

FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

Office use only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines

12FE4M5

TENET HEALTHCARE CORPORATION PAC

ADDRESS (number and street)

13737 Noel Road, Suite 100

(Check if address is changed)

Dallas

TX

75240

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

candace.sams@tenethealth.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

202-292-5926

2. DATE

05 / 28 / 2008

3. FEC IDENTIFICATION NUMBER

C C00119354

4. IS THIS STATEMENT

NEW (N)

OR

AMENDED (A)

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

Type or Print Name of Treasurer

Todd Plott

Signature of Treasurer

Electronically Filed by Todd Plott

Date

05 / 28 / 2008

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. S437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

Office Use Only

For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100

FEC FORM 1 (Revised 02/2003)

5. TYPE OF COMMITTEE (Check One)

- (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate _____

Candidate Party Affiliation Office Sought: House Senate President State District

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

- (d) This committee is a (National, State (or subordinate) committee of the (Democratic, Republican, etc.) Party.

- (e) This committee is a separate segregated fund

- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. Name of Any Connected Organization or Affiliated Committee

Tenet Healthcare Corporation

Mailing Address 13737 Noel Road, Suite 100

Dallas TX 75240 - _____

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship connected organization - sponsor

Type of Connected Organization:

- Corporation Corporation w/o Capital Stock Labor Organization
- Membership Organization Trade Association Cooperative

Write or Type Committee Name

TENET HEALTHCARE CORPORATION PAC

- 7. **Custodian of Records:** Identify by name, address, (phone number -- optional), and position of the person in possession of Committee books and records.

Full Name **Ms. Candace Sams**

Mailing Address **13737 Noel Road, Suite 100**

Dallas TX 75240

Title or Position **▼ CITY ▲ STATE ▲ ZIP CODE ▲**

Admin. Assistant Telephone number 202 292 5924

- 8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer **Todd Plott**

Mailing Address **13737 Noel Road, Suite 100**

Dallas TX 75240

Title or Position **▼ CITY ▲ STATE ▲ ZIP CODE ▲**

Mngr, SEC Reporting Telephone number 469 893 2630

Full Name of Designated Agent

Mailing Address

Title or Position **▼ CITY ▲ STATE ▲ ZIP CODE ▲**

Telephone number

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Bank of America

Mailing Address

P.O. Box 27128

Concord

CA

94520

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Image# 28991199254

Form/Schedule: **F1A**

Updated email addresses for treasurer, bookkeeper, and assistant treasurer of Tenet Healthcare Corporation.

Transaction ID:
