1049
FEC ID number of contributing federal political committee: C
Name of Employer: MEDICAL COLLEGE OF PENNSYLVANIA HOSPIT
Occupation: CEO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40676097477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial): JILL TILLMAN
Mailing Address: 596 SOUTH BRYN MAWR AVE
City: BRYN MAWR State: PA Zip Code: 19010-2004
FEC ID number of contributing federal political committee: C
Name of Employer: HAHNEMANN UNIVERSITY HOSPITAL
Occupation: CNO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40676267477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial): MICHAEL HALTER
Mailing Address: 111 RIGHTERS MILL RD
City: PENN VALLEY State: PA Zip Code: 19072-1312
FEC ID number of contributing federal political committee: C
Name of Employer: HAHNEMANN UNIVERSITY HOSPITAL
Occupation: CEO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 494.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40676327477
Amount of Each Receipt this Period: 247.00
P/R Deduction ($19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ **637.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 81
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[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): JON D FREEBERG
Mailing Address: 1833 S. ARABY DR.,#16
City: PALM SPRINGS State: CA Zip Code: 92264-4868
FEC ID number of contributing federal political committee: C
Name of Employer: DESERT REGIONAL MEDICAL CENTER
Occupation: MGR-MGD CARE/NETWRK DEV
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40529667477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial): IVORY L CROCKETT
Mailing Address: 341 WEST PACIFIC
City: WEBSTER GROVES State: MO Zip Code: 63119-2338
FEC ID number of contributing federal political committee: C
Name of Employer: FOREST PARK HOSPITAL
Occupation: COORD - PHYSICIAN RELATI
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40547567477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial): EDILBERTO EVANGELISTA
Mailing Address: 4805 WINNETKA CIRCLE
City: WOODLAND HILLS State: CA Zip Code: 91364-4618
FEC ID number of contributing federal political committee: C
Name of Employer: Tenet Healthcare Corporat-ion-Wilshire
Occupation: SR REIMBURSEMENT SPEC
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40717317477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 390.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 10 / 81
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[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): MICHAEL H FOCHT
Mailing Address: PO BOX 703
City: SANTA YNEZ | State: CA | Zip Code: 93460-0703
FEC ID number of contributing federal political committee: C
Name of Employer: TENET WZP
Occupation: RETIREE
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 693.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40718367477
Amount of Each Receipt this Period: 192.50
P/R Deduction ($38.50 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial): ESTEBAN F DIAZ
Mailing Address: 154 RANCH LANE
City: SANTA BARBARA | State: CA | Zip Code: 93111-2159
FEC ID number of contributing federal political committee: C
Name of Employer: TENET HEALTHCARE CORPORATION-HQ
Occupation: VP, CORP FIN PLANNING
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 390.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40718387477
Amount of Each Receipt this Period: 195.00
P/R Deduction ($15.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial): STEPHEN D FARBER
Mailing Address: 650 SAN YSIDRO RD
City: SANTA BARBARA | State: CA | Zip Code: 93108-1339
FEC ID number of contributing federal political committee: C
Name of Employer: TENET HEALTHCARE CORPORATION-HQ
Occupation: CHIEF FINANCIAL OFFICER
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 1040.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40718397477
Amount of Each Receipt this Period: 520.00
P/R Deduction ($40.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 907.50

