

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2013"/>		<input type="text" value="118968.39"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="115244.01"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="11846.00"/>	<input type="text" value="118219.50"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="127090.01"/>	<input type="text" value="237187.89"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="11789.00"/>	<input type="text" value="121886.88"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="115301.01"/>	<input type="text" value="115301.01"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Report Covering the Period: From: / / To: / /

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).....	11351.45	78748.30
(ii) Unitemized	494.55	36971.20
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	11846.00	115719.50
(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)	11846.00	115719.50
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	2500.00
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 Transfers (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))..... ▶	11846.00	118219.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	11846.00	118219.50

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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	1180.41
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	1180.41
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10000.00	90750.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (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	39.00	429.00
(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)).....	39.00	429.00
29. Other Disbursements	1750.00	29527.47
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated 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)) ..	11789.00	121886.88
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	11789.00	121886.88

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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)	11846.00	115719.50
34. Total Contribution Refunds (from Line 28(d))	39.00	429.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	11807.00	115290.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	1180.41
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	1180.41

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 62
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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 POLITICAL ACTION COMMITTEE

A. CEZAR L QUIAMBAO
 Full Name (Last, First, Middle Initial)
 Mailing Address 845 Brisa Del Mar Dr
 City El Paso State TX Zip Code 79912-1513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PROVIDENCE MEMORIAL HOSPITAL Occupation DIR, RESPIRATORY SVCS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **240.00**

Date of Receipt **11 / 30 / 2013**
Transaction ID : A5A9C9D3A49ED4D24B4E
 Amount of Each Receipt this Period **30.00**
 Payroll Deduction: \$10.00/Bi-Weekly

B. THOMAS WOLF
 Full Name (Last, First, Middle Initial)
 Mailing Address 2613 Millington Dr
 City Plano State TX Zip Code 75093-3560
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHCARE CORPORATION Occupation MGR, REIMBURSEMENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **384.00**

Date of Receipt **11 / 30 / 2013**
Transaction ID : AD2E8A82E8CAC4B36822
 Amount of Each Receipt this Period **48.00**
 Payroll Deduction: \$16.00/Bi-Weekly

C. LYNNE SCROGGINS
 Full Name (Last, First, Middle Initial)
 Mailing Address 3777 Peachtree Rd NE Apt 632
 City Atlanta State GA Zip Code 30319-5209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ATLANTA MEDICAL CENTER Occupation ASSOCIATE ADMINISTRATOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **240.00**

Date of Receipt **11 / 30 / 2013**
Transaction ID : A68AB633606AD4E15BCB
 Amount of Each Receipt this Period **30.00**
 Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... **108.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 62
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. SAMUEL G HARRIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 933 Havenhurst Dr
 City West Hollywood State CA Zip Code 90046-6919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHCARE CORPORATION Occupation DIR, REG REIMBURSEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 30 / 2013
Transaction ID : A9D21B8B8AC814A2C941
 Amount of Each Receipt this Period 30.00
 Payroll Deduction: \$10.00/Bi-Weekly

B. MARK D BEATTY
 Full Name (Last, First, Middle Initial)
 Mailing Address 6905 Sonoma
 City Irving State TX Zip Code 75039-3071
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHCARE CORPORATION Occupation SENIOR COUNSEL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 30 / 2013
Transaction ID : ACA4679466ADC4110BF1
 Amount of Each Receipt this Period 30.00
 Payroll Deduction: \$10.00/Bi-Weekly

C. GARY K RUFF
 Full Name (Last, First, Middle Initial)
 Mailing Address 714 Kent Ct
 City Southlake State TX Zip Code 76092-8868
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHCARE CORPORATION Occupation SVP, PHYSICIAN RESOURCES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2304.00

Date of Receipt 11 / 30 / 2013
Transaction ID : A9AED1A1E68574542B76
 Amount of Each Receipt this Period 288.00
 Payroll Deduction: \$96.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	348.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 62
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. ROBERT D COKER
 Full Name (Last, First, Middle Initial)
 Mailing Address 7505 Dana Ln
 City North Richland Hills State TX Zip Code 76182-4551
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHCARE CORPORATION Occupation SR DIR, QUALITY MGT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 30 / 2013
Transaction ID : A558302F489B2405FB30
 Amount of Each Receipt this Period 30.00
 Payroll Deduction: \$10.00/Bi-Weekly

B. DEBORAH DALEY
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 757
 City Edgewood State TX Zip Code 75117-0757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHSYSTEM-TEXAS Occupation ASST - ADMINISTRATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 11 / 30 / 2013
Transaction ID : A2502A4C95B8045209F1
 Amount of Each Receipt this Period 60.00
 Payroll Deduction: \$20.00/Bi-Weekly

C. MARK H BRYAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 7480 Kings Mountain Rd
 City Vestavia State AL Zip Code 35242-2581
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DELRAY MEDICAL CENTER Occupation CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 384.00

Date of Receipt 11 / 30 / 2013
Transaction ID : AC713A33C84B3405591C
 Amount of Each Receipt this Period 57.00
 Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	147.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 62
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. RICHARD D CARTER
Full Name (Last, First, Middle Initial)

Mailing Address 5166 E Lake Blvd
CR

City Birmingham State AL Zip Code 35217-3543

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

Name of Employer Occupation
BROOKWOOD MEDICAL CENTER CFO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
11 / 30 / 2013
Transaction ID : A5704DD3C14D04FDA9B0

Amount of Each Receipt this Period
30.00

Payroll Deduction: \$10.00/Bi-Weekly

B. JACQUELINE HERD
Full Name (Last, First, Middle Initial)

Mailing Address 3571 Carriage Glen Way

City Dacula State GA Zip Code 30019-4575

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

Name of Employer Occupation
ATLANTA MEDICAL CENTER CNO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
11 / 30 / 2013
Transaction ID : A3B728DC57D8A44D6947

Amount of Each Receipt this Period
30.00

Payroll Deduction: \$10.00/Bi-Weekly

C. JAMES CLEMENTS
Full Name (Last, First, Middle Initial)

Mailing Address 3013 Golf Crest Ln

City Woodstock State GA Zip Code 30189-8197

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

Name of Employer Occupation
SOUTH FULTON MEDICAL CENTER CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
11 / 30 / 2013
Transaction ID : A498BAE5B8AFB4A63A83

Amount of Each Receipt this Period
30.00

Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 62
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. JOETTA REETZ		Date of Receipt
Mailing Address 5209 Glen Canyon Rd		<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City	State	Zip Code
Fort Worth	TX	76137-4105
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : AC16B6C0CD57F41CC9BE
TENET HEALTHCARE CORPORATION	MGR FINC PLN & ANAL	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="240.00"/>	<input type="text" value="30.00"/>
		Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial) B. JEFFREY S DOSSETT		Date of Receipt
Mailing Address 557 Lacroix Way		<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City	State	Zip Code
Columbia	IL	62236-2853
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : A28DE775B969343FFAA5
SAINT LOUIS UNIVERSITY HOSPITAL	DIR, IMAGING SVCS	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="240.00"/>	<input type="text" value="30.00"/>
		Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial) C. ROBERTA STEWART		Date of Receipt
Mailing Address 27291 Calle De La Rosa		<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City	State	Zip Code
San Juan Capo	CA	92675-1873
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : A0B0E38CFCCDA43A1A1F
TENET HEALTHCARE CORPORATION	SR DIR, BUSINESS DEV	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="240.00"/>	<input type="text" value="30.00"/>
		Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="90.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 62
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. JOE D THOMASON
Full Name (Last, First, Middle Initial)

Mailing Address 6304 Carmel Falls Ct

City McKinney State TX Zip Code 75070-8768

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

Name of Employer CENTENNIAL MEDICAL CENTER Occupation CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 912.00

Date of Receipt 11 / 30 / 2013
Transaction ID : AEDDE81A27FF5404086B

Amount of Each Receipt this Period 114.00

Payroll Deduction: \$38.00/Bi-Weekly

B. CATHRYN H FRASER
Full Name (Last, First, Middle Initial)

Mailing Address 272 Enclaves Ct

City Coppell State TX Zip Code 75019-2125

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation SVP, HUMAN RESOURCES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2304.00

Date of Receipt 11 / 30 / 2013
Transaction ID : AFA472A0BA5B34ABBB36

Amount of Each Receipt this Period 288.00

Payroll Deduction: \$96.00/Bi-Weekly

C. JOHN SHORT
Full Name (Last, First, Middle Initial)

Mailing Address 3108 Clymer Dr

City Plano State TX Zip Code 75025-5325

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation VP, PERF MGMT & INNOVAT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 30 / 2013
Transaction ID : A95DA795750974190909

Amount of Each Receipt this Period 30.00

Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	432.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 62
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. DENISE F BERGER
Full Name (Last, First, Middle Initial)

Mailing Address 1504 Country Bend Dr

City Saint Charles State MO Zip Code 63303-2512

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

Name of Employer Occupation
DES PERES HOSPITAL HOSPITAL COMPLIANCE OFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
11 / 30 / 2013
Transaction ID : ADE4859E9083F4EF4A53

Amount of Each Receipt this Period
75.00

Payroll Deduction: \$25.00/Bi-Weekly

B. WILLIAM R FREEMAN
Full Name (Last, First, Middle Initial)

Mailing Address 3031 Highland House Villas Ct

City Arnold State MO Zip Code 63010-5623

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

Name of Employer Occupation
DES PERES HOSPITAL RN - CLINICAL PRN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
456.00

