LAW OFFICES OF
NIELSEN, MERKSAMER,
PARRINELLO, MUELLER & NAYLOR, LLP
A LIMITED LIABILITY PARTNERSHIP INCLUDING A PROFESSIONAL CORPORATION
591 REDWOOD HIGHWAY, #4000
MILL VALLEY, CALIFORNIA 94941-3039
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770 L STREET, SUITE 800
SACRAMENTO, CALIFORNIA 95814
TELEPHONE (916) 448-6752
FAX (916) 446-6106

SAN FRANCISCO
TWO EMBARCADERO CENTER, SUITE 200
SAN FRANCISCO, CALIFORNIA 94111
TELEPHONE (415) 389-6800
FAX (415) 388-6874

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

December 17, 2001

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

Dear Filing Officer:

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

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

for the period 10/01/98 Through 10/14/98.

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

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

cc: Arizona
Tennessee

#7125.01

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REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

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

ADDRESS (number and street) ☐ Check if different than previously reported
3820 STATE ST.

CITY, STATE and ZIP CODE
SANTA BARBARA, CA 93105

2. FEC IDENTIFICATION NUMBER
C00119354

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

4. TYPE OF REPORT

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

Monthly Report Due On:
☐ February 20 ☐ June 20 ☐ October 20
☐ March 20 ☐ July 20 ☐ November 20
☐ April 20 ☐ August 20 ☐ December 20
☐ May 20 ☐ September 20 ☐ January 31

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

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

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

SUMMARY

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5.	Covering Period 10/01/1999 through 10/24/1999		
6.	(a) Cash on Hand January 1, 1990		$ 41450.10
	(b) Cash on Hand at Beginning of Reporting Period	$ 71636.03	
	(c) Total Receipts (from Line 19)	$ 2239.52	$ 110359.81
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 73874.95	$ 151809.95
7.	Total Disbursements (from Line 30)	$ 6335.30	$ 84270.30
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 67539.65	$ 67539.65
9.	Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	$ 0.00	
10.	Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	$ 0.00	

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

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

Type or Print Name of Treasurer JASON D. KAUNE, ASSISTANT TREASURER

Signature of Treasurer

Date 11/ 30 /01

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

FEC FORM 3X
(revised 9/93)

FEAAN121PDF

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

(revised 1/1/91)

NAME OF COMMITTEE
TENET HEALTHCARE CORPORATION PAC

REPORT COVERING PERIOD
FROM 10/01/1998 TO: 10/14/1999

	COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	1434.90	57787.67	11(a)(i)
ii. Unitemized	803.62	52072.14	11(a)(ii)
iii. Total (add i and ii) >	2238.52	109859.81	11(a)(iii)
b. Political Party Committees	0.00	0.00	11(b)
c. Other Political Committees (such as PACs)	0.00	500.00	11(c)
d. Total Contributions (add a iii, b and c) >	2238.52	110359.81	11(d)
12. Transfers From Affiliated/Other Party Committees	0.00	0.00	12
13. All Loans Received	0.00	0.00	13
14. Loan Repayments Received	0.00	0.00	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00	16
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00	17
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	2238.52	110359.81	19
20. Total Federal Receipts (subtract line 18 from line 19) >	2238.52	110359.81	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal (from Schedule H4)			
i. Federal Share	0.00	0.00	21(a)(i)
ii. Non-Federal Share	0.00	0.00	21(a)(ii)
b. Other Federal Operating Expenditures	0.00	0.00	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >	0.00	0.00	21(c)
22. Transfers to Affiliated/Other Party Committees	0.00	0.00	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	125.00	63,245.00	23
24. Independent Expenditures (use Schedule E)	0.00	0.00	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00	25
26. Loan Repayments Made	0.00	0.00	26
27. Loans Made	0.00	0.00	27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees	4.30	19.30	28(a)
b. Political Party Committees	0.00	0.00	28(b)
c. Other Political Committees (such as PACs)	0.00	0.00	28(c)
d. Total Contribution Refunds (add a, b and c) >	4.30	19.30	28(d)
29. Other Disbursements	6,200.00	21,000.00	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	6329.30	84264.30	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	6329.30	84264.30	31
III. NetContributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	2238.52	110359.81	32
33. Total Contribution Refunds (from line 28d)	4.30	19.30	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	2234.22	110340.51	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	0.00	0.00	35
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00	36
37. Net Operating Expenditures (subtract line 36 from 35) >	0.00	0.00	37