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 81
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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): RICHARD B SILVER
Mailing Address: 938 VIA LOS PADRES
City: SANTA BARBARA State: CA Zip Code: 93111-1326
FEC ID number of contributing federal political committee: C
Name of Employer: TENET HEALTHCARE CORPORATION-HQ
Occupation: SVP & ASST GENERAL COUNS
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40718417477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial): ALAN R EWALT
Mailing Address: 396 HOT SPRINGS
City: SANTA BARBARA State: CA Zip Code: 93108-2010
FEC ID number of contributing federal political committee: C
Name of Employer: TENET HEALTHCARE CORPORATION-HQ
Occupation: EVP, HUMAN RESOURCES
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1040.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40718437477
Amount of Each Receipt this Period: 520.00
P/R Deduction ($40.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial): BARBARA B LUTON
Mailing Address: PO BOX 276
City: SANTA YNEZ State: CA Zip Code: 93460-0276
FEC ID number of contributing federal political committee: C
Name of Employer: TENET HEALTHCARE CORPORATION-HQ
Occupation: VP, CORP CITIZENSHIP
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40718497477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1040.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 81
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): HAROLD G ANDERSON
Mailing Address: 1836 HILLCREST ROAD
City: SANTA BARBARA | State: CA | Zip Code: 93103-1847
FEC ID number of contributing federal political committee: C
Name of Employer: TENET HEALTHCARE CORPORATION-HQ
Occupation: VP, COMMUNICATIONS
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40718507477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial): DIANA L TAKVAM
Mailing Address: 262 MIDDLE ROAD -COTTAGE
City: MONTECITO | State: CA | Zip Code: 93108
FEC ID number of contributing federal political committee: C
Name of Employer: TENET HEALTHCARE CORPORATION-HQ
Occupation: VP, INVESTOR RELATIONS
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 650.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40718527477
Amount of Each Receipt this Period: 325.00
P/R Deduction ($25.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial): CHRISTI R SULZBACH
Mailing Address: 4862 VIA ROBLADA
City: SANTA BARBARA | State: CA | Zip Code: 93110-2328
FEC ID number of contributing federal political committee: C
Name of Employer: TENET HEALTHCARE CORPORATION-HQ
Occupation: CCO & GENERAL COUNSEL
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 760.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40718547477
Amount of Each Receipt this Period: 240.00
P/R Deduction ($40.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 825.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 81
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): LAWRENCE G HIXON
Mailing Address: 5215 PASEO CAMEO
City: SANTA BARBARA | State: CA | Zip Code: 93111-1133
FEC ID number of contributing federal political committee: C
Name of Employer: TENET HEALTHCARE CORPORATION-HQ
Occupation: VP, CORP FINANCIAL REPOR
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40718557477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial): JANELLE E BLANCO
Mailing Address: 1629 TORCIDA DR
City: LA CANADA | State: CA | Zip Code: 91011-2038
FEC ID number of contributing federal political committee: C
Name of Employer: TENET HEALTHCARE CORPORATION-HQ
Occupation: VP, GOVERNMENT RELATIONS
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40718657477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial): DENNIS L DENT
Mailing Address: 2545 ELK GROVE RD.
City: SOLVANG | State: CA | Zip Code: 93463-9609
FEC ID number of contributing federal political committee: C
Name of Employer: TENET HEALTHCARE CORPORATION-HQ
Occupation: SR DIR, ASST TREASURER
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 280.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40718747477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ **520.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 81
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): LEONARD ROSENFELD
Mailing Address: 2917 HANOVER AVE
City: DALLAS State: TX Zip Code: 75225-7843
FEC ID number of contributing federal political committee: C
Name of Employer: TENET HEALTHSYSTEM-TEXAS
Occupation: VP, QUALITY MANAGEMENT
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1040.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40720137477
Amount of Each Receipt this Period: 520.00
P/R Deduction ($40.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial): BARBARA J RIGOULOT
Mailing Address: 2026 HARWELL
City: GRAPEVINE State: TX Zip Code: 76051-4750
FEC ID number of contributing federal political committee: C
Name of Employer: TENET HEALTHSYSTEM-TEXAS
Occupation: DIR, PFS TRAINING
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40720327477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial): ROBERT J SCHWEBEL
Mailing Address: 12500 MERIT DRIVE #1312
City: DALLAS State: TX Zip Code: 75251-1520
FEC ID number of contributing federal political committee: C
Name of Employer: TENET HEALTHSYSTEM-TEXAS
Occupation: SR DIR, RISK MANAGEMENT
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 230.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40720347477
Amount of Each Receipt this Period: 100.00
P/R Deduction ($10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 750.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 81
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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): CINDY L LARKIN
Mailing Address: 4716 DE GREY LANE
City: PLANO | State: TX | Zip Code: 75093-7443
FEC ID number of contributing federal political committee: C
Name of Employer: TENET HEALTHSYSTEM-TEXAS
Occupation: SR DIR, MEASUREMENT SYS
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 208.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40720987477
Amount of Each Receipt this Period: 104.00
P/R Deduction ($8.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial): THOMAS WOLF
Mailing Address: 2813 MILLINGTON DRIVE
City: PLANO | State: TX | Zip Code: 75093-3590
FEC ID number of contributing federal political committee: C
Name of Employer: TENET HEALTHSYSTEM-TEXAS
Occupation: MGR, PHYSICIAN SVCS
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 416.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40720517477
Amount of Each Receipt this Period: 208.00
P/R Deduction ($16.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial): SUSAN R BEKAERT
Mailing Address: 6337 GLEN HOLLOW DRIVE
City: PLANO | State: TX | Zip Code: 75093-7508
FEC ID number of contributing federal political committee: C
Name of Employer: TENET HEALTHSYSTEM-TEXAS
Occupation: DIR, INFORMATION SYSTEMS
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40720547477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ **442.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 81
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): HANK D IRICK JR.
Mailing Address: 3305 ELAM CT
City: PLANO | State: TX | Zip Code: 75093-8087
FEC ID number of contributing federal political committee: C
Name of Employer: TENET HEALTHSYSTEM-TEXAS
Occupation: DIR, REIMBURSEMENT
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40720587477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial): GLENN A ROBINSON
Mailing Address: 1822 CHERRYBROOK DRIVE
City: NACOGDOCHES | State: TX | Zip Code: 75965-2103
FEC ID number of contributing federal political committee: C
Name of Employer: NACOGDOCHES MEDICAL CENTER
Occupation: CEO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40720627477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial): JILL KENNELLY
Mailing Address: 4815 HOLLY TREE DRIVE
City: DALLAS | State: TX | Zip Code: 75287-7222
FEC ID number of contributing federal political committee: C
Name of Employer: TENET HEALTHSYSTEM-TEXAS
Occupation: VP, STRATEGY & BUSINESS
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 390.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40720717477
Amount of Each Receipt this Period: 195.00
P/R Deduction ($15.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 585.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 17 / 81
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): CRAIG E SIMS
Mailing Address: 381 B PETER PAN DRIVE
City: DALLAS | State: TX | Zip Code: 75229-3908
FEC ID number of contributing federal political committee: C
Name of Employer: TRINITY MEDICAL CENTER
Occupation: CEO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 499.98
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40721167477
Amount of Each Receipt this Period: 249.99
P/R Deduction ($19.23 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial): DAVID R MAYEUX
Mailing Address: 1254 ROBIN DR.
City: ROANOKE | State: TX | Zip Code: 76262-9301
FEC ID number of contributing federal political committee: C
Name of Employer: TENET HEALTHSYSTEM-TEXAS
Occupation: EVP, ACQUISITIONS & DEVE
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1040.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40721217477
Amount of Each Receipt this Period: 520.00
P/R Deduction ($40.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial): MARGARET E CENTER
Mailing Address: 5801 MAIDSTONE DR
City: RICHARDSON | State: TX | Zip Code: 75082-4580
FEC ID number of contributing federal political committee: C
Name of Employer: TENET HEALTHSYSTEM-TEXAS
Occupation: VP, AUDIT SVCS
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40721227477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1029.99**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 18 / 81
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): KENNETH R TEEL
Mailing Address: 9501 BASKERVILLE
City: ROWLETT | State: TX | Zip Code: 75087-8777
FEC ID number of contributing federal political committee: C
Name of Employer: LAKE POINTE MEDICAL CENTER
Occupation: CEO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40721357477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial): TRAVIS W RODERICK
Mailing Address: 838 BEAR BRANCH CT
City: ROCKWALL | State: TX | Zip Code: 75087-3179
FEC ID number of contributing federal political committee: C
Name of Employer: RHD MEMORIAL MEDICAL CENTER
Occupation: CEO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40721387477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial): JOHN F BEALLE
Mailing Address: 7817 PENCROSS LANE
City: DALLAS | State: TX | Zip Code: 75248-3108
FEC ID number of contributing federal political committee: C
Name of Employer: TENET HEALTHSYSTEM-TEXAS
Occupation: VP, OPS REIMBURSEMENT
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40721457477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 650.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 19 / 81
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): JOHN B MCDONALD
Mailing Address: 2016 PEMBROKE AVE.
City: FORT WORTH State: TX Zip Code: 76110-1236
FEC ID number of contributing federal political committee: C
Name of Employer: TENET HEALTHSYSTEM-TEXAS
Occupation: SENIOR COUNSEL
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40721587477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial): WAYNE E COBB
Mailing Address: 5019 SANDLEWOOD LANE
City: ARLINGTON State: TX Zip Code: 76017-6045
FEC ID number of contributing federal political committee: C
Name of Employer: TENET HEALTHSYSTEM-TEXAS
Occupation: MGR, TAX
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40721647477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial): ROBIN L MALLETTE
Mailing Address: 1448 GARDENIA STREET
City: IRVING State: TX Zip Code: 75063-4232
FEC ID number of contributing federal political committee: C
Name of Employer: TENET HEALTHSYSTEM-TEXAS
Occupation: MGR, AUDIT SVCS
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40721837477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 520.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 20 / 81
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial)
TERESA L HUSKEY
Mailing Address 4333 PERSHING AVE
City: FT WORTH State: TX Zip Code: 76107-4243
FEC ID number of contributing federal political committee: C
Name of Employer: TENET HEALTHSYSTEM-TEXAS
Occupation: SR DIR, GOVT RELATIONS
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40721867477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial)
SHERRY J HENDERSON
Mailing Address 6112 MEADOWCREST LANE
City: SACHSE State: TX Zip Code: 75048-3528
FEC ID number of contributing federal political committee: C
Name of Employer: DOCTORS HOSPITAL-DALLAS
Occupation: CFO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 390.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40721877477
Amount of Each Receipt this Period: 195.00
P/R Deduction ($15.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial)
ROBERT SMITH
Mailing Address 2723 LAKERIDGE
City: CARROLLTON State: TX Zip Code: 75006-4723
FEC ID number of contributing federal political committee: C
Name of Employer: TENET HEALTHSYSTEM-TEXAS
Occupation: VP, A&D
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1300.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40722007477
Amount of Each Receipt this Period: 650.00
P/R Deduction ($50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 975.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 21 / 81
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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): STACEY GERIG
Mailing Address: 2308 LANDUE LANE
City: ODESSA | State: TX | Zip Code: 79762-5134
FEC ID number of contributing federal political committee: C
Name of Employer: TENET WZP
Occupation: RETIREE
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 603.12
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40722037477
Amount of Each Receipt this Period: 43.08
P/R Deduction ($43.08 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial): ELIZABETH PRIMEAUX
Mailing Address: 2229 SCENIC SHORE DRIVE
City: SEABROOK | State: TX | Zip Code: 77586-1673
FEC ID number of contributing federal political committee: C
Name of Employer: CYPRESS FAIRBANKS MEDICAL CENTER
Occupation: CEO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40722057477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial): CHARLES R SLATON
Mailing Address: 13737 NOEL ROAD
City: DALLAS | State: TX | Zip Code: 75240-1331
FEC ID number of contributing federal political committee: C
Name of Employer: TENET HEALTHSYSTEM-TEXAS
Occupation: SVP, REGIONAL OPERATIONS
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 384.60
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40722097477
Amount of Each Receipt this Period: 134.61
P/R Deduction ($19.23 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ **437.69**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 81
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): JOE D THOMASON
Mailing Address: 905 AVES
City: EL PASO State: TX Zip Code: 79912
FEC ID number of contributing federal political committee: C
Name of Employer: BROWNSVILLE MEDICAL CENTER
Occupation: CEO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40722217477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial): ROBERT S HENDLER
Mailing Address: 11122 W RICKS CIRCLE
City: DALLAS State: TX Zip Code: 75230-3032
FEC ID number of contributing federal political committee: C
Name of Employer: TENET HEALTHSYSTEM-TEXAS
Occupation: VP, MEDICAL AFFAIRS
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 1300.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40722287477
Amount of Each Receipt this Period: 650.00
P/R Deduction ($50.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial): RHONDA ROGERS
Mailing Address: 281 CR 2153
City: NACOGDOCHES State: TX Zip Code: 75965
FEC ID number of contributing federal political committee: C
Name of Employer: NACOGDOCHES MEDICAL CENTER
Occupation: CFO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40722447477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ **910.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 81
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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): CONLEY S CERVANTES
Mailing Address: 819 CAMBRIDGE MANOR LANE
City: COPPELL State: TX Zip Code: 75019-6105
FEC ID number of contributing federal political committee: C
Name of Employer: TENET HEALTHSYSTEM-TEXAS
Occupation: DIR, MANAGED CARE BUS DE
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 312.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40722477477
Amount of Each Receipt this Period: 156.00
P/R Deduction ($12.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial): GARY ROBINSON
Mailing Address: 3412 DREXEL DRIVE
City: HIGHLAND PARK State: TX Zip Code: 75205-2904
FEC ID number of contributing federal political committee: C
Name of Employer: TENET HEALTHSYSTEM-TEXAS
Occupation: SVP & ASST GENERAL COUNS
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40722587477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial): CONNIE R EMERY
Mailing Address: 502 RIDGEDALE DR
City: GARLAND State: TX Zip Code: 75041-3322
FEC ID number of contributing federal political committee: C
Name of Employer: TENET HEALTHSYSTEM-TEXAS
Occupation: VP, AUDIT SVCS
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 280.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40722597477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ **546.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 24 / 81
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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial)
DEBRA L ANDONIE-WALL
Mailing Address 2887 CLEAR SPRINGS CT
City: RICHARDSON State: TX Zip Code: 75082-4210
FEC ID number of contributing federal political committee: C
Name of Employer: TENET HEALTHSYSTEM-TEXAS
Occupation: SR DIR, RETIREMENT PLANS
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40722627477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial)
WINFRED TSE
Mailing Address 4502 RISINGHILL DRIVE
City: PLANO State: TX Zip Code: 75024-7335
FEC ID number of contributing federal political committee: C
Name of Employer: TENET HEALTHSYSTEM-TEXAS
Occupation: DIR, PLNG & OP STRATEGY
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40722647477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial)
ROBERT S FREYMULLER
Mailing Address 134 MYSTIC LANE
City: JUPITER State: FL Zip Code: 33458-3313
FEC ID number of contributing federal political committee: C
Name of Employer: GOOD SAMARITAN MEDICAL CENTER
Occupation: CEO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 280.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40722687477
Amount of Each Receipt this Period: 20.00
P/R Deduction ($20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 540.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 81
(check only one)
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial)
RICHARD W FISKE
Mailing Address 5590 SPRING VALLEY #201C
City: DALLAS State: TX Zip Code: 75254-3057
FEC ID number of contributing federal political committee: C
Name of Employer: TENET HEALTHSYSTEM-TEXAS
Occupation: VP, A&D
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40722697477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial)
STEPHANIE SLOGGETT-O'DELL
Mailing Address 2524 S EDGEWATER DRIVE
City: SPRINGFIELD State: MO Zip Code: 65804-3458
FEC ID number of contributing federal political committee: C
Name of Employer: TENET HEALTHSYSTEM-TEXAS
Occupation: VP, LABOR RELATIONS
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40722707477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial)
DOUGLAS E RABE
Mailing Address 9923 CAPRIDGE DR
City: DALLAS State: TX Zip Code: 75238-3469
FEC ID number of contributing federal political committee: C
Name of Employer: TENET HEALTHSYSTEM-TEXAS
Occupation: VP, TAXATION
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40722737477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 780.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 81
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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): MICHELE EARNHART
Mailing Address: 813 OAK FOREST LANE
City: ALLEN | State: TX | Zip Code: 75002-5864
FEC ID number of contributing federal political committee: C
Name of Employer: TENET HEALTHSYSTEM-TEXAS
Occupation: SR DIR, PATIENT MGT APPS
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40722757477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial): DONALD W THAYER
Mailing Address: 8920 MARTIN DRIVE
City: N.RICHLAND HILL | State: TX | Zip Code: 76180-4802
FEC ID number of contributing federal political committee: C
Name of Employer: TENET HEALTHSYSTEM-TEXAS
Occupation: VP, A&D
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 240.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40722857477
Amount of Each Receipt this Period: 110.00
P/R Deduction ($10.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial): DAVID S DEARMAN
Mailing Address: 4836 HOLLYTREE DRIVE
City: DALLAS | State: TX | Zip Code: 75287-7200
FEC ID number of contributing federal political committee: C
Name of Employer: TENET HEALTHSYSTEM-TEXAS
Occupation: SVP, OPERATIONS FINANCE
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40722987477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 500.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 81
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[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): STEPHEN TULLMAN
Mailing Address: 382B WATERFORD WAY
City: CALABASAS State: CA Zip Code: 91302-5892
FEC ID number of contributing federal political committee: C
Name of Employer: USC UNIVERSITY HOSPITAL
Occupation: CEO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40723177477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial): WILLIAM T MOORE
Mailing Address: 3014 CASTLE PINES DRIVE
City: DULUTH State: GA Zip Code: 30097-2039
FEC ID number of contributing federal political committee: C
Name of Employer: ATLANTA MEDICAL CENTER
Occupation: CEO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40723187477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial): CYNTHIA HEITZMAN
Mailing Address: 7987 SW 201 CT.
City: DUNNELLON State: FL Zip Code: 34431-5147
FEC ID number of contributing federal political committee: C
Name of Employer: SEVEN RIVERS COMMUNITY HOSPITAL
Occupation: CNO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 220.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40723297477
Amount of Each Receipt this Period: 90.00
P/R Deduction ($10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ **610.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 81
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[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): PETER A MARMERSTEIN
Mailing Address: 2479 EAGLE RUN DRIVE .
City: WESTON State: FL Zip Code: 33327-1424
FEC ID number of contributing federal political committee: C
Name of Employer: ST. MARY'S MEDICAL CENTER
Occupation: CEO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40723427477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial): GARRY M OLNEY
Mailing Address: 1221 S. CONGRESS #624
City: AUSTIN State: TX Zip Code: 78704-2407
FEC ID number of contributing federal political committee: C
Name of Employer: TENET HEALTHSYSTEM-TEXAS
Occupation: SR DIR, RN PRAC/QUAL/SVC
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 340.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40723437477
Amount of Each Receipt this Period: 80.00
P/R Deduction ($20.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial): BARRY G WEINBAUM
Mailing Address: 2870 HIDDEN VALLEY ROAD
City: LA JOLLA State: CA Zip Code: 92037-4025
FEC ID number of contributing federal political committee: C
Name of Employer: ALVARADO HOSPITAL MEDICAL CENTER
Occupation: CEO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40723537477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 600.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 81
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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial)
JEFFREY S FRIEDMAN
Mailing Address 24 ROSEDOWN DRIVE
City: DESTREHAN State: LA Zip Code: 70047-2531
FEC ID number of contributing federal political committee: C
Name of Employer: Tenet HealthSystem-Gulf States Region
Occupation: DIR, SYNDICATIONS & ACQ
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40723567477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial)
JOHN QUINN
Mailing Address 1203 TOLMOUNT COURT
City: PEACHTREE CITY State: GA Zip Code: 30269-3348
FEC ID number of contributing federal political committee: C
Name of Employer: SOUTH FULTON MEDICAL CENTER
Occupation: COO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40723607477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial)
RONALD STERN
Mailing Address 13240 SW 28TH CT
City: DAVIE State: FL Zip Code: 33330-1223
FEC ID number of contributing federal political committee: C
Name of Employer: CENTURY CITY HOSPITAL
Occupation: CEO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 499.98
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40723707477
Amount of Each Receipt this Period: 249.99
P/R Deduction ($19.23 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 639.99