Date of Receipt
11 / 30 / 2013
Transaction ID : A0E55703EF0964C3B8CB

Amount of Each Receipt this Period
57.00

Payroll Deduction: \$19.00/Bi-Weekly

C. SAMUEL ROTH
Full Name (Last, First, Middle Initial)

Mailing Address 4365 Greenleaf Ct

City Concord State CA Zip Code 94518-1941

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

Name of Employer Occupation
TENET HEALTHCARE CORPORATION DIRECTOR GOVERNMENT RELATIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
11 / 30 / 2013
Transaction ID : A9F2A0369D454463695C

Amount of Each Receipt this Period
30.00

Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	162.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 62
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. LERRY CROCKER
Full Name (Last, First, Middle Initial)

Mailing Address 2386 Liledoun Rd

City Taylorsville	State NC	Zip Code 28681-8892
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FEC ID number of contributing federal political committee. **C**

Name of Employer FRYE REGIONAL MEDICAL CENTER	Occupation CNO
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1440.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	30	/	2013

Transaction ID : AAAAFD7C696584DF7B3C

Amount of Each Receipt this Period
288.00

Payroll Deduction: \$96.00/Bi-Weekly

B. DOUGLAS E RABE
Full Name (Last, First, Middle Initial)

Mailing Address 7746 Eagle Trl

City Dallas	State TX	Zip Code 75238-4115
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FEC ID number of contributing federal political committee. **C**

Name of Employer TENET HEALTHCARE CORPORATION	Occupation VP, TAXATION
--	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
480.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	30	/	2013

Transaction ID : A71F42F7E211A40BE89F

Amount of Each Receipt this Period
60.00

Payroll Deduction: \$20.00/Bi-Weekly

C. KIM C PULLIAM
Full Name (Last, First, Middle Initial)

Mailing Address 3016 Duplex Rd

City Spring Hill	State TN	Zip Code 37174-9216
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FEC ID number of contributing federal political committee. **C**

Name of Employer TENET HEALTHCARE CORPORATION	Occupation DIR, C&D
--	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	30	/	2013

Transaction ID : A47493974903145F48DA

Amount of Each Receipt this Period
30.00

Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	378.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 62
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. GARY L HONTS JR.
Full Name (Last, First, Middle Initial)
Mailing Address 7707 N 127th Ave

City Omaha	State NE	Zip Code 68142-1723
---------------	-------------	------------------------

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

Name of Employer JFK Memorial Hospital	Occupation CEO
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1791.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2013

Transaction ID : A82034B5CCC194DA5B7A

Amount of Each Receipt this Period
288.00

Payroll Deduction: \$96.00/Bi-Weekly

B. FELITA A CARTER
Full Name (Last, First, Middle Initial)
Mailing Address 290 E Plantation Dr

City Sharpsburg	State GA	Zip Code 30277-1958
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FEC ID number of contributing federal political committee. **C**

Name of Employer TENET HEALTHCARE CORPORATION	Occupation DIR, MGD CARE ECONOMICS
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2013

Transaction ID : A76A5B7B0D51E4347BA3

Amount of Each Receipt this Period
30.00

Payroll Deduction: \$10.00/Bi-Weekly

C. MARITA COVARRUBIAS
Full Name (Last, First, Middle Initial)
Mailing Address 7115 Wildgrove Ave

City Dallas	State TX	Zip Code 75214-3841
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FEC ID number of contributing federal political committee. **C**

Name of Employer TENET HEALTHCARE CORPORATION	Occupation VP & ASST GENERAL COUNSE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
456.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2013

Transaction ID : A30FF9759899A4C20843

Amount of Each Receipt this Period
57.00

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	375.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 62
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. MOISES PADILLA		Date of Receipt
Mailing Address 450 NE 5th St Unit 251		<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City Ft Lauderdale	State FL	Zip Code 33301-3461
FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Transaction ID : A13D69372E6B84228AE1	
Name of Employer TENET PATIENT FINCL SVCS	Occupation DIR, PA MARKET	Amount of Each Receipt this Period <input type="text" value="30.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="240.00"/>	Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial) B. SCOTT A RIFKIN		Date of Receipt
Mailing Address 2188 Aspen St		<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City Tustin	State CA	Zip Code 92782-8339
FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Transaction ID : A4E2F8A003A51443383E	
Name of Employer LOS ALAMITOS MEDICAL CENTER	Occupation COO	Amount of Each Receipt this Period <input type="text" value="30.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="240.00"/>	Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial) C. CHAD W LAND		Date of Receipt
Mailing Address 215 Durango Dr		<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City Trophy Club	State TX	Zip Code 76262-5294
FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Transaction ID : A624DC2A14CA1431FB3B	
Name of Employer TENET HEALTHCARE CORPORATION	Occupation MGR, AUDIT SVCS	Amount of Each Receipt this Period <input type="text" value="30.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="240.00"/>	Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="90.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 62
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. SUELLEN SMITH
 Full Name (Last, First, Middle Initial)
 Mailing Address 84 Tierra Vista Rd
 City Paso Robles State CA Zip Code 93446-9702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHCARE CORPORATION Occupation SR DIR, PMI TEAM LEADER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 30 / 2013
Transaction ID : A0FFA0F536A174990BF8
 Amount of Each Receipt this Period 30.00
 Payroll Deduction: \$10.00/Bi-Weekly

B. KAREN R FOWLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 8306 Turquoise St
 City El Paso State TX Zip Code 79904-2513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PROVIDENCE MEMORIAL HOSPITAL Occupation ASST VP NURSING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 456.00

Date of Receipt 11 / 30 / 2013
Transaction ID : AC5496386F9A54A6DAFF
 Amount of Each Receipt this Period 57.00
 Payroll Deduction: \$19.00/Bi-Weekly

C. GARRY L GAUSE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1150 Lake Colony Ln
 City Vestavia 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 ▼ 240.00

Date of Receipt 11 / 30 / 2013
Transaction ID : AC04D3918E06646409B8
 Amount of Each Receipt this Period 30.00
 Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶ 117.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 62
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. RICKY JOHNSTON		Date of Receipt
Mailing Address 401 N Church St		<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City	State	Zip Code
McKinney	TX	75069-3854
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : AAC03614A6BF44C0FACC
Name of Employer	Occupation	Amount of Each Receipt this Period
TENET HEALTHCARE CORPORATION	VP, IT TECHNOLOGY	<input type="text" value="135.00"/>
Receipt For:	Aggregate Year-to-Date ▼	Payroll Deduction: \$45.00/Bi-Weekly
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1080.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MONICA C VARGAS		Date of Receipt
Mailing Address 4017 Flamingo Dr		<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City	State	Zip Code
El Paso	TX	79902-1313
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : A7AF4670475DC415B832
Name of Employer	Occupation	Amount of Each Receipt this Period
SIERRA PROVIDENCE EASTSIDE HOSPITAL	COO	<input type="text" value="57.00"/>
Receipt For:	Aggregate Year-to-Date ▼	Payroll Deduction: \$19.00/Bi-Weekly
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="456.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. PAUL D. SLAVIN		Date of Receipt
Mailing Address 508 FORREST AVENUE		<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City	State	Zip Code
Cleburne	TX	76033-5345
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : A1E8C7473FA5E4D15B9C
Name of Employer	Occupation	Amount of Each Receipt this Period
TENET HEALTHCARE CORPORATION	VP COMPENSATION BENEFITS	<input type="text" value="57.00"/>
Receipt For:	Aggregate Year-to-Date ▼	Payroll Deduction: \$19.00/Bi-Weekly
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="304.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="249.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 62
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. ROBERT B SHAPPLEY
Full Name (Last, First, Middle Initial)

Mailing Address 1043 Humphrey Oaks Cir

City Memphis State TN Zip Code 38120-2626

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

Name of Employer SAINT FRANCIS HOSPITAL Occupation ASSOC. ADMINISTRATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 456.00

Date of Receipt 11 / 30 / 2013
Transaction ID : A5A63BAAFFEF747DE8A7

Amount of Each Receipt this Period 57.00

Payroll Deduction: \$19.00/Bi-Weekly

B. THOMAS RICE
Full Name (Last, First, Middle Initial)

Mailing Address 15126 Ferdinand Dr

City Dallas State TX Zip Code 75248-6437

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation SVP, INVESTOR RELATIONS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 936.00

Date of Receipt 11 / 30 / 2013
Transaction ID : A56E6CD0D93BA4D95B42

Amount of Each Receipt this Period 117.00

Payroll Deduction: \$39.00/Bi-Weekly

C. DANIEL WALDMANN
Full Name (Last, First, Middle Initial)

Mailing Address 1111 N Montclair Ave

City Dallas State TX Zip Code 75208-3520

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation VP, GOVERNMENT RELATIONS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2304.00

Date of Receipt 11 / 30 / 2013
Transaction ID : A486726F4ECD04470A32

Amount of Each Receipt this Period 288.00

Payroll Deduction: \$96.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶ 462.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 62
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. JOHN TRESSA		Date of Receipt
Mailing Address 4229 Riley St		<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City	State	Zip Code
Houston	TX	77005-3546
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : A664DE970F68B4868A8A
Name of Employer	Occupation	Amount of Each Receipt this Period
PARK PLAZA HOSPITAL	CEO	<input type="text" value="30.00"/>
Receipt For:	Aggregate Year-to-Date ▼	Payroll Deduction: \$10.00/Bi-Weekly
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="240.00"/>	

Full Name (Last, First, Middle Initial) B. MS. ADELE PAULETT		Date of Receipt
Mailing Address 2843 Thomas Ave		<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City	State	Zip Code
Dallas	TX	75204-2651
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : A1A8EF9EFA816421593F
Name of Employer	Occupation	Amount of Each Receipt this Period
TENET HEALTHCARE CORPORATION	SR DIR, MANAGED CARE	<input type="text" value="30.00"/>
Receipt For:	Aggregate Year-to-Date ▼	Payroll Deduction: \$10.00/Bi-Weekly
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="240.00"/>	

Full Name (Last, First, Middle Initial) C. CHARLES R HARBISON JR.		Date of Receipt
Mailing Address 4009 Inspiration Cir		<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City	State	Zip Code
Carrollton	TX	75010-6418
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : AED12A108F3494BBBAE1
Name of Employer	Occupation	Amount of Each Receipt this Period
TENET HEALTHCARE CORPORATION	DIR, FINANCE A&D	<input type="text" value="30.00"/>
Receipt For:	Aggregate Year-to-Date ▼	Payroll Deduction: \$10.00/Bi-Weekly
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="240.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="90.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 62
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. JAIKUMAR KRISHNASWAMY		Date of Receipt
Mailing Address 13123 Avalange Ct		<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City	State	Zip Code
Cypress	TX	77429-4913
FEC ID number of contributing federal political committee.		Transaction ID : AB15B379F2A0941E9852
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="57.00"/>
Name of Employer	Occupation	Payroll Deduction: \$19.00/Bi-Weekly
CYPRESS FAIRBANKS MEDICAL CENTER	COO	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="456.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. HANK D IRICK JR.		Date of Receipt
Mailing Address 3305 Elam Ct		<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City	State	Zip Code
Plano	TX	75093-8087
FEC ID number of contributing federal political committee.		Transaction ID : A28FD4DEF54644E29B72
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="30.00"/>
Name of Employer	Occupation	Payroll Deduction: \$10.00/Bi-Weekly
TENET HEALTHCARE CORPORATION	SR DIR, COST REPORTING	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="240.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. JULIE K DIPPEL		Date of Receipt
Mailing Address 3706 Ash Glen Dr		<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City	State	Zip Code
Spring	TX	77388-4154
FEC ID number of contributing federal political committee.		Transaction ID : AEA4D98A2D7944FC99B2
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="30.00"/>
Name of Employer	Occupation	Payroll Deduction: \$10.00/Bi-Weekly
TENET HEALTHCARE CORPORATION	DIR, ORG LEARNING & DEV	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="240.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="117.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 62
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. TERRY WHEELER
Full Name (Last, First, Middle Initial)

Mailing Address 13802 Magnolia Manor Dr

City Cypress	State TX	Zip Code 77429-8162
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FEC ID number of contributing federal political committee. **C**

Name of Employer CYPRESS FAIRBANKS MEDICAL CENTER	Occupation CEO
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **840.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2013

Transaction ID : A2955C794C82047B7970

Amount of Each Receipt this Period

105.00

Payroll Deduction: \$35.00/Bi-Weekly

B. NORMA A ZERINGUE
Full Name (Last, First, Middle Initial)

Mailing Address 5757 Southwestern Blvd

City Dallas	State TX	Zip Code 75209-3437
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FEC ID number of contributing federal political committee. **C**

Name of Employer CONIFER	Occupation SVP, STRATEGY
-----------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1456.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2013

Transaction ID : A466DEEA61F244DBBB0E

Amount of Each Receipt this Period

57.00

Payroll Deduction: \$19.00/Bi-Weekly

C. MICHAEL J KING
Full Name (Last, First, Middle Initial)

Mailing Address 2713 Stuyvesant Cir

City Modesto	State CA	Zip Code 95356-0337
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FEC ID number of contributing federal political committee. **C**

Name of Employer DOCTORS MEDICAL CENTER-MODESTO	Occupation COO
--	-------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **456.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2013

Transaction ID : AC47427FF7F0C4621B0D

Amount of Each Receipt this Period

57.00

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	219.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 62
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. GARY J SLOAN
Full Name (Last, First, Middle Initial)

Mailing Address 615 Stevens Ct

City Danville State CA Zip Code 94506-4805

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

Name of Employer Occupation
SAN RAMON REGION MEDICAL CENTER CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
456.00

Date of Receipt
11 / 30 / 2013
Transaction ID : AE4AE959EF7D943E4802

Amount of Each Receipt this Period
57.00

Payroll Deduction: \$19.00/Bi-Weekly

B. ALLEN C POSTON
Full Name (Last, First, Middle Initial)

Mailing Address 7055 Orchard Vw

City Edmond State OK Zip Code 73025-1743

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

Name of Employer Occupation
TENET HEALTHCARE CORPORATION DIR, REG PHYS DEVELOPMNT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
11 / 30 / 2013
Transaction ID : A34297D28D5404816B0C

Amount of Each Receipt this Period
30.00

Payroll Deduction: \$10.00/Bi-Weekly

C. COREY L DAVISON
Full Name (Last, First, Middle Initial)

Mailing Address 2700 Crepe Myrtle Dr

City Flower Mound State TX Zip Code 75028-3617

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

Name of Employer Occupation
TENET HEALTHCARE CORPORATION VP, GOV'T RELATIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1186.00

Date of Receipt
11 / 30 / 2013
Transaction ID : A8472928D61234963A09

Amount of Each Receipt this Period
117.00

Payroll Deduction: \$39.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	204.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 23 OF 62
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. PAUL A CASTANON
 Full Name (Last, First, Middle Initial)
 Mailing Address 6307 Preston Pkwy
 City Dallas State TX Zip Code 75205-1650
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHCARE CORPORATION Occupation VP & DEPUTY GNRL COUNSEL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 456.00

Date of Receipt 11 / 30 / 2013
Transaction ID : ABFE2E0AC57B74B29934
 Amount of Each Receipt this Period 57.00
 Payroll Deduction: \$19.00/Bi-Weekly

B. WILLIAM M LOWES
 Full Name (Last, First, Middle Initial)
 Mailing Address 428 Tribal Woods Rd
 City Collierville State TN Zip Code 38017-3404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SAINT FRANCIS HOSPITAL-BARTLETT Occupation DBD-ASSOC ADMINISTRATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 30 / 2013
Transaction ID : AEC181637DD734247A79
 Amount of Each Receipt this Period 30.00
 Payroll Deduction: \$10.00/Bi-Weekly

C. JAY MIRANDA
 Full Name (Last, First, Middle Initial)
 Mailing Address 15871 SW 148th Ter
 City Miami State FL Zip Code 33196-5701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CORAL GABLES HOSPITAL Occupation CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 960.00

Date of Receipt 11 / 30 / 2013
Transaction ID : A3FA016E4F77A44C9970
 Amount of Each Receipt this Period 120.00
 Payroll Deduction: \$40.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶ 207.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 24 OF 62
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. EDWARD MESCO		Date of Receipt
Mailing Address 7365 NW 54th St		<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City Lauderhill	State FL	Zip Code 33319-6346
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : AB55017C9BB1F4B21AEF
Name of Employer TENET HEALTHCARE CORPORATION		Amount of Each Receipt this Period <input type="text" value="75.00"/>
Occupation DIR, REG REIMBURSEMENT		Payroll Deduction: \$25.00/Bi-Weekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="600.00"/>	

Full Name (Last, First, Middle Initial) B. JOHN B MCDONALD		Date of Receipt
Mailing Address 2230 Warner Rd		<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City Fort Worth	State TX	Zip Code 76110-1752
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : A696F65E042634CD392C
Name of Employer TENET HEALTHCARE CORPORATION		Amount of Each Receipt this Period <input type="text" value="114.00"/>
Occupation VP, A&D		Payroll Deduction: \$38.00/Bi-Weekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="912.00"/>	

Full Name (Last, First, Middle Initial) C. AMY L HILL		Date of Receipt
Mailing Address 6237 Westchester Ln		<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City Plano	State TX	Zip Code 75093-6174
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : A8316E1D618AF4C3DBA7
Name of Employer TENET HEALTHCARE CORPORATION		Amount of Each Receipt this Period <input type="text" value="30.00"/>
Occupation DIR, NATL MANAGED CARE		Payroll Deduction: \$10.00/Bi-Weekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="240.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="219.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 62
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. BRADLEY C TAYLOR
Full Name (Last, First, Middle Initial)

Mailing Address 9438 Thornberry Ln

City Dallas State TX Zip Code 75220-5145

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation SR DIR, BUSINESS DEV

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 456.00

Date of Receipt 11 / 30 / 2013
Transaction ID : AEE5A472D773E44DA83C

Amount of Each Receipt this Period 57.00

Payroll Deduction: \$19.00/Bi-Weekly

B. SHERRI MOORE
Full Name (Last, First, Middle Initial)

Mailing Address 10989 County Road 59

City Celina State TX Zip Code 75009-2280

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation MGR, HUMAN RESOURCES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 30 / 2013
Transaction ID : A1490F78460734148934