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full)

TENET HEALTHCARE CORPORATION PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
A. Joseph Hopkins 930 S. Nueve Vista Drive Palm Springs, CA 92264 Receipt For: Primary General Other (specify):	Name of Employer: John F. Kennedy Memorial Hosp. Occupation: Director Aggregate Year-to-Date $ 375.00	10/03/1998	$35.00
B. Debra S. Wheeler 160 NW 170TH ST. N. MIAMI BEACH, FL 33169 Receipt For: Primary General Other (specify):	Name of Employer: Parkway Regional Medical Ctr. Occupation: DIRECTOR Aggregate Year-to-Date $ 350.00	10/03/1998	$25.00
C. Richard Ahrens 1708 Cherrybrook Nacogdoches, TX 75961 Receipt For: Primary General Other (specify):	Name of Employer: Nacogdoches Medical Center Occupation: Chief Operating Officer Aggregate Year-to-Date $ 375.00	10/10/1998	$25.00
D. Steven Altmiller 6211 Sdenbrook Drive Sugar Land, TX 77479 Receipt For: Primary General Other (specify):	Name of Employer: Twelve Oaks Hospital Occupation: Chief Executive Officer Aggregate Year-to-Date $ 920.00	10/10/1998	$20.00
E. Michael Appelbaum 30131 Saddleridge San Juan Capistrano, CA 92675 Receipt For: Primary General Other (specify):	Name of Employer: Tenet Healthcare Corporation Occupation: Assistant General Counsel Aggregate Year-to-Date $ 240.00	10/10/1998	$15.00
F. Frank Arambula 3203 Piedmont Avenue La Crescenta, CA 91214 Receipt For: Primary General Other (specify):	Name of Employer: USC University Hospital Occupation: Chief Financial Officer Aggregate Year-to-Date $ 210.00	10/10/1998	$10.00
F. John Bartlett 230 Turtle Creek Circle Oldsmar, FL 34677 Receipt For: Primary General Other (specify):	Name of Employer: Palms of Pasadena Hospital Occupation: Chief Executive Officer Aggregate Year-to-Date $ 605.00	10/10/1998	$5.00

SUBTOTAL of Receipts This Page (optional) 125.00

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

SCHEDULE A **ITEMIZED RECEIPTS**

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

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NAME OF COMMITTEE (in Full)

TENET HEALTHCARE CORPORATION PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Full Name, Mailing Address and ZIP Code John Beelle 10530 Haslin Boulevard Largo, FL 34644 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Tenet Healthcare Corporation Occupation: Director Aggregate Year-to-Date $ 210.00	10/10/1998	$10.00
B. Full Name, Mailing Address and ZIP Code Janelle Blanco 1111 Atlee Drive La Canada, CA 91011 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Tenet Healthcare Corporation Occupation: Government Relations Aggregate Year-to-Date $ 210.00	10/10/1998	$10.00
C. Full Name, Mailing Address and ZIP Code Larry Bozeman Route 1 Tennessee Colony, TX 75861 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Trinity Valley Medical Center Occupation: Chief Executive Officer Aggregate Year-to-Date $ 225.00	10/10/1998	$15.00
D. Full Name, Mailing Address and ZIP Code Glenda Brogden 925 Spyglass Circle Hoover, AL 35244 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Brookwood Medical Center Occupation: Chief Operating Officer Aggregate Year-to-Date $ 210.00	10/10/1998	$10.00
E. Full Name, Mailing Address and ZIP Code Mark R. Bryan 10378 N.W. 63rd Drive Parkland, FL 33076 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Tenet Healthcare Corporation Occupation: Vice President Aggregate Year-to-Date $ 403.83	10/10/1998	$19.23
F. Full Name, Mailing Address and ZIP Code Albert Canete 671 Quincy Avenue Long Beach, CA 90804 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Tenet Healthcare Corporation Occupation: Vice President, Finance Aggregate Year-to-Date $ 420.00	10/10/1998	$20.00
F. Full Name, Mailing Address and ZIP Code Conley Cervantes 631 St. Andrews Place Coppell, TX 75019 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Tenet Healthcare Corporation Occupation: Director Aggregate Year-to-Date $ 252.00	10/10/1998	$12.00