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 81
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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial)
WALT MICKENS
Mailing Address 116 DOCKSIDE CIRCLE
City: WESTON State: FL Zip Code: 33327-1100
FEC ID number of contributing federal political committee: C
Name of Employer: WEST BOCA MEDICAL CENTER
Occupation: CEO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40723767477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial)
ANDREA L WOZNIAK
Mailing Address 3161 SAND MARSH LN
City: MT PLEASANT State: SC Zip Code: 29466-9091
FEC ID number of contributing federal political committee: C
Name of Employer: EAST COOPER REGIONAL MEDICAL CENTER
Occupation: CEO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40723947477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial)
DENNIS J PHILLIPS
Mailing Address 431D 4TH ST CIRCLE N W
City: HICKORY State: NC Zip Code: 28601-9021
FEC ID number of contributing federal political committee: C
Name of Employer: FRYE REGIONAL MEDICAL CENTER
Occupation: CEO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40724167477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ **520.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 31 / 81
(check only one)
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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): HARRIS KOENIG
Mailing Address: 43682 PIASANO PLACE
City: TEMECULA State: CA Zip Code: 92592-2606
FEC ID number of contributing federal political committee: C
Name of Employer: DANIEL FREEMAN MEMORIAL HOSPITAL
Occupation: CEO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40724207477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial): WILLIAM C HENNING
Mailing Address: 2735 LONG GROVE DRIVE
City: MARIETTA State: GA Zip Code: 30062-8721
FEC ID number of contributing federal political committee: C
Name of Employer: OTHER EXECUTIVES
Occupation: DIR, REGIONAL BUS DEV
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40724477477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial): JAMES D DORIS
Mailing Address: 1814 SUMTER RIDGE CRT
City: CHESTERFIELD State: MO Zip Code: 63017-6732
FEC ID number of contributing federal political committee: C
Name of Employer: ST. ALEXIUS HOSPITAL - JEFFERSON CAMPU
Occupation: CEO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40724487477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 650.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 32 / 81
(check only one)
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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): RALPH ALEMAN
Mailing Address: 7588 NW 51 ST PLACE
City: CORAL SPRINGS | State: FL | Zip Code: 33067-2053
FEC ID number of contributing federal political committee: C
Name of Employer: PALMETTO GENERAL HOSPITAL
Occupation: CEO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40724537477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial): JUDY BENJAMIN
Mailing Address: 2261 LENOX RIDGE CT
City: ATLANTA | State: GA | Zip Code: 30319-3877
FEC ID number of contributing federal political committee: C
Name of Employer: Tenet HealthSystem-Southern States Reg
Occupation: VP, STRATEGY & BUSINESS
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40724567477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial): ALEX CONTRERAS-SOTO
Mailing Address: 3363 SW 180 WAY
City: MIRAMAR | State: FL | Zip Code: 33029-1639
FEC ID number of contributing federal political committee: C
Name of Employer: PALMETTO GENERAL HOSPITAL
Occupation: COO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 280.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40724697477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 650.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): AURELIO M FERNANDEZ
Mailing Address: 8540 N.LAKE DASHA DRIVE
City: PLANTATION State: FL Zip Code: 33324
FEC ID number of contributing federal political committee: C
Name of Employer: FLORIDA MEDICAL CENTER
Occupation: CEO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40724747477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial): MARK H BRYAN
Mailing Address: 10378 N.W. 63 DR.
City: PARKLAND State: FL Zip Code: 33076-2351
FEC ID number of contributing federal political committee: C
Name of Employer: OTHER EXECUTIVES
Occupation: VP, MARKET OPERATIONS
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 374.92
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40724757477
Amount of Each Receipt this Period: 187.46
P/R Deduction ($14.42 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial): EDWARD SCHRECK
Mailing Address: 245 HILLSIDE RD.
City: SOUTH PASADENA State: CA Zip Code: 91030-1611
FEC ID number of contributing federal political committee: C
Name of Employer: Tenet HealthSystem-Western Division
Occupation: SVP, REGIONAL OPERATIONS
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40724827477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 707.46

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 81
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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): GARRY L GAUSE
Mailing Address: 1150 LAKE COLANY LANE
City: VESTAVIA HILLS | State: AL | Zip Code: 35242-7423
FEC ID number of contributing federal political committee: C
Name of Employer: BROOKWOOD MEDICAL CENTER
Occupation: CEO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40724877477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial): GAIL DALY
Mailing Address: 8450 MOORCROFT AVE
City: WEST HILLS | State: CA | Zip Code: 91304-2225
FEC ID number of contributing federal political committee: C
Name of Employer: MIDWAY HOSPITAL MEDICAL CENTER
Occupation: CNO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40724837477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial): WILLIAM SEED
Mailing Address: 2503 MASON OAKS DRIVE
City: VALRICO | State: FL | Zip Code: 33594-6498
FEC ID number of contributing federal political committee: C
Name of Employer: Tenet HealthSystem-Florida Region
Occupation: DIR. C&D
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40725027477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 390.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 81
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): DAVID L ARCHER
Mailing Address: 2594 HOCKSETT COVE
City: GERMANTOWN State: TN Zip Code: 38139-6655
FEC ID number of contributing federal political committee: C
Name of Employer: SAINT FRANCIS HOSPITAL
Occupation: CEO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 1040.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40725047477
Amount of Each Receipt this Period: 520.00
P/R Deduction ($40.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial): DENNIS R BRUNS
Mailing Address: 16 HEATHER LANE
City: HILTON HEAD ISL State: SC Zip Code: 29926-4206
FEC ID number of contributing federal political committee: C
Name of Employer: HILTON HEAD HOSPITAL
Occupation: CEO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40725187477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial): STEVEN MAEKAWA
Mailing Address: 10313 NORTHVALE ROAD
City: LOS ANGELES State: CA Zip Code: 90064-4330
FEC ID number of contributing federal political committee: C
Name of Employer: CENTURY CITY HOSPITAL
Occupation: CFO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40725217477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ **910.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 81
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): JOHN W SANDERS
Mailing Address: 9192 FOXBRIDGE DRIVE
City: SUNSET HILLS | State: MO | Zip Code: 63127-1362
FEC ID number of contributing federal political committee: C
Name of Employer: FOREST PARK HOSPITAL
Occupation: CEO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40725237477
Amount of Each Receipt this Period: 240.00
P/R Deduction ($20.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial): DALE R MULDER
Mailing Address: 1301 FIRST STR.
City: KENNETT | State: MO | Zip Code: 63857
FEC ID number of contributing federal political committee: C
Name of Employer: TWIN RIVERS REGIONAL MEDICAL CENTER
Occupation: CEO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40725247477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial): LARRY W KELLER
Mailing Address: 1409 MARTHA LEEVILE PIKE
City: LEBANON | State: TN | Zip Code: 37087
FEC ID number of contributing federal political committee: C
Name of Employer: UNIVERSITY MEDICAL CENTER
Occupation: CEO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40725287477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ **760.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 37 / 81
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): DEBORAH G WEBBER
Mailing Address: 5302 STONEHEDGE CT
City: YORBA LINDA | State: CA | Zip Code: 92886-4318
FEC ID number of contributing federal political committee: C
Name of Employer: LAKEWOOD REGIONAL MEDICAL CENTER
Occupation: COO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 499.98
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40725317477
Amount of Each Receipt this Period: 249.99
P/R Deduction ($19.23 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial): SUELLEN SMITH
Mailing Address: 84 TIERRA VISTA LANE
City: PASO ROBLES | State: CA | Zip Code: 93446-9702
FEC ID number of contributing federal political committee: C
Name of Employer: TWIN CITIES COMMUNITY HOSPITAL
Occupation: COO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 280.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40725457477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial): PAMELA J BUXTON
Mailing Address: 77-532 BURRUS COURT
City: PALM DESERT | State: CA | Zip Code: 92211-0485
FEC ID number of contributing federal political committee: C
Name of Employer: JOHN F. KENNEDY MEMORIAL HOSPITAL
Occupation: CNO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 280.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40725537477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 509.99