Amount of Each Receipt this Period 30.00

Payroll Deduction: \$10.00/Bi-Weekly

C. DAWN CASTRO
Full Name (Last, First, Middle Initial)

Mailing Address 15408 FOX MEADOW LANE

City Frisco State TX Zip Code 75035-3671

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

Name of Employer CONIFER Occupation VP CLIENT DELIVERY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 304.00

Date of Receipt 11 / 30 / 2013
Transaction ID : A155F9F50D282420B8A8

Amount of Each Receipt this Period 57.00

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ▶ 144.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 62
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. LEONARD DEONARINE
Full Name (Last, First, Middle Initial)

Mailing Address 1129 Wishing Well Ct

City Cedar Hill State TX Zip Code 75104-8255

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation DIR, BUSINESS CONTINUITY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 30 / 2013
Transaction ID : AF529CE7B248E4810B8E

Amount of Each Receipt this Period 30.00

Payroll Deduction: \$10.00/Bi-Weekly

B. JEFFREY KOURY
Full Name (Last, First, Middle Initial)

Mailing Address 42 Barneburg

City Dove Canyon State CA Zip Code 92679-4210

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation SVP, REGIONAL OPERATIONS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 912.00

Date of Receipt 11 / 30 / 2013
Transaction ID : A47B35A407638468E8E7

Amount of Each Receipt this Period 114.00

Payroll Deduction: \$38.00/Bi-Weekly

C. CONLEY S CERVANTES
Full Name (Last, First, Middle Initial)

Mailing Address 819 Cambridge Manor Ln

City Coppell State TX Zip Code 75019-6105

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation SR DIR, MANAGED CARE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 288.00

Date of Receipt 11 / 30 / 2013
Transaction ID : A7469521E29A14139BBC

Amount of Each Receipt this Period 36.00

Payroll Deduction: \$12.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ▶ 180.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 62
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. STEPHEN W KROUSE		Date of Receipt MM / DD / YYYY 11 / 30 / 2013 Transaction ID : A1465093AF5814A2E859
Mailing Address 632 Hirst Ave		Amount of Each Receipt this Period 57.00
City Havertown	State PA	Zip Code 19083-4126
FEC ID number of contributing federal political committee. C		Payroll Deduction: \$19.00/Bi-Weekly
Name of Employer ST. CHRISTOPHER'S HOSPITAL FOR CHILDREN	Occupation CHIEF HR OFFICER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 456.00	

Full Name (Last, First, Middle Initial) B. DAVID L ARCHER		Date of Receipt MM / DD / YYYY 11 / 30 / 2013 Transaction ID : A8B79831EB05D4E4292A
Mailing Address 2594 Hocksett Cv		Amount of Each Receipt this Period 288.00
City Germantown	State TN	Zip Code 38139-6655
FEC ID number of contributing federal political committee. C		Payroll Deduction: \$96.00/Bi-Weekly
Name of Employer SAINT FRANCIS HOSPITAL	Occupation MARKET CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2304.00	

Full Name (Last, First, Middle Initial) C. JEREMY D FALKE		Date of Receipt MM / DD / YYYY 11 / 30 / 2013 Transaction ID : A02DACD48D647402A999
Mailing Address 18726 Olive St		Amount of Each Receipt this Period 57.00
City Omaha	State NE	Zip Code 68136-1229
FEC ID number of contributing federal political committee. C		Payroll Deduction: \$19.00/Bi-Weekly
Name of Employer TENET HEALTHCARE CORPORATION	Occupation DIR, STRTGIC OPS, ANLYS & REPORTING	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 456.00	

SUBTOTAL of Receipts This Page (optional).....▶	402.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 62
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. JAMES E MCPARTLAND
Full Name (Last, First, Middle Initial)

Mailing Address 2345 Timberlake Cir

City State Zip Code
Allen TX 75013-5835

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

Name of Employer Occupation
TENET HEALTHCARE CORPORATION VP, PATIENT MGMT SYSTEMS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
456.00

Date of Receipt
11 / 30 / 2013
Transaction ID : A2058D02DB2314C65AB7

Amount of Each Receipt this Period
57.00

Payroll Deduction: \$19.00/Bi-Weekly

B. KELVIN A BAGGETT
Full Name (Last, First, Middle Initial)

Mailing Address 6453 Tulip Ln

City State Zip Code
Dallas TX 75230-4148

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

Name of Employer Occupation
TENET HEALTHCARE CORPORATION SVP, CHIEF MEDICAL OFCR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
936.00

Date of Receipt
11 / 30 / 2013
Transaction ID : A8C964D82CB3E4BE8821

Amount of Each Receipt this Period
117.00

Payroll Deduction: \$39.00/Bi-Weekly

C. ANTHONY BAIRD
Full Name (Last, First, Middle Initial)

Mailing Address 4940 Pikes Peak Dr

City State Zip Code
El Paso TX 79904-2023

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

Name of Employer Occupation
PROVIDENCE MEMORIAL HOSPITAL ADMIN DIR DCQI

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
11 / 30 / 2013
Transaction ID : A5EAF549914B8424DBBE

Amount of Each Receipt this Period
30.00

Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	204.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 62
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. JOHN TILLY
Full Name (Last, First, Middle Initial)

Mailing Address 1221 Wentwood Dr

City Irving State TX Zip Code 75061-4456

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation VP & ASST GENERAL COUNSE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1800.00

Date of Receipt 11 / 30 / 2013
Transaction ID : A78E9AEB18A434A07907

Amount of Each Receipt this Period 225.00

Payroll Deduction: \$75.00/Bi-Weekly

B. PAUL SMITH
Full Name (Last, First, Middle Initial)

Mailing Address 24 Willow Oak Ln

City Saint Louis State MO Zip Code 63122-4714

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation SR DIR, OUTPT STRATG DEV

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 30 / 2013
Transaction ID : A2679DE0953394294B53

Amount of Each Receipt this Period 30.00

Payroll Deduction: \$10.00/Bi-Weekly

C. ROBIN MONTOYA
Full Name (Last, First, Middle Initial)

Mailing Address 6504 Wind Ridge Dr

City El Paso State TX Zip Code 79912-7356

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

Name of Employer SIERRA PROVIDENCE EASTSIDE HOSPITAL Occupation DIR, MARKETING

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 30 / 2013
Transaction ID : ACA01C210B156466DBC2

Amount of Each Receipt this Period 30.00

Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ▶ 285.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 62
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. RODNEY A REASONER
Full Name (Last, First, Middle Initial)
Mailing Address 1960 Mary Lee Ln
City State Zip Code
Allen TX 75002-8528
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
TENET HEALTHCARE CORPORATION VP, FINANCE
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
912.00

Date of Receipt
11 / 30 / 2013
Transaction ID : A4FE26DD34AFC459886D
Amount of Each Receipt this Period
114.00
Payroll Deduction: \$38.00/Bi-Weekly

B. SANDRA C HOLMAN
Full Name (Last, First, Middle Initial)
Mailing Address 3874 Heatherbrook Trl
City State Zip Code
Vale NC 28168-9570
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
FRYE REGIONAL MEDICAL CENTER DIR, RADIOLOGY
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
240.00

Date of Receipt
11 / 30 / 2013
Transaction ID : AE391C5E229B24C40B5C
Amount of Each Receipt this Period
30.00
Payroll Deduction: \$10.00/Bi-Weekly

C. ERIC M DELGADO
Full Name (Last, First, Middle Initial)
Mailing Address 4734 Briercrest Ave
City State Zip Code
Lakewood CA 90713-2312
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
TENET HEALTHCARE CORPORATION DIR, REGIONAL FINANCE
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
240.00

Date of Receipt
11 / 30 / 2013
Transaction ID : A578F0A9829D7473FA33
Amount of Each Receipt this Period
30.00
Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	174.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 62
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. TIM ADAMS
Full Name (Last, First, Middle Initial)

Mailing Address 2408 University Club Dr

City Austin State TX Zip Code 78732-2052

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation SVP REGIONAL OPERATIONS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2304.00

Date of Receipt 11 / 30 / 2013
Transaction ID : AD367DC652D07457DB01

Amount of Each Receipt this Period 288.00

Payroll Deduction: \$96.00/Bi-Weekly

B. JOSEPH A DESANTIS
Full Name (Last, First, Middle Initial)

Mailing Address 201 W Lancaster Ave Unit 413

City Ft Worth State TX Zip Code 76102-6669

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation DIR, EXECUTIVE OFFICE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 30 / 2013
Transaction ID : A47A19B1EFFCD414AB22

Amount of Each Receipt this Period 30.00

Payroll Deduction: \$10.00/Bi-Weekly

C. RUBEN O RODRIGUEZ
Full Name (Last, First, Middle Initial)

Mailing Address 6905 Villa Hermosa Dr

City El Paso State TX Zip Code 79912-2341

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

Name of Employer SIERRA PROVIDENCE EASTSIDE HOSPITAL Occupation DIR, PLANT OPERATIONS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 456.00

Date of Receipt 11 / 30 / 2013
Transaction ID : A941369E5CE724E55968

Amount of Each Receipt this Period 57.00

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ▶ 375.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 62
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. NANCY FOSTER
Full Name (Last, First, Middle Initial)

Mailing Address 9603 Forest Ridge Cir

City Davie State FL Zip Code 33328-6791

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation DIR, REG REIMBURSEMENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **11 / 30 / 2013**