SUBTOTAL of Receipts This Page (optional) 96.23

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

SCHEDULE A **ITEMIZED RECEIPTS**

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

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION PAC

A. Full Name, Mailing Address and ZIP Code Harold E. (Hal) Chilton 1032 Vista Grande Paso Robles, CA 93446 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Sierra Vista Regional Med.Ctr. Occupation Chief Executive Officer Aggregate Year-to-Date $ 840.00	Date (month, day, year) 10/10/1998	Amount of Each Receipt this Period $40.00
B. Full Name, Mailing Address and ZIP Code Dennis Dent 2545 Elk Grove Road Solvang, CA 93463 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Tenet Healthcare Corporation Occupation Director, Cash Management Aggregate Year-to-Date $ 210.00	Date (month, day, year) 10/10/1998	Amount of Each Receipt this Period $10.00
C. Full Name, Mailing Address and ZIP Code Stephen Diaz 26020 Kenton Lane Saugus, CA 91350 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Tenet Healthcare Corporation Occupation Director Aggregate Year-to-Date $ 315.00	Date (month, day, year) 10/10/1998	Amount of Each Receipt this Period $15.00
D. Full Name, Mailing Address and ZIP Code Steve Domínguez 17800 Prairie Northridge, CA 91325 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Tenet Healthcare Corporation Occupation Senior Vice President Aggregate Year-to-Date $ 1025.00	Date (month, day, year) 10/10/1998	Amount of Each Receipt this Period $25.00
E. Full Name, Mailing Address and ZIP Code Jack Duscobery 3396 Shagbark Circle Mount Pleasant, SC 29464 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer East Cooper Community Hosp. Occupation Chief Executive Officer Aggregate Year-to-Date $ 307.68	Date (month, day, year) 10/10/1998	Amount of Each Receipt this Period $13.22
F. Full Name, Mailing Address and ZIP Code Michele Kernhart 6 Saint Robert Dana Point, CA 92629 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Tenet Healthcare Corporation Occupation Director Aggregate Year-to-Date $ 315.00	Date (month, day, year) 10/10/1998	Amount of Each Receipt this Period $15.00
F. Full Name, Mailing Address and ZIP Code Trevor Fetter 1530 Mimosa Lane Santa Barbara, CA 93108 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Tenet Healthcare Corporation Occupation Chief Financial Officer Aggregate Year-to-Date $ 940.00	Date (month, day, year) 10/10/1998	Amount of Each Receipt this Period $40.00