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 / 81
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): SUZANNE E GALES
Mailing Address: 788 ARBLAY DRIVE
City: MANCHESTER State: MO Zip Code: 63011-3536
FEC ID number of contributing federal political committee: C
Name of Employer: OTHER EXECUTIVES
Occupation: MGR, STRATEGIC PLANNING
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40725547477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial): ROBERT S ADCOCK
Mailing Address: 1519 REDWOOD CIRCLE
City: SLIDELL State: LA Zip Code: 70458-3139
FEC ID number of contributing federal political committee: C
Name of Employer: DOCTORS HOSPITAL OF JEFFERSON
Occupation: COO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40725827477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial): PHILIP H WALKLEY
Mailing Address: 3024 STADIUM BLVD.
City: JONESBORO State: AR Zip Code: 72401-7415
FEC ID number of contributing federal political committee: C
Name of Employer: REGIONAL MEDICAL CENTER OF NORTHEAST A
Occupation: CEO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40725837477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ **520.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 39 / 81
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial)
JOE L DENTON
Mailing Address 1654 CROSSGATE DRIVE
City: VESTAVIA HILLS State: AL Zip Code: 35216-3186
FEC ID number of contributing federal political committee: C
Name of Employer: BROOKWOOD MEDICAL CENTER
Occupation: CFO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40725877477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial)
GERALD L PARTON
Mailing Address 613 ENGLISH TURN DRIVE
City: NEW ORLEANS State: LA Zip Code: 70131-3324
FEC ID number of contributing federal political committee: C
Name of Employer: MEADOWCREST HOSPITAL
Occupation: CEO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 499.98
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40725907477
Amount of Each Receipt this Period: 249.99
P/R Deduction ($19.23 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial)
STANLEY M MCCOY
Mailing Address 204 RIVER OAKS LANE
City: RUSSELLVILLE State: AR Zip Code: 72802-2351
FEC ID number of contributing federal political committee: C
Name of Employer: SAINT MARY'S REGIONAL MEDICAL CENTER
Occupation: CEO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40725997477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 639.99

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 40 / 81
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): WENDALL J VAN ES
Mailing Address: 511 SOUTH TULSA
City: RUSSELLVILLE State: AR Zip Code: 72801-5641
FEC ID number of contributing federal political committee: C
Name of Employer: SAINT MARY'S REGIONAL MEDICAL CENTER
Occupation: CFO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40726017477
Amount of Each Receipt this Period: 120.00
P/R Deduction ($10.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial): JERRY D MABRY
Mailing Address: 191D MALVERN
City: HOT SPRINGS State: AR Zip Code: 71901-7752
FEC ID number of contributing federal political committee: C
Name of Employer: NATIONAL PARK MEDICAL CENTER
Occupation: CEO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 461.52
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40726057477
Amount of Each Receipt this Period: 211.53
P/R Deduction ($19.23 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial): DEREK T SPELLMAN
Mailing Address: 551B 10TH AVE SOUTH
City: BIRMINGHAM State: AL Zip Code: 35222-4102
FEC ID number of contributing federal political committee: C
Name of Employer: BROOKWOOD MEDICAL CENTER
Occupation: CNO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40726147477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 591.53

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 41 / 81
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): ALAN E HODGES
Mailing Address: 231 COIN DU LESTIN
City: SLIDELL | State: LA | Zip Code: 70460-3509
FEC ID number of contributing federal political committee: C
Name of Employer: DOCTORS HOSPITAL OF JEFFERSON
Occupation: CFO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40726217477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial): MARTIN J FISCHER
Mailing Address: 839 HIGH LAKE DRIVE
City: BATON ROUGE | State: LA | Zip Code: 70810-4340
FEC ID number of contributing federal political committee: C
Name of Employer: Tenet HealthSystem-Gulf States Region
Occupation: CO CEO-SOUTHERN MEDICAL
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 499.98
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40726307477
Amount of Each Receipt this Period: 249.99
P/R Deduction ($19.23 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial): KENNETH P KELLER
Mailing Address: 1826 HAVEMEYER LANE
City: REDONDO BEACH | State: CA | Zip Code: 90278-4715
FEC ID number of contributing federal political committee: C
Name of Employer: OTHER EXECUTIVES
Occupation: DIR, MANAGED CARE BUS DE
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 880.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40726327477
Amount of Each Receipt this Period: 360.00
P/R Deduction ($40.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 739.99

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 81
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): DENISE DANNA
Mailing Address: 4432 ITHICA STREET
City: METAIRIE State: LA Zip Code: 70006-2822
FEC ID number of contributing federal political committee: C
Name of Employer: MEMORIAL MEDICAL CENTER-B-APTIST CAMPUS
Occupation: CNO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40726407477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial): NORMA P ADAMS
Mailing Address: 3455 RIVER HGTS CROSSING
City: MARIETTA State: GA Zip Code: 30067-4501
FEC ID number of contributing federal political committee: C
Name of Employer: ATLANTA MEDICAL CENTER
Occupation: ASST ADMINISTRATOR
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40726507477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial): LEX GUINN
Mailing Address: 2715 SABLE CT
City: PEARLAND State: TX Zip Code: 77584-9278
FEC ID number of contributing federal political committee: C
Name of Employer: PARK PLAZA HOSPITAL
Occupation: CEO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 480.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40726537477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 520.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 43 / 81
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): DAVID C MATTHEWS
Mailing Address: 4812 LILLIAN AVE
City: PALM BCH GARDEN | State: FL | Zip Code: 33418-6138
FEC ID number of contributing federal political committee: C
Name of Employer: PALM BEACH GARDENS MEDICAL CENTER
Occupation: CONSULTANT
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 1040.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40726557477
Amount of Each Receipt this Period: 520.00
P/R Deduction ($40.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial): TERRY WHEELER
Mailing Address: 1250 SPRINGWATER
City: MANDEVILLE | State: LA | Zip Code: 70471-7436
FEC ID number of contributing federal political committee: C
Name of Employer: CYPRESS FAIRBANKS MEDICAL CENTER
Occupation: CEO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40726567477
Amount of Each Receipt this Period: 40.00
P/R Deduction ($20.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial): JOSEPH M NOWICKI
Mailing Address: 28512 VIA PRIMAVERA
City: SAN JUAN CAPIST | State: CA | Zip Code: 92675-5513
FEC ID number of contributing federal political committee: C
Name of Employer: Tenet HealthSystem-Western Division
Occupation: VP, REGIONAL FINANCE OPS
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 280.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40726617477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 690.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 44 / 81
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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): GARY L HONTS
Mailing Address: 29 OGLETHORPE LN
City: HILTON HEAD | State: SC | Zip Code: 29926-4724
FEC ID number of contributing federal political committee: C
Name of Employer: HILTON HEAD HOSPITAL | Occupation: COO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40726647477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial): JACK B DUSENBERY
Mailing Address: 9073 BEAVER MEADOWS LANE
City: CEDAR FALLS | State: IA | Zip Code: 50613-9110
FEC ID number of contributing federal political committee: C
Name of Employer: EAST COOPER REGIONAL MEDICAL CENTER | Occupation: CEO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40726667477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial): STEVEN WEISS
Mailing Address: 1139 SUMMERLAKE ESTATES
City: FENTON | State: MO | Zip Code: 63026-3285
FEC ID number of contributing federal political committee: C
Name of Employer: OTHER EXECUTIVES | Occupation: VP,FINANCE-ST.LOUIS MKT
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 280.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40726727477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 520.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 45 / 81
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): WILLIAM B SPARKS
Mailing Address: 107 ARTHUR LANE
City: RUSSELLVILLE | State: AR | Zip Code: 72802-2135
FEC ID number of contributing federal political committee: C
Name of Employer: SAINT MARY'S REGIONAL MEDICAL CENTER
Occupation: COO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 375.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40726767477
Amount of Each Receipt this Period: 180.00
P/R Deduction ($15.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial): DAN BROTHMAN
Mailing Address: 1872 SHARON LANE
City: SANTA ANA | State: CA | Zip Code: 92705-5910
FEC ID number of contributing federal political committee: C
Name of Employer: WESTERN MEDICAL CENTER-SANTA ANA
Occupation: CEO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40726817477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial): EDWARD A RUSH
Mailing Address: 533 3RD AVE., NW
City: HICKORY | State: NC | Zip Code: 28601-4917
FEC ID number of contributing federal political committee: C
Name of Employer: FRYE REGIONAL MEDICAL CENTER
Occupation: COO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 280.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40726847477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ **570.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 46 / 81
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): MICHELE C MEYER
Mailing Address: 230 GRIMSLEY N. BLUFF
City: ST LOUIS | State: MO | Zip Code: 63129
FEC ID number of contributing federal political committee: C
Name of Employer: DES PERES HOSPITAL | Occupation: CEO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 494.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40726857477
Amount of Each Receipt this Period: 247.00
P/R Deduction ($19.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial): CLIFF BAUER
Mailing Address: 401 NW 131ST AVE.
City: PLANTATION | State: FL | Zip Code: 33325-2217
FEC ID number of contributing federal political committee: C
Name of Employer: NORTH RIDGE MEDICAL CENTER | Occupation: CEO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 650.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40726907477
Amount of Each Receipt this Period: 325.00
P/R Deduction ($25.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial): SHIRLEY HEIDERSBACH
Mailing Address: 13458 WEDDINGTON ST
City: SHERMAN OAKS | State: CA | Zip Code: 91401-5927
FEC ID number of contributing federal political committee: C
Name of Employer: ENCINO-TARZANA REGIONAL MEDICAL CENTE | Occupation: CND
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 280.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40726857477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ **702.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 / 81
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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial)
MICHAEL P APPELHANS
Mailing Address 30131 SADDLERIDGE DRIVE
City: SAN JUAN CAPIST
State: CA
Zip Code: 92675-1550
FEC ID number of contributing federal political committee: C
Name of Employer: Tenet HealthSystem-Western Division
Occupation: VP & ASST GENERAL COUNSE
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 390.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40727047477
Amount of Each Receipt this Period: 195.00
P/R Deduction ($15.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial)
DAVID ANDERSON
Mailing Address 504 MENZIES DRIVE
City: ROCK HILL
State: SC
Zip Code: 29730-7467
FEC ID number of contributing federal political committee: C
Name of Employer: PIEDMONT MEDICAL CENTER
Occupation: COO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40727077477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial)
CHRISTOPHER HUMMER
Mailing Address 1170 CLEVELAND AVE
City: EAST POINT
State: GA
Zip Code: 30344-3800
FEC ID number of contributing federal political committee: C
Name of Employer: SOUTH FULTON MEDICAL CENTER
Occupation: CEO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40727087477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 455.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 / 81
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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): PAUL D ECHELARD
Mailing Address: 5360 LINTON BOULEVARD
City: DELRAY BEACH State: FL Zip Code: 33484-6538
FEC ID number of contributing federal political committee: C
Name of Employer: PINECREST REHAB HOSPITAL
Occupation: CEO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 499.98
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40727097477
Amount of Each Receipt this Period: 249.99
P/R Deduction ($19.23 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial): SAMUEL G HARRIS
Mailing Address: 933 HAVENHURST
City: WEST HOLLYWOOD State: CA Zip Code: 90046-6919
FEC ID number of contributing federal political committee: C
Name of Employer: Tenet HealthSystem-Western Division
Occupation: MGR, REIMBURSEMENT
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40727117477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial): STEVEN DOMINGUEZ
Mailing Address: 11620 WILSHIRE BLVD 1100
City: LOS ANGELES State: CA Zip Code: 90025-1780
FEC ID number of contributing federal political committee: C
Name of Employer: Tenet Healthcare Corporation-Wilshire
Occupation: SVP, GOVT PROGRAMS
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 650.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40727177477
Amount of Each Receipt this Period: 325.00
P/R Deduction ($25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 704.99