Transaction ID : AC5BF9BF27089471F8E6

Amount of Each Receipt this Period **30.00**

Payroll Deduction: \$10.00/Bi-Weekly

B. MARK P LISA
Full Name (Last, First, Middle Initial)

Mailing Address 391 E Milgeo Ave

City Ripon State CA Zip Code 95366-2120

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

Name of Employer DOCTORS HOSPITAL OF MANTECA Occupation CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **936.00**

Date of Receipt **11 / 30 / 2013**

Transaction ID : A83DEDA55631046F08A4

Amount of Each Receipt this Period **117.00**

Payroll Deduction: \$39.00/Bi-Weekly

C. STEPHEN M MOONEY
Full Name (Last, First, Middle Initial)

Mailing Address 4619 Briar Oaks Cir

City Dallas State TX Zip Code 75287-7503

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

Name of Employer CONIFER Occupation PRESIDENT, CONIFER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **936.00**

Date of Receipt **11 / 30 / 2013**

Transaction ID : A7F9A72B183EB452889F

Amount of Each Receipt this Period **117.00**

Payroll Deduction: \$39.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... **264.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 62
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. WEBB COCHRAN
Full Name (Last, First, Middle Initial)

Mailing Address 3961 St Claire Ct

City Atlanta State GA Zip Code 30319

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation DIR, GOVT RELATIONS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **11 / 30 / 2013**

Transaction ID : AC08EAA041704C52A10

Amount of Each Receipt this Period **30.00**

Payroll Deduction: \$10.00/Bi-Weekly

B. MICHAEL S HONGOLA
Full Name (Last, First, Middle Initial)

Mailing Address 6704 Westmont Dr

City Colleyville State TX Zip Code 76034-7263

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation VP, INFO SYSTEMS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **480.00**

Date of Receipt **11 / 30 / 2013**

Transaction ID : A58AC88A5D9A14F59B27

Amount of Each Receipt this Period **60.00**

Payroll Deduction: \$20.00/Bi-Weekly

C. SALLY A HURT-STEFFEN
Full Name (Last, First, Middle Initial)

Mailing Address 712 Waltham Ct

City El Paso State TX Zip Code 79922-2128

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

Name of Employer SIERRA PROVIDENCE EASTSIDE HOSPITAL Occupation CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1200.00**

Date of Receipt **11 / 30 / 2013**

Transaction ID : A76C9228DA91A402D95B

Amount of Each Receipt this Period **150.00**

Payroll Deduction: \$50.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	240.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 62
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. LESTER G COTTLE
Full Name (Last, First, Middle Initial)

Mailing Address 1625 Fawn Ln

City State Zip Code
Huntingdon Valley PA 19006-7917

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

Name of Employer Occupation
ST CHRISTOPHER'S HOSPITAL FOR CHILDREN CFO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
456.00

Date of Receipt
11 / 30 / 2013
Transaction ID : A465BC22F39604438913

Amount of Each Receipt this Period
57.00

Payroll Deduction: \$19.00/Bi-Weekly

B. ANDREAS M GRAF
Full Name (Last, First, Middle Initial)

Mailing Address 3975 Stockton Ln

City State Zip Code
Dallas TX 75287-4921

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

Name of Employer Occupation
TENET HEALTHCARE CORPORATION MGR, TRAVEL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
456.00

Date of Receipt
11 / 30 / 2013
Transaction ID : AABB3213B42EA4FD6A68

Amount of Each Receipt this Period
57.00

Payroll Deduction: \$19.00/Bi-Weekly

C. RICHARD E GLANCEY
Full Name (Last, First, Middle Initial)

Mailing Address 6516 Vasco Way

City State Zip Code
El Paso TX 79912-1709

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

Name of Employer Occupation
SIERRA MEDICAL CENTER DIR, EXTERNAL AFFAIRS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
858.00

Date of Receipt
11 / 02 / 2013
Transaction ID : ACD52D454F55144199E8

Amount of Each Receipt this Period
39.00

Payroll Deduction: \$39.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ▶ 153.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 62
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. CANDACE MARKWITH
Full Name (Last, First, Middle Initial)
Mailing Address 980 Isabella Way

City San Luis Obispo	State CA	Zip Code 93405-6186
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FEC ID number of contributing federal political committee. **C**

Name of Employer SIERRA VISTA REGIONAL MEDICAL CENTER	Occupation CEO
--	-------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
936.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2013

Transaction ID : A442850AE8E6449C98DD

Amount of Each Receipt this Period
117.00

Payroll Deduction: \$39.00/Bi-Weekly

B. LEA D FOURKILLER
Full Name (Last, First, Middle Initial)
Mailing Address 13219 George St

City Dallas	State TX	Zip Code 75234-5206
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FEC ID number of contributing federal political committee. **C**

Name of Employer CONIFER	Occupation VP & CHIEF COMP OFFICER
-----------------------------	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1056.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2013

Transaction ID : A14B838E620484A3894B

Amount of Each Receipt this Period
132.00

Payroll Deduction: \$44.00/Bi-Weekly

C. CLAY A FARELL
Full Name (Last, First, Middle Initial)
Mailing Address 4118 Carla St

City Nacogdoches	State TX	Zip Code 75965-2239
---------------------	-------------	------------------------

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

Name of Employer NACOGDOCHES MEDICAL CENTER	Occupation DBD-ASSOC ADMINISTRATOR
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2013

Transaction ID : A79D74A016FBC4A029F6

Amount of Each Receipt this Period
30.00

Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	279.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 62
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. STEVEN B BARR			Date of Receipt
Mailing Address 1300 Binz St			<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : A1942C4E4A81E4A04B9C
Houston	TX	77004-7016	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			<input type="text" value="57.00"/>
Name of Employer	Occupation		Payroll Deduction: \$19.00/Bi-Weekly
PLAZA SPECIALTY HOSPITAL	CEO		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="456.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. JOHN QUINN			Date of Receipt
Mailing Address 1138 Pine Valley Rd			<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : A6532E447F33645969F9
Griffin	GA	30224-4953	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			<input type="text" value="114.00"/>
Name of Employer	Occupation		Payroll Deduction: \$38.00/Bi-Weekly
SPALDING REGIONAL HOSPITAL	CEO		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="912.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. ROB FINNEGAN			Date of Receipt
Mailing Address 2804 Carriage Trl			<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : AF03301AE989C4BCA9D3
McKinney	TX	75070-4306	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			<input type="text" value="57.00"/>
Name of Employer	Occupation		Payroll Deduction: \$19.00/Bi-Weekly
TENET HEALTHCARE CORPORATION	SR DIR, FINANCE ASC		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="456.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="228.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 62
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. RICHARD BECK
Full Name (Last, First, Middle Initial)

Mailing Address 107 Waterman

City Irvine State CA Zip Code 92602-1654

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

Name of Employer: TENET HEALTHCARE CORPORATION
Occupation: DIR, C&D - WESTERN DIV

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt: **11 / 30 / 2013**
Transaction ID : A8DB8DE6E6A4646D9BFF

Amount of Each Receipt this Period: **30.00**

Payroll Deduction: \$10.00/Bi-Weekly

B. AMANDA EDMONDSON
Full Name (Last, First, Middle Initial)

Mailing Address 4407 Mill Creek Rd

City Dallas State TX Zip Code 75244-6718

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

Name of Employer: TENET HEALTHCARE CORPORATION
Occupation: DIR, MGD CARE PAY STRAT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt: **11 / 30 / 2013**
Transaction ID : AF30DBC0F454145F39DB

Amount of Each Receipt this Period: **30.00**

Payroll Deduction: \$10.00/Bi-Weekly

C. ELIZABETH JOHNSON
Full Name (Last, First, Middle Initial)

Mailing Address 3302 Marsh Ln

City Grapevine State TX Zip Code 76051-6828

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

Name of Employer: TENET HEALTHCARE CORPORATION
Occupation: VP, APPLIED CLINICAL INF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **912.00**

Date of Receipt: **11 / 30 / 2013**
Transaction ID : A1BBCE4B99D5D46BE866

Amount of Each Receipt this Period: **114.00**

Payroll Deduction: \$38.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... **174.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 62
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. SHELLEY GILES
Full Name (Last, First, Middle Initial)
Mailing Address 3803 Stockton Ln
City Dallas State TX Zip Code 75287-4919
FEC ID number of contributing federal political committee. **C**
Name of Employer TENET HEALTHCARE CORPORATION Occupation DIR, RELOCATION
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 480.00

Date of Receipt 11 / 30 / 2013
Transaction ID : **A6984699B10934718800**
Amount of Each Receipt this Period 60.00
Payroll Deduction: \$20.00/Bi-Weekly

B. BRADLEY S TALBERT
Full Name (Last, First, Middle Initial)
Mailing Address 16 Paddocks Blvd
City Hilton Head State SC Zip Code 29926-3507
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 240.00

Date of Receipt 11 / 30 / 2013
Transaction ID : **ABCA1958A375C461FAEC**
Amount of Each Receipt this Period 30.00
Payroll Deduction: \$10.00/Bi-Weekly

C. CYNTHIA Z BECKMAN
Full Name (Last, First, Middle Initial)
Mailing Address 1811 N Park Towne Pl
City Philadelphia State PA Zip Code 19130
FEC ID number of contributing federal political committee. **C**
Name of Employer TENET HEALTHCARE CORPORATION Occupation MGR, LITIGATION
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 240.00