SUBTOTAL of Receipts This Page (optional) 164.23

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

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

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Brian Flynn 6763 Heritage Drive Poplar Bluff, MO 63901 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Lucy Lee Healthcare System Occupation: Chief Executive Officer Aggregate Year-to-Date $ 360.00	10/10/1998	$20.00
B. Michael Foulk, Sr. P.O. Box 703 Santa Ynez, CA 93460 0703 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Tenet Healthcare Corporation Occupation: President Aggregate Year-to-Date $ 808.50	10/10/1998	$58.50
C. Richard S. Freeman 1423 Wesleys Run Gladwyne, PA 19035 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Med College of Penn Hosp. Occupation: Chief Executive Officer Aggregate Year-to-Date $ 593.75	10/10/1998	$31.25
D. F. Mark Cable 27 Perdido Circle Little Rock, AR 72211 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Tenet Healthcare Corporation Occupation: Manager Aggregate Year-to-Date $ 320.00	10/10/1998	$20.00
E. Truman Gates 21130 Ambric Knolls Road Saratoga, CA 95070 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Desert Regional Medical Center Occupation: Chief Executive Officer Aggregate Year-to-Date $ 420.00	10/10/1998	$20.00
F. Stacey Gerig 2505 Russel Creek Drive Plano, TX 75025 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Trinity Medical Center Occupation: Chief Financial Officer Aggregate Year-to-Date $ 210.00	10/10/1998	$10.00
F. James Gincher, M.D. 4744 Jacob Lane Wentzville, MO 63385 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Compton Heights Hospital Occupation: Physician Aggregate Year-to-Date $ 750.00	10/10/1998	$50.00

SUBTOTAL of Receipts This Page (optional) 189.75

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

SCHEDULE A **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (in Full)

TENET HEALTHCARE CORPORATION PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charles Green 14636 Lakecrest Drive Addison, TX 75244	Tenet Healthcare Corporation	10/10/1998	$25.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Chief Financial Officer Aggregate Year-to-Date $ 525.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Walter Huestis 1030 Brookview Avenue Westlake Village, CA 91361	Aviation	10/10/1998	$10.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Director Aggregate Year-to-Date $ 210.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Hank Irick, Jr. 1549 Stearns Drive Los Angeles, CA 90035	Tenet Healthcare Corporation	10/10/1998	$10.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Assistant Vice President Aggregate Year-to-Date $ 210.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Benjamin Jacobowitz 1472 So. Cardiff Avenue Los Angeles, CA 90035	Tenet Healthcare Corporation	10/10/1998	$10.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Regional Director, Managed Car Aggregate Year-to-Date $ 210.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Janet Johnson 9096 Valhalla Drive Jonesboro, AR 72401	Regional Hospital of NEA	10/10/1998	$10.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Chief Operating Officer Aggregate Year-to-Date $ 210.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Steven Klein 11085 Paredela Street Coral Gables, FL 33156	North Shore Medical Center	10/10/1998	$20.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Chief Executive Officer Aggregate Year-to-Date $ 360.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Susan Landrum 3208 Princeton Dallas, TX 75209	Tenet Healthcare Corporation	10/10/1998	$10.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Director, Human Resources Aggregate Year-to-Date $ 210.00		

SUBTOTAL of Receipts This Page (optional) 95.00

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

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full)

TENET HEALTHCARE CORPORATION PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
A. Jerry Hebry 105 Hi Lo Terrace Hot Springs, AR 71901 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: National Park Medical Center Occupation: Chief Executive Officer Aggregate Year-to-Date $ 420.00	10/10/1998	$20.00
B. Candace Markwith PO Box 1001 Templeton, CA 93465 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Twin Cities Comm. Hospital Occupation: Chief Operating Officer Aggregate Year-to-Date $ 210.00	10/10/1998	$10.00
C. Brad Martin 327 SW 4th Avenue Boynton Beach, FL 33435 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Delray Community Hospital Occupation: Director, Information Systems Aggregate Year-to-Date $ 210.00	10/10/1998	$10.00
D. David "Clint" Matthews 331 Eagleton Golf Drive Palm Beach Gardens, FL 33418 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Palm Beach Gardens Med. Ctr. Occupation: Chief Executive Officer Aggregate Year-to-Date $ 330.00	10/10/1998	$30.00
E. David Mayes 16477 Santa Bianca Hacienda Heights, CA 91745 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Garden Grove Hospital Occupation: Vice President, Development Aggregate Year-to-Date $ 2100.00	10/10/1998	$100.00
F. David Mayeux 2455 Robin Drive Roanoke, TX 76262 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Tenet Healthcare Corporation Occupation: Executive Vice President Aggregate Year-to-Date $ 1680.00	10/10/1998	$80.00
F. Marlene McCormick 17910 Kelly Boulevard, #252 Dallas, TX 75287-6023 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Tenet Healthcare Corporation Occupation: Manager Aggregate Year-to-Date $ 210.00	10/10/1998	$10.00