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): MARY HAMMACK
Mailing Address: 243 N QUAIL LANE
City: ORANGE State: CA Zip Code: 92869-3142
FEC ID number of contributing federal political committee: C
Name of Employer: WESTERN MEDICAL CENTER-SA-NTA ANA
Occupation: CFO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40727387477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial): CRAIG C ARMIN
Mailing Address: 23510 BERDON STREET
City: WOODLAND HILLS State: CA Zip Code: 91367-3004
FEC ID number of contributing federal political committee: C
Name of Employer: Tenet Healthcare Corporat-ion-Wilshire
Occupation: VP, GOVT PROGRAMS
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 650.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40727417477
Amount of Each Receipt this Period: 325.00
P/R Deduction ($25.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial): DAN F AUSMAN
Mailing Address: 231 D6 LE SOLEIL
City: LAGUNA NIGUEL State: CA Zip Code: 92677-5524
FEC ID number of contributing federal political committee: C
Name of Employer: IRVINE REGIONAL HOSPITAL MEDICAL CENTE
Occupation: CEO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 340.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40727467477
Amount of Each Receipt this Period: 80.00
P/R Deduction ($20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 535.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 50 / 81
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): MICHAEL A REMBIS
Mailing Address: 19265 ALLANDALE DR.
City: TARZANA State: CA Zip Code: 91356-5817
FEC ID number of contributing federal political committee: C
Name of Employer: CYPRESS FAIRBANKS MEDICAL CENTER
Occupation: CEO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40727647477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial): KENT G CLAYTON
Mailing Address: 81220 KINGSTON HEATH
City: LA QUINTA State: CA Zip Code: 92253-8740
FEC ID number of contributing federal political committee: C
Name of Employer: JOHN F. KENNEDY MEMORIAL HOSPITAL
Occupation: CEO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 380.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40727617477
Amount of Each Receipt this Period: 120.00
P/R Deduction ($20.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial): KAREN GULBENKIAN
Mailing Address: 2847 CALLE HERALDO
City: SAN CLEMENTE State: CA Zip Code: 92673-3534
FEC ID number of contributing federal political committee: C
Name of Employer: GARDEN GROVE HOSPITAL
Occupation: COO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 280.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40727677477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ **510.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 51 / 81
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): DAVID MAUSS
Mailing Address: 16477 SANTA BIANCA
City: HACIENDA HEIGHT | State: CA | Zip Code: 91745-4256
FEC ID number of contributing federal political committee: C
Name of Employer: Tenet HealthSystem-Western Division
Occupation: SR DIR, BUSINESS DEV
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1300.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40727917477
Amount of Each Receipt this Period: 650.00
P/R Deduction ($50.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial): MITCHELL ZEVIN
Mailing Address: 17337 TRAMONTO DR.#211
City: PACIFIC PALISAD | State: CA | Zip Code: 90272-3123
FEC ID number of contributing federal political committee: C
Name of Employer: ENCINO-TARZANA REGIONAL MEDICAL CENTER
Occupation: ASSOCIATE ADMINISTRATOR
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40727927477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial): KENNETH K WESTBROOK
Mailing Address: 30932 HUNT CLUB DRIVE
City: SAN JUAN CAPO | State: CA | Zip Code: 92675-1918
FEC ID number of contributing federal political committee: C
Name of Employer: Tenet HealthSystem-Western Division
Occupation: SVP, REGIONAL OPERATIONS
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40727947477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1040.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 52 / 81
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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): TRUMAN GATES
Mailing Address: 84-381 VIA AMANTE
City: PALM SPRINGS | State: CA | Zip Code: 92264
FEC ID number of contributing federal political committee: C
Name of Employer: DESERT REGIONAL MEDICAL CENTER
Occupation: CEO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40727977477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial): SANDRA M CHESTER
Mailing Address: 1435 BEAUDRY BLVD.
City: GLENDALE | State: CA | Zip Code: 91208-1707
FEC ID number of contributing federal political committee: C
Name of Employer: GREATER EL MONTE COMMUNITY HOSPITAL
Occupation: CEO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40728017477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial): CANDACE L MARKWITH
Mailing Address: 5857 E THE TOLEDO
City: LONG BEACH | State: CA | Zip Code: 90803-4048
FEC ID number of contributing federal political committee: C
Name of Employer: REDDING MEDICAL CENTER
Occupation: CEO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40728037477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 780.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 53 / 81
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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): HAROLD E CHILTON
Mailing Address: 1680 EL CASERIO CT
City: SAN LUIS OBISPO | State: CA | Zip Code: 93401-6001
FEC ID number of contributing federal political committee: C
Name of Employer: REDDING MEDICAL CENTER
Occupation: CEO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40728057477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial): KATHERINE A MEDEIROS
Mailing Address: 6724 ESTELLE AVENUE
City: RIVERBANK | State: CA | Zip Code: 95367-2155
FEC ID number of contributing federal political committee: C
Name of Employer: DOCTORS HOSPITAL OF MANTE-CA
Occupation: CEO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 780.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40728157477
Amount of Each Receipt this Period: 390.00
P/R Deduction ($30.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial): PAM F ALDERSON
Mailing Address: 3715 TERRACE DR
City: CHINO HILLS | State: CA | Zip Code: 91709-2571
FEC ID number of contributing federal political committee: C
Name of Employer: FOUNTAIN VALLEY REGIONAL HOSPITAL
Occupation: CFO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 280.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40728177477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 780.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 54 / 81
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[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial)
J. SCOTT SCHOEFFEL
Mailing Address 24361 TAXCO DRIVE
City: DANA POINT State: CA Zip Code: 92629-1330
FEC ID number of contributing federal political committee: C
Name of Employer: Tenet HealthSystem-Western Division
Occupation: VP & ASST GENERAL COUNSE
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40728377477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial)
MICHELE M FINNEY
Mailing Address 21521 TURTLEDOVE STREET
City: TRABUCO CANYON State: CA Zip Code: 92679-3496
FEC ID number of contributing federal political committee: C
Name of Employer: LOS ALAMITOS MEDICAL CENTER
Occupation: CEO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40728397477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial)
TIMOTHY B SMITH
Mailing Address 11 ANONDALE
City: NEWPORT BEACH State: CA Zip Code: 92660-9008
FEC ID number of contributing federal political committee: C
Name of Employer: FOUNTAIN VALLEY REGIONAL HOSPITAL
Occupation: CEO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40728427477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 780.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 55 / 81
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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): GERALD CLUTE
Mailing Address: 4132 HAVENHURST DRIVE
City: ENCINO State: CA Zip Code: 91346
FEC ID number of contributing federal political committee: C
Name of Employer: ENCINO-TARZANA REGIONAL MEDICAL CENTER
Occupation: COO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40728477477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial): KENNETH I RIVERS
Mailing Address: 624 FAIRLEE AVE
City: BRADBURY State: CA Zip Code: 91010-1203
FEC ID number of contributing federal political committee: C
Name of Employer: LAKEWOOD REGIONAL MEDICAL CENTER
Occupation: CEO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40728567477
Amount of Each Receipt this Period: 0.00
P/R Deduction ($20.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial): MARK PALMER
Mailing Address: 10938 CLOVERHURST WAY
City: SAN DIEGO State: CA Zip Code: 92130-4819
FEC ID number of contributing federal political committee: C
Name of Employer: ALVARADO HOSPITAL MEDICAL CENTER
Occupation: COO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 208.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40728647477
Amount of Each Receipt this Period: 104.00
P/R Deduction ($8.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ **234.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 56 / 81
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): MATTHEW KEATING
Mailing Address: 2172 PEBBLEHILL CIRCLE
City: CORONA | State: CA | Zip Code: 92879-0829
FEC ID number of contributing federal political committee: C
Name of Employer: IRVINE REGIONAL HOSPITAL MEDICAL CENTE
Occupation: CFO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40728687477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial): DANIEL DOORE
Mailing Address: 20141 BONNIE BREA WAY
City: SARATOGA | State: CA | Zip Code: 95070-5903
FEC ID number of contributing federal political committee: C
Name of Employer: COMMUNITY HOSPITAL OF LOS GATOS
Occupation: CEO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 499.98
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40728707477
Amount of Each Receipt this Period: 249.99
P/R Deduction ($19.23 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial): COLLEEN M COLLAR
Mailing Address: 1482 E.NEW YORK DRIVE
City: ALTADENA | State: CA | Zip Code: 91001-3218
FEC ID number of contributing federal political committee: C
Name of Employer: ENCINO-TARZANA REGIONAL MEDICAL CENTER
Occupation: CND
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 280.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40728727477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 509.99

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 57 / 81
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial)
CHARLES J MOORE
Mailing Address PO BOX 82064
City: BATON ROUGE State: LA Zip Code: 70884-2064
FEC ID number of contributing federal political committee. C
Name of Employer: Tenet HealthSystem-Gulf States Region
Occupation: CO CEO-SOUTHERN MEDICAL
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 499.98
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40728797477
Amount of Each Receipt this Period: 249.99
P/R Deduction ($19.23 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial)
WILLIAM C BROWN
Mailing Address 300B HIGHLAND DRIVE
City: RUSSELLVILLE State: AR Zip Code: 72802-7911
FEC ID number of contributing federal political committee. C
Name of Employer: SAINT MARY'S REGIONAL MEDICAL CENTER
Occupation: ADMINISTRATOR-MSO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40728817477
Amount of Each Receipt this Period: 120.00
P/R Deduction ($10.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial)
KEN WHEAT
Mailing Address 325 KINGSPRING CT
City: ROSWELL State: GA Zip Code: 30076-0504
FEC ID number of contributing federal political committee. C
Name of Employer: NORTH FULTON REGIONAL HOSPITAL
Occupation: CFO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 280.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40728877477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 499.99

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 58 / 81
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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): KAREN M HENSLEY
Mailing Address: 8608 BURCIAGA DR.
City: EL PASO State: TX Zip Code: 79912-2802
FEC ID number of contributing federal political committee: C
Name of Employer: SIERRA MEDICAL CENTER
Occupation: ASST VP NURSING
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR40980487477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial): IRIS MEYERS
Mailing Address: 9451 OAK GROVE CIRCLE
City: DAVIE State: FL Zip Code: 33328-6939
FEC ID number of contributing federal political committee: C
Name of Employer: PARKWAY REGIONAL MEDICAL CENTER
Occupation: DIR, SURGICAL SVCS 2
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR41068237477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial): PETER C MERCER
Mailing Address: 1247 CAMELLIA CIRCLE
City: WESTON State: FL Zip Code: 33326-3614
FEC ID number of contributing federal political committee: C
Name of Employer: NORTH RIDGE MEDICAL CENTER
Occupation: CFO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR41394037477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 390.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 59 / 81
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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): STEVE CORBEIL
Mailing Address: 2063 KINGSPOINTE DRIVE
City: CLARKSON VALLEY | State: MO | Zip Code: 63005-4484
FEC ID number of contributing federal political committee: C
Name of Employer: Tenet HealthSystem-St. Louis Region
Occupation: SVP, REGIONAL OPERATIONS
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR41394047477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial): LARRY E BARBE
Mailing Address: 3913 CLEVELAND PLACE
City: METAIRIE | State: LA | Zip Code: 70003-1436
FEC ID number of contributing federal political committee: C
Name of Employer: KENNER REGIONAL MEDICAL CENTER
Occupation: ASST ADMINISTRATOR
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 240.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR41394117477
Amount of Each Receipt this Period: 110.00
P/R Deduction ($10.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial): SUMAN K SMITH
Mailing Address: 15127 ROSEMAR AVE
City: SAN JOSE | State: CA | Zip Code: 95127-3855
FEC ID number of contributing federal political committee: C
Name of Employer: COMMUNITY HOSPITAL OF LOS GATOS
Occupation: DIRECTOR, PATIENT SRVCS
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 280.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR41394167477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 500.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): RICK LYONS
Mailing Address: 30464 RAINBOW CREST DRIV
City: AGOURA | State: CA | Zip Code: 91301
FEC ID number of contributing federal political committee: C
Name of Employer: TWIN CITIES COMMUNITY HOSPITAL
Occupation: CEO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR41394197477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial): DAVID O'CONNOR
Mailing Address: 4507 8TH ST.PL NE
City: HICKORY | State: NC | Zip Code: 28601-7338
FEC ID number of contributing federal political committee: C
Name of Employer: FRYE REGIONAL MEDICAL CENTER
Occupation: CFO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR76094037477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial): KIM ELLER
Mailing Address: 7313 STONELEIGH DRIVE
City: HARAHAN | State: LA | Zip Code: 70123-4823
FEC ID number of contributing federal political committee: C
Name of Employer: MEADOWCREST HOSPITAL
Occupation: CFO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR83932397477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 390.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 61 / 81
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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): CHARLES F MARTINEZ
Mailing Address: 444 KEMPTON ROAD
City: GLENDALE State: CA Zip Code: 91202-1324
FEC ID number of contributing federal political committee: C
Name of Employer: SUBURBAN MEDICAL CENTER
Occupation: COO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 390.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR84702797477
Amount of Each Receipt this Period: 195.00
P/R Deduction ($15.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial): KAROLYN MORRISON
Mailing Address: 2524 W.FLOWER AVE.
City: FULLERTON State: CA Zip Code: 92833-3506
FEC ID number of contributing federal political committee: C
Name of Employer: SUBURBAN MEDICAL CENTER
Occupation: CNO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR84712827477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial): IRENE CHAVEZ
Mailing Address: 1340 LOMA VERDE
City: EL PASO State: TX Zip Code: 79938-7811
FEC ID number of contributing federal political committee: C
Name of Employer: PROVIDENCE MEMORIAL HOSPITAL
Occupation: COO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 1300.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR84633837477
Amount of Each Receipt this Period: 650.00
P/R Deduction ($50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 975.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 62 / 81
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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): TERRY MURPHY
Mailing Address: 179 NIBLICK RDPMB348
City: PASO ROBLES | State: CA | Zip Code: 93446-4845
FEC ID number of contributing federal political committee: C
Name of Employer: TWIN CITIES COMMUNITY HOSPITAL
Occupation: CNO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR84902147477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial): ALBERT L GREENE
Mailing Address: 25948 WELLINGTON CT
City: CALABASAS | State: CA | Zip Code: 91302-3124
FEC ID number of contributing federal political committee: C
Name of Employer: QUEEN OF ANGELS-HOLLYWOOD PRESBYTERIAN
Occupation: CEO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR84936487477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial): ROBERT C CALDWELL
Mailing Address: 7908 E HORSESHOE TRAIL
City: ORANGE | State: CA | Zip Code: 92869-2420
FEC ID number of contributing federal political committee: C
Name of Employer: COMMUNITY HOSPITAL OF HUNTINGTON PARK
Occupation: COO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 1040.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR84591647477
Amount of Each Receipt this Period: 520.00
P/R Deduction ($40.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ **910.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 63 / 81
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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial)
RICHARD S ANSEDE
Mailing Address 4801 SIMPSON DRIVE
City: SANFORD State: NC Zip Code: 27330-8948
FEC ID number of contributing federal political committee: C
Name of Employer: CENTRAL CAROLINA HOSPITAL
Occupation: CFO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 572.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR84990387477
Amount of Each Receipt this Period: 286.00
P/R Deduction ($22.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial)
SUZANNE KOZEL
Mailing Address 161 MEADOW RIDGE LN
City: CHAPEL HILL State: NC Zip Code: 27517-8847
FEC ID number of contributing federal political committee: C
Name of Employer: ATLANTA MEDICAL CENTER
Occupation: MGR, REG TPS CLINICS
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 501.80
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR84398047477
Amount of Each Receipt this Period: 250.90
P/R Deduction ($19.30 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial)
TODD M LOCKCUFF
Mailing Address 17 VICTORIA SQUARE XING
City: HILTON HEAD State: SC Zip Code: 29928-2355
FEC ID number of contributing federal political committee: C
Name of Employer: HILTON HEAD HOSPITAL
Occupation: CFO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 280.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR84350397477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 666.90

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 64 / 81
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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): KATHLEEN FARRELL
Mailing Address: 2585 FURLONG STREET
City: DOYLESTOWN State: PA Zip Code: 18901-1689
FEC ID number of contributing federal political committee: C
Name of Employer: WARMINSTER HOSPITAL
Occupation: COO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR84935537477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial): JOEL DALVA
Mailing Address: 16233 MIRA VISTA LANE
City: DELRAY BCH State: FL Zip Code: 33446-9538
FEC ID number of contributing federal political committee: C
Name of Employer: ST. MARY'S MEDICAL CENTER
Occupation: CFO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR84299137477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial): JERRY B EADY
Mailing Address: 3703 HUNTER VALLEY DR
City: COLUMBIA State: MO Zip Code: 65203
FEC ID number of contributing federal political committee: C
Name of Employer: SAINT LOUIS UNIVERSITY HOSPITAL
Occupation: COO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR84213437477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 390.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 65 / 81
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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): DAVID L CALLECOD
Mailing Address: 5 RIDGE ROAD
City: SEARCY State: AR Zip Code: 72143-6402
FEC ID number of contributing federal political committee: C
Name of Employer: CENTRAL ARKANSAS HOSPITAL
Occupation: CEO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 440.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR83936937477
Amount of Each Receipt this Period: 180.00
P/R Deduction ($20.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial): RANDALL M VONDRAN
Mailing Address: #1 JAMESTOWN
City: SEARCY State: AR Zip Code: 72143-7103
FEC ID number of contributing federal political committee: C
Name of Employer: CENTRAL ARKANSAS HOSPITAL
Occupation: CNO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR84010147477
Amount of Each Receipt this Period: 120.00
P/R Deduction ($10.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial): BENJAMIN B FRANK
Mailing Address: 106 EMERALD LAKE DRIVE
City: SEARCY State: AR Zip Code: 72143-3055
FEC ID number of contributing federal political committee: C
Name of Employer: CENTRAL ARKANSAS HOSPITAL
Occupation: COO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 220.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR84620487477
Amount of Each Receipt this Period: 120.00
P/R Deduction ($10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ **420.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): ROBBIE R PETTEY
Mailing Address: 219 LAZY LANE
City: HOT SPRINGS State: AR Zip Code: 71913-8405
FEC ID number of contributing federal political committee: C
Name of Employer: NATIONAL PARK MEDICAL CENTER
Occupation: CFO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR84003437477
Amount of Each Receipt this Period: 120.00
P/R Deduction ($10.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial): CLAUDIA WILLIAMS
Mailing Address: 91 CIFUENTES WAY
City: HOT SPRINGS State: AR Zip Code: 71909-7440
FEC ID number of contributing federal political committee: C
Name of Employer: NATIONAL PARK MEDICAL CENTER
Occupation: CNO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR83937667477
Amount of Each Receipt this Period: 120.00
P/R Deduction ($10.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial): REBECCA POWELL
Mailing Address: 12292 FOXWOOD POINTE
City: POPLAR BLUFF State: MO Zip Code: 63501
FEC ID number of contributing federal political committee: C
Name of Employer: THREE RIVERS HEALTHCARE-NORTH CAMPUS
Occupation: CNO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 310.95
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR84237257477
Amount of Each Receipt this Period: 41.46
P/R Deduction ($20.73 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 281.46

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 67 / 81
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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): EDWARD BANOS
Mailing Address: 3104 SILVER DOLLAR CT
City: PEARLAND State: TX Zip Code: 77584-7989
FEC ID number of contributing federal political committee: C
Name of Employer: PARK PLAZA HOSPITAL
Occupation: COO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR84235617477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial): GAYE CUNNINGHAM
Mailing Address: 2220 S. 11TH ST.
City: ST. LOUIS State: MO Zip Code: 63104-4117
FEC ID number of contributing federal political committee: C
Name of Employer: FOREST PARK HOSPITAL
Occupation: CNO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR84125547477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial): LYNN M MERGEN
Mailing Address: 2977 HORSESHOE TRAIL
City: FRISCO State: TX Zip Code: 75034-7391
FEC ID number of contributing federal political committee: C
Name of Employer: CENTENNIAL MEDICAL CTR
Occupation: CEO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR84651217477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ **520.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 68 / 81
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): VIOLETA L MAZZELLA
Mailing Address: 8816 CANYON LANDS DRIVE
City: PLANO | State: TX | Zip Code: 75025-4221
FEC ID number of contributing federal political committee: C
Name of Employer: TENET HEALTHSYSTEM-TEXAS
Occupation: MGR, FINANCIAL ANALYSIS
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 416.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR84145437477
Amount of Each Receipt this Period: 208.00
P/R Deduction ($16.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial): MONICA FRAZER
Mailing Address: 4100 TRAVIS UNIT #4
City: DALLAS | State: TX | Zip Code: 75204-7543
FEC ID number of contributing federal political committee: C
Name of Employer: TENET HEALTHSYSTEM-TEXAS
Occupation: VP, AUDIT SVCS
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR83929227477
Amount of Each Receipt this Period: 130.00
P/R Deduction ($10.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial): TERESA SOUTH
Mailing Address: 5316 MARINERS DRIVE
City: PLANO | State: TX | Zip Code: 75093-4100
FEC ID number of contributing federal political committee: C
Name of Employer: TENET HEALTHSYSTEM-TEXAS
Occupation: VP, HUMAN RESOURCES
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR84239357477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 598.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 69 / 81
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial)
ANNE CALHOUN
Mailing Address 3831 TURTLE CR BLVD #11F
City: DALLAS State: TX Zip Code: 75219-4484
FEC ID number of contributing federal political committee: C
Name of Employer: TENET HEALTHSYSTEM-TEXAS
Occupation: VP, CUSTOMER SERVICE
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 609.70
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR102831907477
Amount of Each Receipt this Period: 372.15
P/R Deduction ($41.35 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial)
EDWARD MESCO
Mailing Address 7365 NW 54TH STREET
City: LAUDERHILL State: FL Zip Code: 33319-6346
FEC ID number of contributing federal political committee: C
Name of Employer: Tenet HealthSystem-Florida Region
Occupation: MGR, REIMBURSEMENT
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 650.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR83947787477
Amount of Each Receipt this Period: 325.00
P/R Deduction ($25.00 Bi-Weekly)

C.
Full Name (Last, First, Middle Initial)
ERIC TUCKMAN
Mailing Address 1157-3RD
City: MANHATTAN BEACH State: CA Zip Code: 90266
FEC ID number of contributing federal political committee: C
Name of Employer: Tenet HealthSystem-Western Division
Occupation: VP, A&D
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: M M / D D / Y Y Y Y
Transaction ID: PR83917197477
Amount of Each Receipt this Period: 260.00
P/R Deduction ($20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ..... ▶ **957.15**

TOTAL This Period (last page this line number only) ..... ▶ **40283.60**

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

☐ 21b	☐ 22	☒ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial)
Federation of American Hospitals PAC (FedPAC)

Mailing Address 801 Pennsylvania Avenue, NW
Suite 425

City: Washington | State: DC | Zip Code: 20004

Purpose of Disbursement: General Purpose Committee

Candidate Name:

Category/Type: 011

Office Sought: House / Senate / President

State: District: D

Disbursement For: Primary / General / Other (specify)

Transaction ID: 15483036
Date of Disbursement: 07 / 09 / 2003

Amount of Each Disbursement this Period: 5000.00

General Purpose Committee

B.
Full Name (Last, First, Middle Initial)
John Breaux Senate Committee

Mailing Address P.O. Box 4042

City: Baton Rouge | State: LA | Zip Code: 70821-4042

Purpose of Disbursement: John Breaux, US SENATE LA

Candidate Name: John Breaux

Category/Type: 011

Office Sought: House / X Senate / President

State: LA District: 1

Disbursement For: X Primary / General / Other (specify) 2004

Transaction ID: 15483035
Date of Disbursement: 07 / 09 / 2003

Amount of Each Disbursement this Period: 5000.00

John Breaux, US SENATE LA

C.
Full Name (Last, First, Middle Initial)
The Jefferson Committee

Mailing Address 650 Poydras Street
Suite 2245

City: New Orleans | State: LA | Zip Code: 70130

Purpose of Disbursement: William Jefferson, US HOUSE LA 2nd

Candidate Name: William Jefferson

Category/Type: 011

Office Sought: X House / Senate / President

State: LA District: 2

Disbursement For: X Primary / General / Other (specify) 2004

Transaction ID: 15586904
Date of Disbursement: 07 / 22 / 2003

Amount of Each Disbursement this Period: 1000.00

William Jefferson, US HOUSE LA 2nd

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **11000.00**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

☐ 21b	☐ 22	☒ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): Price For Congress
Mailing Address: PO Box 425
City: Roswell | State: GA | Zip Code: 30077
Purpose of Disbursement: Thomas Price, US HOUSE 6th GA
Candidate Name: Senator Thomas Price, M.D.
Category/Type: 011
Office Sought: X House / Senate / President
State: GA District: 6
Disbursement For: X Primary / General / Other (specify)
2004
Transaction ID: 15596306
Date of Disbursement: 07/22/2003
Amount of Each Disbursement this Period: 2000.00
Thomas Price, US HOUSE 6th GA

B.
Full Name (Last, First, Middle Initial): Becerra for Congress
Mailing Address: P.O. Box 411744
City: Los Angeles | State: CA | Zip Code: 90041
Purpose of Disbursement: Xavier Becerra, US HOUSE 31st CA
Candidate Name: Xavier Becerra
Category/Type: 011
Office Sought: X House / Senate / President
State: CA District: 30
Disbursement For: X Primary / General / Other (specify)
2004
Transaction ID: 15716814
Date of Disbursement: 08/04/2003
Amount of Each Disbursement this Period: 2000.00
Xavier Becerra, US HOUSE 31st CA

C.
Full Name (Last, First, Middle Initial): Friends of Jim Clyburn
Mailing Address: PO Box 12567
City: Columbia | State: SC | Zip Code: 29211
Purpose of Disbursement: James Clyburn, US HOUSE, 6th SC
Candidate Name: Rep. James Clyburn
Category/Type: 011
Office Sought: X House / Senate / President
State: SC District: 6
Disbursement For: X Primary / General / Other (specify)
2004
Transaction ID: 15893432
Date of Disbursement: 08/18/2003
Amount of Each Disbursement this Period: 500.00
James Clyburn, US HOUSE, 6th SC

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **4500.00**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A. Full Name (Last, First, Middle Initial)
Missourians For Kit Bond

Mailing Address 147 N Meramec, Suite 100

City: Clayton | State: MO | Zip Code: 63105

Purpose of Disbursement: Kit Bond, US SENATE MO

Candidate Name: Sen. Christopher Bond

Category/Type: 011

Office Sought: House / X Senate / President

State: MO District: 1

Disbursement For: 2004 X Primary General / Other (specify)

Transaction ID: 16488990
Date of Disbursement: 08 / 27 / 2003

Amount of Each Disbursement this Period: 1000.00

Kit Bond, US SENATE MO

B. Full Name (Last, First, Middle Initial)
Citizens for Arlen Specter

Mailing Address 734 Seventh Street, SE

City: Washington | State: PA | Zip Code: 20003

Purpose of Disbursement: Arlen Specter, US SENATE PA

Candidate Name: Arlen Specter

Category/Type: 011

Office Sought: House / X Senate / President

State: PA District: 1

Disbursement For: 2004 X Primary General / Other (specify)

Transaction ID: 16897828
Date of Disbursement: 09 / 17 / 2003

Amount of Each Disbursement this Period: 2000.00

Arlen Specter, US SENATE PA

C. Full Name (Last, First, Middle Initial)
Keep Our Majority PAC (KOMPAC)

Mailing Address P.O. Box 864

City: Washington | State: DC | Zip Code: 20044

Purpose of Disbursement: General Purpose Committee

Candidate Name:

Category/Type: 011

Office Sought: House / Senate / President

State: District: 0

Disbursement For: Primary General / Other (specify)

Transaction ID: 17071644
Date of Disbursement: 10 / 01 / 2003

Amount of Each Disbursement this Period: 2500.00

General Purpose Committee

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **5500.00**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

☐ 21b	☐ 22	☒ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): David Vitter for Congress
Mailing Address: PO BOx 96243
City: Washington | State: LA | Zip Code: 20090
Purpose of Disbursement: David Vitter, US HOUSE LA 1st
Candidate Name: David Vitter
Category/Type: 011
Office Sought: X House / Senate / President
State: LA District: 1
Disbursement For: 2004 X Primary / General / Other (specify)
Transaction ID: 17212250
Date of Disbursement: 10/09/2003
Amount of Each Disbursement this Period: 2000.00
David Vitter, US HOUSE LA 1st

B.
Full Name (Last, First, Middle Initial): People For English
Mailing Address: PO Box 1940
City: Erie | State: PA | Zip Code: 16507
Purpose of Disbursement: Philip English, US HOUSE PA 3rd
Candidate Name: Rep. Phil English
Category/Type: 011
Office Sought: X House / Senate / President
State: PA District: 3
Disbursement For: 2004 X Primary / General / Other (specify)
Transaction ID: 17227350
Date of Disbursement: 10/23/2003
Amount of Each Disbursement this Period: 500.00
Philip English, US HOUSE PA 3rd

C.
Full Name (Last, First, Middle Initial): One Ninety One Club
Mailing Address: 191 Peachtree Stree, NE Suite 400
City: Atlanta | State: GA | Zip Code: 30303
Purpose of Disbursement: In-Kind: David Scott, US HOUSE GA 13th
Candidate Name: Mr. David Scott
Category/Type: 011
Office Sought: X House / Senate / President
State: GA District: 13
Disbursement For: 2004 X Primary / General / Other (specify)
Transaction ID: 17275671
Date of Disbursement: 10/29/2003
Amount of Each Disbursement this Period: 1000.00
In-Kind: David Scott, US HOUSE GA 13th

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 3500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): Friends of Gordon Smith
Mailing Address: 228 S Washington St Ste 340
City: Alexandria State: VA Zip Code: 22314
Purpose of Disbursement: Gordon Smith, US SENATE OR
Candidate Name: Sen. Gordon Smith
Category/Type: 011
Office Sought: House / X Senate / President
State: OR District: 2
Disbursement For: X Primary / General / Other (specify)
2008
Transaction ID: 17275672
Date of Disbursement: 10 / 29 / 2003
Amount of Each Disbursement this Period: 1000.00
Gordon Smith, US SENATE OR

B.
Full Name (Last, First, Middle Initial): Dreier for Congress Committee
Mailing Address: P.O. Box 505
City: Upland State: CA Zip Code: 01785
Purpose of Disbursement: David Dreier, US HOUSE CA 26th
Candidate Name: Rep. David Dreier
Category/Type: 011
Office Sought: X House / Senate / President
State: CA District: 26
Disbursement For: X Primary / General / Other (specify)
2004
Transaction ID: 17275673
Date of Disbursement: 10 / 29 / 2003
Amount of Each Disbursement this Period: 500.00
David Dreier, US HOUSE CA 26th

C.
Full Name (Last, First, Middle Initial): Tenet Healthcare Corporation
Mailing Address: 3820 STATE STREET
City: Santa Barbara State: CA Zip Code: 93105
Purpose of Disbursement: In-Kind: David Scott, US HOUSE GA 13th
Candidate Name: Mr. David Scott
Category/Type: 011
Office Sought: X House / Senate / President
State: GA District: 13
Disbursement For: X Primary / General / Other (specify)
2004
Transaction ID: 17984577
Date of Disbursement: 10 / 31 / 2003
Amount of Each Disbursement this Period: 323.48
In-Kind: David Scott, US HOUSE GA 13th

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **1823.48**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): One Ninety One Club
Mailing Address: 191 Peachtree Stree, NE, Suite 400
City: Atlanta State: GA Zip Code: 30303
Purpose of Disbursement: In-Kind: David Scott, US HOUSE GA 13th
Category/Type: 011
Candidate Name: Mr. David Scott
Office Sought: X House / Senate / President
State: GA District: 13
Disbursement For: 2004 X Primary / General / Other (specify)
Transaction ID: 17373830
Date of Disbursement: 11/14/2003
Amount of Each Disbursement this Period: 228.20
In-Kind: David Scott, US HOUSE GA 13th

B.
Full Name (Last, First, Middle Initial): Tenet Healthcare Corporation
Mailing Address: 3820 STATE STREET
City: Santa Barbara State: CA Zip Code: 93105
Purpose of Disbursement: In-Kind: Adam Schiff, US HOUSE CA 29th
Category/Type: 011
Candidate Name: Adam Schiff
Office Sought: X House / Senate / President
State: CA District: 27
Disbursement For: 2004 X Primary / General / Other (specify)
Transaction ID: 17589187
Date of Disbursement: 11/26/2003
Amount of Each Disbursement this Period: 419.32
In-Kind: Adam Schiff, US HOUSE CA 29th