Date of Receipt 11 / 30 / 2013
Transaction ID : **A2A9D6F9BDFB64B24A7F**
Amount of Each Receipt this Period 30.00
Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... 120.00
TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 62
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. DINA L DUNN

Mailing Address 3717 Cherry Ridge Dr

City Frisco State TX Zip Code 75033-1328

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

Name of Employer: TENET HEALTHCARE CORPORATION
Occupation: VP, HR HOSPITAL OPS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt: **11 / 30 / 2013**

Transaction ID : AA3FB367CA52546E38A0

Amount of Each Receipt this Period: **75.00**

Payroll Deduction: \$25.00/Bi-Weekly

Full Name (Last, First, Middle Initial)
B. TIMOTHY RAPER

Mailing Address 2333 Salisbury Ct

City Lewisville State TX Zip Code 75056-5644

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

Name of Employer: TENET HEALTHCARE CORPORATION
Occupation: DIR, AVIATION

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt: **11 / 30 / 2013**

Transaction ID : A4E13CD4A23684B74AB7

Amount of Each Receipt this Period: **30.00**

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)
C. WAYNE E COBB

Mailing Address 4001 Orchid Ln

City Mansfield State TX Zip Code 76063-5577

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

Name of Employer: TENET HEALTHCARE CORPORATION
Occupation: MGR, TAX

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt: **11 / 30 / 2013**

Transaction ID : AD875059D8F244049B2E

Amount of Each Receipt this Period: **30.00**

Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 62
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. JOHN A GRAH
Full Name (Last, First, Middle Initial)

Mailing Address 6104 La Posta Dr

City El Paso	State TX	Zip Code 79912-1842
-----------------	-------------	------------------------

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 ▼
776.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2013

Transaction ID : A016D422772A9485AA4B

Amount of Each Receipt this Period
117.00

Payroll Deduction: \$39.00/Bi-Weekly

B. MATTHEW C MICHAELS
Full Name (Last, First, Middle Initial)

Mailing Address 3507 Munstead Trl

City Frisco	State TX	Zip Code 75033-1166
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FEC ID number of contributing federal political committee. **C**

Name of Employer CONIFER	Occupation SVP, HOSPITAL OPS
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
456.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2013

Transaction ID : AFAF861138EAB46088F6

Amount of Each Receipt this Period
57.00

Payroll Deduction: \$19.00/Bi-Weekly

C. GLORIA M LOERA
Full Name (Last, First, Middle Initial)

Mailing Address 3061 Snowy Point Dr

City El Paso	State TX	Zip Code 79938-5401
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FEC ID number of contributing federal political committee. **C**

Name of Employer SIERRA PROVIDENCE EASTSIDE HOSPITAL	Occupation DIR, NURSING
---	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2013

Transaction ID : A96835BD0B3874CBBA9D

Amount of Each Receipt this Period
30.00

Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	204.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 62
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. KIMBERLY P BROWN
 Full Name (Last, First, Middle Initial)
 Mailing Address 2634 Forest Pebble
 City San Antonio State TX Zip Code 78232-4141
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHCARE CORPORATION Occupation SR DIR, COMPLIANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 30 / 2013
Transaction ID : AD2BF714B882342668C4
 Amount of Each Receipt this Period 30.00
 Payroll Deduction: \$10.00/Bi-Weekly

B. KENT G CLAYTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 3 Turtle Bay Dr
 City Newport Beach State CA Zip Code 92660-4266
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PLACENTIA LINDA HOSPITAL Occupation CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 912.00

Date of Receipt 11 / 30 / 2013
Transaction ID : A2AEB61FDC9C94A23B5C
 Amount of Each Receipt this Period 114.00
 Payroll Deduction: \$38.00/Bi-Weekly

C. BRUCE MEARS
 Full Name (Last, First, Middle Initial)
 Mailing Address 10312 Arvin Hill Rd
 City Aubrey State TX Zip Code 76227-6847
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHCARE CORPORATION Occupation SR DIR, IS OPERATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 30 / 2013
Transaction ID : A30936FB4CDE44C829B3
 Amount of Each Receipt this Period 30.00
 Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶ 174.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 62
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. MARK L ATTEBERRY
Full Name (Last, First, Middle Initial)

Mailing Address RR 4 Box 76F

City Shelbyville State IL Zip Code 62565-8664

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation MGR, PROJECT C&D II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 30 / 2013
Transaction ID : A144B5EAA5D994DF7BB0

Amount of Each Receipt this Period 30.00

Payroll Deduction: \$10.00/Bi-Weekly

B. SANDRA HILL
Full Name (Last, First, Middle Initial)

Mailing Address 2008 Haversham Dr

City Flower Mound State TX Zip Code 75022-8440

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation DIR, DOC & TRAINING

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 30 / 2013
Transaction ID : A545D6BE696664DE4AB6

Amount of Each Receipt this Period 30.00

Payroll Deduction: \$10.00/Bi-Weekly

C. KELLY SCHIRMER
Full Name (Last, First, Middle Initial)

Mailing Address 1500 Locust St Apt 3911

City Philadelphia State PA Zip Code 19102-4326

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

Name of Employer ST. CHRISTOPHER'S HOSPITAL FOR CHILDREN Occupation COO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 30 / 2013
Transaction ID : AD7813AD4C7EA47D8975

Amount of Each Receipt this Period 30.00

Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 62
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. ALEXANDER M FERNANDEZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 5843 NW 126th Ter
 City Coral Springs State FL Zip Code 33076-1934
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NORTH SHORE MEDICAL CENTER Occupation CFO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **240.00**

Date of Receipt **11 / 30 / 2013**
Transaction ID : A6EB93565C7E94351A37
 Amount of Each Receipt this Period **30.00**
 Payroll Deduction: \$10.00/Bi-Weekly

B. DAVID W BORDOFSKE
 Full Name (Last, First, Middle Initial)
 Mailing Address 5001 Ashland Belle Ln
 City Frisco State TX Zip Code 75035-7682
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHCARE CORPORATION Occupation VP, CLINICAL SYSTEMS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **960.00**

Date of Receipt **11 / 30 / 2013**
Transaction ID : AF9F2D87A2E3C45EA808
 Amount of Each Receipt this Period **120.00**
 Payroll Deduction: \$40.00/Bi-Weekly

C. LINDA HINZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 1639 IOWA STREET UNIT C
 City Costa Mesa State CA Zip Code 92626-2072
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHCARE CORPORATION Occupation MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **304.00**

Date of Receipt **11 / 30 / 2013**
Transaction ID : ABCFB8D10C3CE4C83A79
 Amount of Each Receipt this Period **57.00**
 Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	207.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 44 OF 62
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. JAMES D DORIS
Full Name (Last, First, Middle Initial)
Mailing Address 264 Idlewilde Ln
City Sanford State NC Zip Code 27332-9304
FEC ID number of contributing federal political committee. **C**
Name of Employer CENTRAL CAROLINA HOSPITAL Occupation CEO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **840.00**

Date of Receipt **11 / 30 / 2013**
Transaction ID : A49AD587FDBB94420A13
Amount of Each Receipt this Period **105.00**
Payroll Deduction: \$35.00/Bi-Weekly

B. JASON E EVANS
Full Name (Last, First, Middle Initial)
Mailing Address 676 Bryn Mahr Ln
City Rockwall State TX Zip Code 75087-6018
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 ▼ **936.00**

Date of Receipt **11 / 30 / 2013**
Transaction ID : A4B4F7695129543B6945
Amount of Each Receipt this Period **117.00**
Payroll Deduction: \$39.00/Bi-Weekly

C. CORDELIA BARBERA
Full Name (Last, First, Middle Initial)
Mailing Address 1200 Cheyenne Dr
City Desoto State TX Zip Code 75115-7778
FEC ID number of contributing federal political committee. **C**
Name of Employer TENET HEALTHCARE CORPORATION Occupation DIR, APPLIED CLIN INFO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **11 / 30 / 2013**
Transaction ID : A01F15B9688714CB4B92
Amount of Each Receipt this Period **30.00**
Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	252.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 62
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. JUDITH STIMSON-RUSIN			Date of Receipt
Mailing Address 11807 Littlestone Ct			<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : AD8058EAA649540078E4
West Palm Beach	FL	33412-1621	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="30.00"/>
Name of Employer	Occupation	Payroll Deduction: \$10.00/Bi-Weekly	
PALM BEACH GARDENS MEDICAL CENTER	CFO		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="240.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. DANIEL M KARNUTA			Date of Receipt
Mailing Address 981 Patrician Ct			<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : AFAB85944A33D4E6EBFB
McKinney	TX	75069-8781	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="75.00"/>
Name of Employer	Occupation	Payroll Deduction: \$25.00/Bi-Weekly	
CONIFER	SVP & CFO		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="600.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. REBECCA SPEIGHT			Date of Receipt
Mailing Address 210 Chatfield Dr			<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : ACBA0E640B2A14A948F8
Rockwall	TX	75087-7140	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="30.00"/>
Name of Employer	Occupation	Payroll Deduction: \$10.00/Bi-Weekly	
LAKE POINTE MEDICAL CENTER	CFO		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="240.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="135.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 62
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. AUDREY T ANDREWS
Full Name (Last, First, Middle Initial)

Mailing Address 702 Penfolds Ln

City Coppel State TX Zip Code 75019-4544

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation GENERAL COUNSEL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 4608.00