SUBTOTAL of Receipts This Page (optional) 250.00

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

SCHEDULE A **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
A. Glennon McFadden 227 Hemingway Lane Weldon Springs, MO 63304 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Forest Park Hospital Chief Executive Officer Aggregate Year-to-Date $ 375.00	10/10/1998	$25.00
B. Othmar Nowak 962 W. 64th Street Hialeah, FL 33012 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	North Shore Medical Center Administrative Director Aggregate Year-to-Date $ 340.00	10/10/1998	$20.00
C. Lyon Orfgen 312 Applewood Drive Slidell, LA 70461 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	North Shore Regional Med. Ctr. Chief Executive Officer Aggregate Year-to-Date $ 315.00	10/10/1998	$15.00
D. Susan Parker 17817 Coit Road #6107 Dallas, TX 75252 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Tenet Healthcare Corporation Manager Aggregate Year-to-Date $ 220.00	10/10/1998	$20.00
E. Larry W. Peyton 1176 Birch Clovis, CA 93611 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Community Hospital Los Gatos Chief Operating Officer Aggregate Year-to-Date $ 210.00	10/10/1998	$10.00
F. Patrick Petre 22 Elderberry Rancho Sta Margari, CA 92688 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	San Dimas Community Hospital Chief Operating Officer Aggregate Year-to-Date $ 210.00	10/10/1998	$10.00
F. Michael Benbis 78-255 Monte Sereno Circle Indian Wells, CA 92210 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Centinela Hospital Med. Ctr. Chief Executive Officer Aggregate Year-to-Date $ 420.00	10/10/1998	$20.00

SUBTOTAL of Receipts This Page (optional) 120.00

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

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 8 OF 10

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full)

TENET HEALTHCARE CORPORATION PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Regina Renteria 9330 NW 209th Terrace Miami, FL 33015 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: North Shore Medical Center Occupation: Manager Aggregate Year-to-Date $ 425.00	10/10/1998	$25.00
Jackie Rissotto 8298 Matrix Drive Los Angeles, CA 90046 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Tenet Healthcare Corporation Occupation: Vice President, Emp. Benefits Aggregate Year-to-Date $ 210.00	10/10/1998	$10.00
Glenn Robinson 1632 Cherrybrook Drive Nacogdoches, TX 75961 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Nacogdoches Medical Center Occupation: Chief Executive Officer Aggregate Year-to-Date $ 340.00	10/10/1998	$20.00
Richard Robinson 617 Topaz Lane Ripon, CA 95366 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Doctors Hospital of Manteca Occupation: Chief Executive Officer Aggregate Year-to-Date $ 420.00	10/10/1998	$20.00
Leonard Rosenfeld 1502 Pecos Drive Southlake, TX 76097 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Tenet Healthcare Corporation Occupation: Vice President, Specialty Ops. Aggregate Year-to-Date $ 840.00	10/10/1998	$40.00
Paul Russell 4244 Avenida Dela Encinal Malibu, CA 90265 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Tenet Healthcare Corporation Occupation: Senior Vice President Aggregate Year-to-Date $ 525.00	10/10/1998	$25.00
Robert Schwebel 12660 Hillcrest Road Dallas, TX 75230 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Tenet Healthcare Corporation Occupation: Director, Risk Management Aggregate Year-to-Date $ 210.00	10/10/1998	$10.00

SUBTOTAL of Receipts This Page (optional) 150.00

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

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
A. Cheryl E. Servais 16308 Tallkirk Drive Dallas, TX 75248 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Tenet Healthcare Corporation Occupation: Manager Aggregate Year-to-Date $ 210.00	10/10/1998	$15.00
B. Charles R. Slaton 317 Nordic Lane Russellville, AR 72802 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Tenet Healthcare Corporation Occupation: Regional Vice President Aggregate Year-to-Date $ 605.64	10/10/1998	$28.84
C. Donna Small 21024 Country Creek Drive Boca Raton, FL 33428 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: West Boca Medical Center Occupation: Director, Medical/Surgical Aggregate Year-to-Date $ 400.00	10/10/1998	$25.00
D. Ryan Smith 952 South 11th Street, #221 San Jose, CA 95112 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Community Hospital Los Gatos Occupation: Controller Aggregate Year-to-Date $ 225.00	10/10/1998	$15.00
E. Diana Takvam 2121 Beloit Avenue #212 Los Angeles, CA 90025 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Tenet Healthcare Corporation Occupation: Senior Director Aggregate Year-to-Date $ 210.00	10/10/1998	$10.00
F. Donald Thayer 901 Bristol Court Southlake, TX 76092 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Tenet Healthcare Corporation Occupation: Vice President, A & D Aggregate Year-to-Date $ 597.02	10/10/1998	$4.62
F. Gustavo Valdespino 5 Sunburst Irvine, CA 92612 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Tenet Healthcare Corporation Occupation: Vice President Aggregate Year-to-Date $ 780.00	10/10/1998	$40.00

SUBTOTAL of Receipts This Page (optional) 133.46

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

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(1)

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION PAC

A. Full Name, Mailing Address and ZIP Code Philip Walkley 2505 Cottonwood Jonesboro, AR 72401	Name of Employer Regional Hospital of NSA Occupation Chief Executive Officer	Date (month, day, year) 10/10/1998	Amount of Each Receipt this Period $25.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 505.00		
B. Full Name, Mailing Address and ZIP Code Steve Nasserman 6432 Fallon Court Plano, TX 75093	Name of Employer Tenet Healthcare Corporation Occupation Director, MSO Systems	Date (month, day, year) 10/10/1998	Amount of Each Receipt this Period $15.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 315.00		
C. Full Name, Mailing Address and ZIP Code Jaime Wasolowski 4024 Lennox Drive New Orleans, LA 70131	Name of Employer Meadowcrest Hospital Occupation Chief Executive Officer	Date (month, day, year) 10/10/1998	Amount of Each Receipt this Period $15.23
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 403.83		
D. Full Name, Mailing Address and ZIP Code William Wilson 324 S. Smedley Street Philadelphia, PA 19103-5718	Name of Employer Tenet Healthcare Corporation Occupation Vice President, Finance	Date (month, day, year) 10/10/1998	Amount of Each Receipt this Period $36.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 546.00		
E. Full Name, Mailing Address and ZIP Code Thomas Wolf 2501 Ohio Drive Plano, TX 75093	Name of Employer Tenet Healthcare Corporation Occupation Manager	Date (month, day, year) 10/10/1998	Amount of Each Receipt this Period $16.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 336.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $		
F. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $		

SUBTOTAL of Receipts This Page (optional) 101.23

TOTAL This Period (last page this line number only) 1434.90

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

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

☐	Hand Delivered	Date of Receipt
☐	First Class Mail	POSTMARKED
☑	Registered/Certified Mail	POSTMARKED (R/C) 10-27-01
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House office of Records and Registration	Date of Receipt
☐	Received from the Senate Office of Public Records	Date of Receipt
☐	Other (Specify):	Postmarked _____ and/or Date of Receipt
☐	Electronic Filing	

JMD — PREPARER

1-8-02 — DATE PREPARED

(6/2000)