

**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 92 |
| | <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)
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

A. Alexander F Fortune MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 906 W Cornwallis Drive
 City Greensboro State NC Zip Code 27408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Southeast Anesthesiology Consultants, Occupation Anesthesiologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **350.00**

Date of Receipt **07 / 31 / 2015**
Transaction ID : A4B66C55784A94492A06
 Amount of Each Receipt this Period **50.00**
 Payroll Deduction Payroll Deduction: \$50.00/Bi-Monthly

B. Timothy E Gundlach MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 9008 Unbridle Lane
 City Waxhaw State NC Zip Code 28173
 FEC ID number of contributing federal political committee. **C**
 Name of Employer American Anesthesiology of the Southea Occupation Anesthesiologist Assoc
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **700.00**

Date of Receipt **07 / 31 / 2015**
Transaction ID : A98FBAC639FC546D2A46
 Amount of Each Receipt this Period **100.00**
 Payroll Deduction Payroll Deduction: \$100.00/Bi-Monthly

C. Eric Leung MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 2720 Boyer Ave E 1900
 City Seattle State WA Zip Code 98102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pediatrix Medical Group of Washington, Occupation Corp Med Director NICU
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1400.00**

Date of Receipt **07 / 31 / 2015**
Transaction ID : A8D318E4F8D9C46269C7
 Amount of Each Receipt this Period **200.00**
 Payroll Deduction Payroll Deduction: \$200.00/Bi-Monthly

| | |
|---|---------------|
| SUBTOTAL of Receipts This Page (optional)..... | 350.00 |
| TOTAL This Period (last page this line number only)..... | |