Date of Receipt 11 / 30 / 2013
Transaction ID : AF245CA1BFA7747D0A80

Amount of Each Receipt this Period 576.00

Payroll Deduction: \$192.00/Bi-Weekly

B. WILLIAM T MOORE
Full Name (Last, First, Middle Initial)

Mailing Address 3014 Castle Pines Dr

City Duluth State GA Zip Code 30097-2039

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

Name of Employer ATLANTA MEDICAL CENTER Occupation MARKET CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt 11 / 30 / 2013
Transaction ID : AA8D354C3125C4610ADC

Amount of Each Receipt this Period 60.00

Payroll Deduction: \$20.00/Bi-Weekly

C. NANCY L LUTTRULL-KITT
Full Name (Last, First, Middle Initial)

Mailing Address 9530 Deodar St

City Alta Loma State CA Zip Code 91737-3547

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

Name of Employer TENET PATIENT FINCL SVCS Occupation DIR, REV CYCLE MGMT II

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 30 / 2013
Transaction ID : AB40AC9B055314913AAD

Amount of Each Receipt this Period 30.00

Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶ 666.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 62
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. MICHELE M FINNEY
Full Name (Last, First, Middle Initial)

Mailing Address 21521 Turtledove St

City Trabuco Canyon State CA Zip Code 92679-3486

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 ▼ **912.00**

Date of Receipt **11 / 30 / 2013**

Transaction ID : A54875553712B462A9E9

Amount of Each Receipt this Period **114.00**

Payroll Deduction: \$38.00/Bi-Weekly

B. MR COLLIN O LEMAISTRE
Full Name (Last, First, Middle Initial)

Mailing Address 288 Boulder Ln

City Nacogdoches State TX Zip Code 75965-7006

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

Name of Employer NACOGDOCHES MEDICAL CENTER Occupation COO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **11 / 30 / 2013**

Transaction ID : AC0DE99378F9D46C9BBF

Amount of Each Receipt this Period **30.00**

Payroll Deduction: \$10.00/Bi-Weekly

C. LEONARD ROSENFELD
Full Name (Last, First, Middle Initial)

Mailing Address 7243 Baxtershire Dr

City Dallas State TX Zip Code 75230-3170

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation VP, QUALITY MANAGEMENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **456.00**

Date of Receipt **11 / 30 / 2013**

Transaction ID : A46307E5AEF5C4DFD9C6

Amount of Each Receipt this Period **57.00**

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... **201.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 62
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. TYLER MURPHY
Full Name (Last, First, Middle Initial)

Mailing Address 108 Londonberry Ter

City Southlake State TX Zip Code 76092-7321

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation VP AND TREASURER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 456.00

Date of Receipt 11 / 30 / 2013
Transaction ID : **AB6DB16523423407293D**

Amount of Each Receipt this Period 57.00

Payroll Deduction: \$19.00/Bi-Weekly

B. VANESSA BENAVIDES
Full Name (Last, First, Middle Initial)

Mailing Address 3818 Cedar Spr # 101-32

City Dallas State TX Zip Code 75219-0000

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation CORP COMPLIANCE OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 936.00

Date of Receipt 11 / 30 / 2013
Transaction ID : **ABD3A050B10EF4D48B1B**

Amount of Each Receipt this Period 117.00

Payroll Deduction: \$39.00/Bi-Weekly

C. JACK HARARI
Full Name (Last, First, Middle Initial)

Mailing Address 501 LIDO DRIVE

City Fort Lauderdale State FL Zip Code 33301-2537

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

Name of Employer WEST BOCA MEDICAL CENTER Occupation CHIEF MEDICAL OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt 11 / 30 / 2013
Transaction ID : **A876AAE64A01E435CBC9**

Amount of Each Receipt this Period 57.00

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	231.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 62
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. STEVEN SIMMONS
Full Name (Last, First, Middle Initial)

Mailing Address 526 Hampshire Rd

City Drexel Hill State PA Zip Code 19026-1306

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

Name of Employer HAHNEMANN UNIVERSITY HOSPITAL Occupation CHIEF HR OFFICER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 30 / 2013
Transaction ID : A034EB3D7CC5B4F38A9A

Amount of Each Receipt this Period 30.00

Payroll Deduction: \$10.00/Bi-Weekly

B. MICHAEL K BURTNETT
Full Name (Last, First, Middle Initial)

Mailing Address 1131 N Edgefield Ave

City Dallas State TX Zip Code 75208-3624

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation VP, OUTPATIENT SERVICES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 912.00

Date of Receipt 11 / 30 / 2013
Transaction ID : A09C226F8453144C5A0F

Amount of Each Receipt this Period 114.00

Payroll Deduction: \$38.00/Bi-Weekly

C. Mr. JAMES M THATCHER
Full Name (Last, First, Middle Initial)

Mailing Address 6608 Castle Pines Dr

City Plano State TX Zip Code 75093-6378

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

Name of Employer CONIFER Occupation SVP, BUS DEVELOPMENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 456.00

Date of Receipt 11 / 30 / 2013
Transaction ID : A4FF618195D2A48C1813

Amount of Each Receipt this Period 57.00

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶ 201.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 62
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. ALBERT BARROCAS
 Full Name (Last, First, Middle Initial)
 Mailing Address 4050 Spalding Dr
 City Atlanta State GA Zip Code 30350-1100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SOUTH FULTON MEDICAL CENTER Occupation CHIEF MEDICAL OFFICER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **456.00**

Date of Receipt **11 / 30 / 2013**
Transaction ID : A99C46ED780F8472DB2C
 Amount of Each Receipt this Period **57.00**
 Payroll Deduction: \$19.00/Bi-Weekly

B. LINDA K MERCIER
 Full Name (Last, First, Middle Initial)
 Mailing Address 14 Columbia Crest Pl
 City Spring State TX Zip Code 77382-1334
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HOUSTON NW MEDICAL CENTER Occupation CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **936.00**

Date of Receipt **11 / 30 / 2013**
Transaction ID : A94D26CC99AAE41D5A9A
 Amount of Each Receipt this Period **117.00**
 Payroll Deduction: \$39.00/Bi-Weekly

C. CRAIG C ARMIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 23510 Berdon St
 City Woodland Hills State CA Zip Code 91367-3004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHCARE CORPORATION Occupation VP, GOVT PROGRAMS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **960.00**

Date of Receipt **11 / 30 / 2013**
Transaction ID : AA923F3313142449FA6A
 Amount of Each Receipt this Period **120.00**
 Payroll Deduction: \$40.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... **294.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 51 OF 62
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. MICHAEL HALTER
Full Name (Last, First, Middle Initial)

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 ▼ 456.00

Date of Receipt 11 / 30 / 2013
Transaction ID : A837C44D9CE9B4C41B70

Amount of Each Receipt this Period 57.00

Payroll Deduction: \$19.00/Bi-Weekly

B. ALAN R CASON
Full Name (Last, First, Middle Initial)

Mailing Address 255 Evernia St Apt 1503

City West Palm Bch State FL Zip Code 33401-5691

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

Name of Employer Pinnacle M.S.O Occupation VP & CEO MIDTOWN IMAGING

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 247.00

Date of Receipt 11 / 30 / 2013
Transaction ID : A1DCBBD1D2F6C47528B1

Amount of Each Receipt this Period 57.00

Payroll Deduction: \$19.00/Bi-Weekly

C. BRITT REYNOLDS
Full Name (Last, First, Middle Initial)

Mailing Address 3201 Wentwood Dr

City Dallas State TX Zip Code 75225-4845

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation PRESIDENT OF HOSPITAL OPERATIONS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2307.60

Date of Receipt 11 / 30 / 2013
Transaction ID : ADB4FBFF3A5764DCF869

Amount of Each Receipt this Period 288.45

Payroll Deduction: \$96.15/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶ 402.45

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 62
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. ALVIN W JOSEPHS
Full Name (Last, First, Middle Initial)
Mailing Address 3717 Herwol Ave

City Waco	State TX	Zip Code 76710-7218
--------------	-------------	------------------------

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

Name of Employer TENET HEALTHCARE CORPORATION	Occupation SR DIR, COMPLNCE POLICY
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **936.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2013

Transaction ID : A022287F3AD084F488EE

Amount of Each Receipt this Period

117.00

Payroll Deduction: \$39.00/Bi-Weekly

B. KENNETH F SUTHERLAND
Full Name (Last, First, Middle Initial)
Mailing Address 102 Wilmington Ct

City Southlake	State TX	Zip Code 76092-8492
-------------------	-------------	------------------------

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

Name of Employer TENET HEALTHCARE CORPORATION	Occupation VP, CONSTRUCTION & DESIG
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **912.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2013

Transaction ID : ACA767D774ACE4686B5F

Amount of Each Receipt this Period

114.00

Payroll Deduction: \$38.00/Bi-Weekly

C. INEZ VARGAS
Full Name (Last, First, Middle Initial)
Mailing Address 1219 Cherry Spring Dr

City Houston	State TX	Zip Code 77038-2117
-----------------	-------------	------------------------

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

Name of Employer TENET PATIENT FINCL SVCS	Occupation DIR, REV CYCLE MGMT II
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2013

Transaction ID : AB3586BB3FAF841E6A01

Amount of Each Receipt this Period

30.00

Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	261.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 62
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. CARLOS A DUBE
Full Name (Last, First, Middle Initial)