C.
Full Name (Last, First, Middle Initial): Schiff for Congress
Mailing Address: 35 S Raymond Avenue, Suite 301
City: Pasadena State: CA Zip Code: 91105
Purpose of Disbursement: Adam Schiff, US HOUSE CA 29th
Category/Type: 011
Candidate Name: Adam Schiff
Office Sought: X House / Senate / President
State: CA District: 27
Disbursement For: 2004 X Primary / General / Other (specify)
Transaction ID: 17572280
Date of Disbursement: 12/17/2003
Amount of Each Disbursement this Period: 1000.00
Adam Schiff, US HOUSE CA 29th

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **1647.52**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

☐ 21b	☐ 22	☒ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial)
Rodney Alexander For Congress, Inc

Mailing Address PO Box 367
319 Nancy Road

City: Quitman | State: LA | Zip Code: 71268

Purpose of Disbursement
Rodney Alexander, US HOUSE LA 5th

Candidate Name
Mr. Rodney Alexander

Category/Type: 011

Office Sought: X House / Senate / President
State: LA District: 5

Disbursement For: 2004
X Primary / General / Other (specify)

Transaction ID: 17572282
Date of Disbursement: 12 / 17 / 2003

Amount of Each Disbursement this Period: 500.00

Rodney Alexander, US HOUSE LA 5th

B.
Full Name (Last, First, Middle Initial)
Louisiana Senate 2003

Mailing Address 503 Capitol Court, NE

City: Washington | State: DC | Zip Code: 20002

Purpose of Disbursement
General Purpose Committee

Candidate Name

Category/Type: 011

Office Sought: House / Senate / President
State: District: 0

Disbursement For: Primary / General / Other (specify)

Transaction ID: 17572281
Date of Disbursement: 12 / 17 / 2003

Amount of Each Disbursement this Period: 1000.00

General Purpose Committee

SUBTOTAL of Disbursements This Page (optional) ..... ▶	1500.00
TOTAL This Period (last page this line number only) ..... ▶	29471.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

21b	22	23	24	25	26
27	28a	28b	28c	X 29	30b

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): Commission Sandy Jacobs
Mailing Address: P.O. Box 118686
City: Carrollton | State: TX | Zip Code: 75011
Purpose of Disbursement: Sandy Jacobs, County Commissioner 2nd TX
Candidate Name: Commissioner Sandy Jacobs
Category/Type: 011
Office Sought: House / Senate / President — X House
State: TX District: 2
Disbursement For: 2004 — X Primary / General / Other (specify)
Transaction ID: 15366414
Date of Disbursement: 07 01 2003
Amount of Each Disbursement this Period: 500.00
Sandy Jacobs, County Commissioner 2nd TX

B.
Full Name (Last, First, Middle Initial): Friends of Arlene Wohlgemuth
Mailing Address: P.O. Box 1073
City: Burleson | State: TX | Zip Code: 76097
Purpose of Disbursement: Arlene Wohlgemuth, STATE HOUSE 58th TX
Candidate Name: Representative Arlene Wohlgemuth
Category/Type: 011
Office Sought: X House / Senate / President
State: TX District: 58
Disbursement For: 2004 — X Primary / General / Other (specify)
Transaction ID: 15366418
Date of Disbursement: 07 01 2003
Amount of Each Disbursement this Period: 1000.00
Arlene Wohlgemuth, STATE HOUSE 58th TX

C.
Full Name (Last, First, Middle Initial): Friends of Senator Nelson
Mailing Address: P.O. Box 270389
City: Flower Mound | State: TX | Zip Code: 75027-0389
Purpose of Disbursement: Jane Nelson, STATE SENATE 12th TX
Candidate Name: Jane Nelson
Category/Type: 011
Office Sought: House / X Senate / President
State: TX District: 9
Disbursement For: 2006 — X Primary / General / Other (specify)
Transaction ID: 15893452
Date of Disbursement: 08 18 2003
Amount of Each Disbursement this Period: 1500.00
Jane Nelson, STATE SENATE 12th TX

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 3000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

☐ 21b	☐ 22	☐ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): Talmadge Heflin Campaign
Mailing Address: 502 West 13th Street
City: Austin | State: TX | Zip Code: 78701
Purpose of Disbursement: Talmadge Heflin. STATE HOUSE 149th TX
Category/Type: 011
Candidate Name: Representative Talmadge Heflin
Office Sought: X House / Senate / President
State: TX District: 14
Disbursement For: 2004 X Primary / General / Other (specify)
Transaction ID: 16928594
Date of Disbursement: 09 / 22 / 2003
Amount of Each Disbursement this Period: 500.00
Talmadge Heflin, STATE HOUSE 149th TX

B.
Full Name (Last, First, Middle Initial): Tenet Healthcare Corporation
Mailing Address: 3820 STATE STREET
City: Santa Barbara | State: CA | Zip Code: 93105
Purpose of Disbursement: In-Kind: Michael Nutter, Philadelphia Ci
Category/Type: 011
Candidate Name: Councilman Michael Nutter
Office Sought: House / Senate / President
State: PA District: 4
Disbursement For: 2003 Primary / X General / Other (specify)
Transaction ID: 17071646
Date of Disbursement: 09 / 25 / 2003
Amount of Each Disbursement this Period: 498.37
In-Kind: Michael Nutter, Philadelphia City Council

C.
Full Name (Last, First, Middle Initial): Health Alliance PAC (HAPAC) - NonFederal State PAC
Mailing Address: P.O. Box 8600
City: Harrisburg | State: PA | Zip Code: 17105
Purpose of Disbursement: General Purpose Committee
Category/Type: 011
Candidate Name:
Office Sought: House / Senate / President
State: District: 0
Disbursement For: Primary / General / Other (specify)
Transaction ID: 17059908
Date of Disbursement: 10 / 01 / 2003
Amount of Each Disbursement this Period: 5000.00
General Purpose Committee

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 5998.37

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

21b	22	23	24	25	26
27	28a	28b	28c	X 29	30b

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): Morton's of Chicago - Philadelphia
Mailing Address: 1411 Walnut Street
City: Philadelphia State: PA Zip Code: 19102
Purpose of Disbursement: In-Kind: Michael Nutter. Philadelphia Ci
Candidate Name:
Category/Type: 011
Office Sought: House / Senate / President
State: District: D
Disbursement For: Primary / General / Other (specify)
Transaction ID: 17059902
Date of Disbursement: 10 / 02 / 2003
Amount of Each Disbursement this Period: 2352.38
In-Kind: Michael Nutter, Philadelphia City Council

B.
Full Name (Last, First, Middle Initial): David Dewhurst Committee
Mailing Address: P.O. box 756
City: Austin State: TX Zip Code: 78767-0756
Purpose of Disbursement: David Dewhurst, LT. GOVERNOR TX
Candidate Name: Lt. Governor David Dewhurst
Category/Type: 011
Office Sought: House / Senate / President
State: TX District: D
Disbursement For: X Primary / General / Other (specify) 2006
Transaction ID: 17075951
Date of Disbursement: 10 / 03 / 2003
Amount of Each Disbursement this Period: 500.00
David Dewhurst, LT. GOVERNOR TX

C.
Full Name (Last, First, Middle Initial): Shapleigh for Senate Campaign
Mailing Address: 701 North Saint Vrain
City: El Paso State: TX Zip Code: 79902
Purpose of Disbursement: Elliott Shapleigh. STATE SENATE TX
Candidate Name: Elliott Shapleigh
Category/Type: 011
Office Sought: House / X Senate / President
State: TX District: 29
Disbursement For: X Primary / General / Other (specify) 2004
Transaction ID: 17227194
Date of Disbursement: 10 / 23 / 2003
Amount of Each Disbursement this Period: 250.00
Elliott Shapleigh, STATE SENATE TX

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 3102.38

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

☐ 21b	☐ 22	☐ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): Ken Paxton Campaign Fund
Mailing Address: 4100 West El Dorado Parkway, Suite 10D-19B
City: McKinney State: TX Zip Code: 75070
Purpose of Disbursement: Ken Paxton, STATE HOUSE 70th TX
Candidate Name: TX Rep. Ken Paxton
Category/Type: 011
Office Sought: X House / Senate / President
State: TX District: 70
Disbursement For: X Primary / General / Other (specify)
Transaction ID: 17364578
Date of Disbursement: 11/12/2003
Amount of Each Disbursement this Period: 1000.00
Ken Paxton, STATE HOUSE 70th TX

B.
Full Name (Last, First, Middle Initial): Friends of John Perzel
Mailing Address: P.O. Box 30008
City: Elkins Park State: PA Zip Code: 19027
Purpose of Disbursement: John Perzel, STATE HOUSE 172nd PA
Candidate Name: John Perzel
Category/Type: 011
Office Sought: X House / Senate / President
State: PA District: 17
Disbursement For: X Primary / General / Other (specify)
Transaction ID: 17572284
Date of Disbursement: 12/17/2003
Amount of Each Disbursement this Period: 500.00
John Perzel, STATE HOUSE 172nd PA

C.
Full Name (Last, First, Middle Initial): Talmadge Heflin Campaign
Mailing Address: 502 West 13th Street
City: Austin State: TX Zip Code: 78701
Purpose of Disbursement: Talmadge Heflin, STATE HOUSE 149th TX
Candidate Name: Representative Talmadge Heflin
Category/Type: 011
Office Sought: X House / Senate / President
State: TX District: 14
Disbursement For: X Primary / General / Other (specify)
Transaction ID: 17572279
Date of Disbursement: 12/17/2003
Amount of Each Disbursement this Period: 1000.00
Talmadge Heflin, STATE HOUSE 149th TX

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **2500.00**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

☐ 21b	☐ 22	☐ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION PAC

A.
Full Name (Last, First, Middle Initial): Texas Hospital Association PAC
Mailing Address: P.O. Box 15587
City: Austin State: TX Zip Code: 78761-5587
Purpose of Disbursement: General Purpose Committee
Candidate Name:
Category/Type: 011
Office Sought: House / Senate / President
State: District: D
Disbursement For: Primary / General / Other (specify)
Transaction ID: 17598862
Date of Disbursement: 12/23/2003
Amount of Each Disbursement this Period: 5000.00
General Purpose Committee

B.
Full Name (Last, First, Middle Initial): North Carolina Hospital Association PAC
Mailing Address: P.O. Box 4449
City: Cary State: NC Zip Code: 27519-4449
Purpose of Disbursement: General Purpose Committee
Candidate Name:
Category/Type: 011
Office Sought: House / Senate / President
State: District: D
Disbursement For: Primary / General / Other (specify)
Transaction ID: 17598859
Date of Disbursement: 12/23/2003
Amount of Each Disbursement this Period: 900.00
General Purpose Committee

SUBTOTAL of Disbursements This Page (optional) ▶	5900.00
TOTAL This Period (last page this line number only) ▶	20500.75