Mailing Address 10172 Saigon Dr

City El Paso State TX Zip Code 79925-5428

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

Name of Employer SIERRA PROVIDENCE EASTSIDE HOSPITAL Occupation DIR, IMAGING SVCS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **456.00**

Date of Receipt **11 / 30 / 2013**

Transaction ID : AF1547C7AF66648BC9FA

Amount of Each Receipt this Period **57.00**

Payroll Deduction: \$19.00/Bi-Weekly

B. JANIS THAYER
Full Name (Last, First, Middle Initial)

Mailing Address 1735 Crimson Ter

City Brentwood State CA Zip Code 94513-2618

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation SR DIR, LABOR RELATIONS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **11 / 30 / 2013**

Transaction ID : A976D0F24FCAD4C14AE9

Amount of Each Receipt this Period **30.00**

Payroll Deduction: \$10.00/Bi-Weekly

C. MR. JAMES M COWLING
Full Name (Last, First, Middle Initial)

Mailing Address 111 Sunset Cove Ln

City Palm Beach Gardens State FL Zip Code 33418-4607

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

Name of Employer PALM BEACH GARDENS MEDICAL CENTER Occupation CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **456.00**

Date of Receipt **11 / 30 / 2013**

Transaction ID : A7E15551D346F495995F

Amount of Each Receipt this Period **57.00**

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... **144.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 62
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. HOAI-SON L NGUYEN
Full Name (Last, First, Middle Initial)

Mailing Address 303 Prince Albert Ct

City Richardson State TX Zip Code 75081-5059

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation DIR, IS HR/PR & RPT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 30 / 2013
Transaction ID : AA0A0FA65ABD64F1087D

Amount of Each Receipt this Period 30.00

Payroll Deduction: \$10.00/Bi-Weekly

B. MARY A MCCREA
Full Name (Last, First, Middle Initial)

Mailing Address 3420 N 128th Cir

City Omaha State NE Zip Code 68164-4236

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

Name of Employer CREIGHTON UNIVERSITY MEDICAL CENTER Occupation CNO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 30 / 2013
Transaction ID : AA84D553B7DDE4005BB9

Amount of Each Receipt this Period 30.00

Payroll Deduction: \$10.00/Bi-Weekly

C. MANUEL LINARES
Full Name (Last, First, Middle Initial)

Mailing Address 7935 East Dr Apt 901

City North Bay Village State FL Zip Code 33141-3693

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

Name of Employer NORTH SHORE MEDICAL CENTER Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 912.00

Date of Receipt 11 / 30 / 2013
Transaction ID : A4769C6068BBA4AE5B34

Amount of Each Receipt this Period 114.00

Payroll Deduction: \$38.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶ 174.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 55 OF 62
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. ALFRED SCHULS
Full Name (Last, First, Middle Initial)

Mailing Address 5017 Prosperity Ridge Rd

City Charlotte	State NC	Zip Code 28269-1538
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FEC ID number of contributing federal political committee. **C**

Name of Employer PIEDMONT MEDICAL CENTER	Occupation DIR, CARDIOVASCULAR SVCS
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2013

Transaction ID : A0A93B3F1C31F4DD3BAAE

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

B. DENNIS GRADY
Full Name (Last, First, Middle Initial)

Mailing Address 3940 NW 54th Ct

City Coconut Creek	State FL	Zip Code 33073-4123
-----------------------	-------------	------------------------

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

Name of Employer PALMETTO GENERAL HOSPITAL	Occupation DIR, CANCER CENTER 2
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2013

Transaction ID : A27B3169D6AB9430BA9C

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

C. JORGE DIAZ
Full Name (Last, First, Middle Initial)

Mailing Address 1350 SW 122nd Ave
Apt 221

City Miami	State FL	Zip Code 33184-2864
---------------	-------------	------------------------

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

Name of Employer CORAL GABLES HOSPITAL	Occupation DIR, CARDIOPULMONARY
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2013

Transaction ID : A402A4F52CFF74E2CA25

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 56 OF 62
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. THOMAS I RUNKLE

Mailing Address 868B N Pennock St

City Philadelphia State PA Zip Code 19130-1234

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

Name of Employer HAHNEMANN UNIVERSITY HOSPITAL Occupation DIRECTOR OF OPERATIONS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 456.00

Date of Receipt 11 / 23 / 2013
Transaction ID : A2B13BCECC2C040D38D/

Amount of Each Receipt this Period 38.00

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)
B. TERESA O'NEILL

Mailing Address 12066 Marsh Hen Ln

City Tega Cay State SC Zip Code 29708-7224

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

Name of Employer PIEDMONT MEDICAL CENTER Occupation DIR, NURSING -EMERGENCY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 23 / 2013
Transaction ID : AC57AD6AC3AB14EE6BB4

Amount of Each Receipt this Period 20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)
C. CELESTE H CHAMBERLAIN

Mailing Address 8446 Pembroke Rd

City Philadelphia State PA Zip Code 19128-1907

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

Name of Employer ST. CHRISTOPHER'S HOSPITAL FOR CHILDREN Occupation DCQI

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 456.00

Date of Receipt 11 / 23 / 2013
Transaction ID : AA98667E954C54618B97

Amount of Each Receipt this Period 38.00

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ▶ 96.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 62
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. JANE E HAMILTON		Date of Receipt 11 / 23 / 2013 Transaction ID : AE0C966AC367145D58E0
Mailing Address 8050 Royal Saint Georges Ln		Amount of Each Receipt this Period 20.00
City Duluth	State GA	Zip Code 30097-1647
FEC ID number of contributing federal political committee. C		Payroll Deduction: \$10.00/Bi-Weekly
Name of Employer ATLANTA MEDICAL CENTER	Occupation DIR, SURGICAL SVCS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) B. JOSEFA M KOLODZIECZYK		Date of Receipt 11 / 23 / 2013 Transaction ID : A1AA0DCB863AB4835A28
Mailing Address 424 Westwood Rd		Amount of Each Receipt this Period 20.00
City West Palm Beach	State FL	Zip Code 33401-7934
FEC ID number of contributing federal political committee. C		Payroll Deduction: \$10.00/Bi-Weekly
Name of Employer PALM BEACH GARDENS MEDICAL CENTER	Occupation CONTROLLER 2	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) C. RAYMOND J FOSTER		Date of Receipt 11 / 23 / 2013 Transaction ID : A49118D7DCDC545BFA88
Mailing Address 68220 Concepcion Rd		Amount of Each Receipt this Period 20.00
City Cathedral City	State CA	Zip Code 92234-3657
FEC ID number of contributing federal political committee. C		Payroll Deduction: \$10.00/Bi-Weekly
Name of Employer DESERT REGIONAL MEDICAL CENTER	Occupation DIR-IMAGING SERVICES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 58 OF 62
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
STEPHEN D PRESTON

Mailing Address 3680 Village Center Ln

City Hoover State AL Zip Code 35226-6343

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

Name of Employer Occupation
BROOKWOOD MEDICAL CENTER VP, EXTERNAL AFFAIRS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
456.00

Date of Receipt
11 / 23 / 2013
Transaction ID : A9E1C6A6687AE4DADB12

Amount of Each Receipt this Period
38.00

Payroll Deduction: \$19.00/Bi-Weekly

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	38.00
TOTAL This Period (last page this line number only).....▶	11351.45

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. DR. RAUL RUIZ FOR CONGRESS

Mailing Address PO BOX 6116

City LA QUINTA State CA Zip Code 92248

Purpose of Disbursement
Primary 2014

Candidate Name

Raul Ruiz

Office Sought: House
 Senate
 President
State: CA District: 36

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
11 / 13 / 2013

Transaction ID : BCC33D693B239483B958

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. Wyden for Senate

Mailing Address P.O. Box 3498

City Portland State OR Zip Code 97208

Purpose of Disbursement
Primary 2016

Candidate Name

Sen. Ron Wyden

Office Sought: House
 Senate
 President
State: OR District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
11 / 13 / 2013

Transaction ID : B0924FA5FC3B144CEB7F

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. SWALWELL FOR CONGRESS

Mailing Address P.O. BOX 2847

City DUBLIN State CA Zip Code 94568

Purpose of Disbursement
Primary 2014

Candidate Name

Eric Michael Swalwell

Office Sought: House
 Senate
 President
State: CA District: 15

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
11 / 13 / 2013

Transaction ID : B81AD7FCFF82247428AC

Amount of Each Disbursement this Period

1000.00

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

5000.00

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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. RICHARD E GLANCEY

Mailing Address 6516 Vasco Way

City El Paso State TX Zip Code 79912-1709

Purpose of Disbursement
Contribution Refund

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 16 / 2013

Transaction ID : B5DBBEC82BE6A430493A

Amount of Each Disbursement this Period

39.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

39.00

39.00

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Friends to Elect Christine M. Tartaglione

Mailing Address PO Box 52153

City Philadelphia State PA Zip Code 19115

Purpose of Disbursement
Election 2014

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 13 / 2013

Transaction ID : BBF702BF293404CFEBA3

Amount of Each Disbursement this Period

750.00

Full Name (Last, First, Middle Initial)

B. Mark Moores for State Senate

Mailing Address 9641 Seligman Ave NE

City Albuquerque State NM Zip Code 87109-6402

Purpose of Disbursement
Debt Retirement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) ▼

State: District: Other2013

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 13 / 2013

Transaction ID : B0EE98E7769914714BBE

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

1750.00

1750.00