

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.   
**TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE**

ADDRESS (number and street)   
  
 Check if different than previously reported. (ACC)  TX

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period  /  /  through  /  /

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 Mr. Todd Plott

Signature of Treasurer Mr. Todd Plott [Electronically Filed] Date  /  /

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

**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="2016"/>		98102.48
(b) Cash on Hand at Beginning of Reporting Period.....	113537.66	
(c) Total Receipts (from Line 19) .....	13012.62	100675.67
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	126550.28	198778.15
7. Total Disbursements (from Line 31).....	8000.00	80227.87
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	118550.28	118550.28
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	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

FEC Form 3X (Rev. 06/2004)

Page 3

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).....	9226.94	59521.53
(ii) Unitemized .....	3785.68	41154.14
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	13012.62	100675.67
(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) .....	13012.62	100675.67
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total 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))..... ▶	13012.62	100675.67
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	13012.62	100675.67

**DETAILED SUMMARY PAGE**  
of Disbursements

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	1200.87
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	1200.87
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	8000.00	75600.00
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 .....	0.00	-323.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	-323.00
29. Other Disbursements .....	0.00	3750.00
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)) ..	8000.00	80227.87
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8000.00	80227.87

**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) .....	13012.62	100675.67
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	-323.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	13012.62	100998.67
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	1200.87
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	1200.87

**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 44
	<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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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. THOMAS I RUNKLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 868B PENNOCK ST  
 City PHILADELPHIA State PA Zip Code 19130-1234  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HAHNEMANN HOSPITAL Occupation ASSOCIATE ADMINISTRATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 304.00

Date of Receipt 07 / 30 / 2016  
**Transaction ID : A3588B64E88744152863**  
 Amount of Each Receipt this Period 57.00  
 Memo Item  
 Payroll Deduction: \$19.00/Bi-Weekly

**B. RYAN LEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14 RIVERS BRIDGE COURT  
 City BLUFFTON State SC Zip Code 29910-7600  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer COASTAL CAROLINA MEDICAL CENTER Occupation Asst VP, Patient Services  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt 07 / 02 / 2016  
**Transaction ID : AD61B0FE86D514B1E9C2**  
 Amount of Each Receipt this Period -10.00  
 Memo Item  
 Payroll Deduction: \$-10.00/Bi-Weekly

**C. MARIO ESTRELLA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4920 NE STALLINGS DRIVE  
 City NACOGDOCHES State TX Zip Code 75965-3722  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NACOGDOCHES MEDICAL CENTER Occupation CNO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 07 / 23 / 2016  
**Transaction ID : A46341471F83C4DE98DF**  
 Amount of Each Receipt this Period 38.00  
 Memo Item  
 Payroll Deduction: \$19.00/Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	85.00
<b>TOTAL</b> 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 44
	<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. MARK ROBERTS**  
Full Name (Last, First, Middle Initial)

Mailing Address 13047 W ESTERO LN

City LITCHFIELD PAR State AZ Zip Code 85340-5576

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

Name of Employer Tenet Healthcare Occupation SR SPEC, INPAT/CASE MGMT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **585.00**

Date of Receipt **07 / 23 / 2016**

**Transaction ID : A25E36DCEEA0E47E082E**

Amount of Each Receipt this Period **78.00**

Memo Item  
Payroll Deduction: \$39.00/Bi-Weekly

**B. JASON P ALEXANDER**  
Full Name (Last, First, Middle Initial)

Mailing Address 22 ISLE OF HOPE RD

City MOUNT PLEASANT State SC Zip Code 29464-5500

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

Name of Employer East Cooper Community Hospital Occupation CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **285.00**

Date of Receipt **07 / 23 / 2016**

**Transaction ID : AC4B5FFD29DC84877A33**

Amount of Each Receipt this Period **38.00**

Memo Item  
Payroll Deduction: \$19.00/Bi-Weekly

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

Mailing Address 712 1/2 NARCISSUS AVE

City CORONA DEL MAR State CA Zip Code 92625-4210

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

Name of Employer Tenet Healthcare Occupation CEO, Region

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **570.00**

Date of Receipt **07 / 23 / 2016**

**Transaction ID : AF6C8070E001E45ECB7E**

Amount of Each Receipt this Period **76.00**

Memo Item  
Payroll Deduction: \$38.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... **192.00**

**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 44
	<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. DAVID L ARCHER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2594 HOCKSETT COVE  
 City GERMANTOWN State TN Zip Code 38139-6655  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer St. Francis Hospital Occupation MARKET CEO  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1440.00**

Date of Receipt **07 / 23 / 2016**  
**Transaction ID : A04189FE91B00484EB20**  
 Amount of Each Receipt this Period **192.00**  
 Memo Item  
 Payroll Deduction: \$96.00/Bi-Weekly

**B. MARK BENZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1754 FORGE MOUNTAIN DR  
 City VALLEY FORGE State PA Zip Code 19460-4630  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CARONDELET ST JOSEPHS Occupation CEO  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **285.00**

Date of Receipt **07 / 23 / 2016**  
**Transaction ID : A3CD298A8E9C849AAAF4**  
 Amount of Each Receipt this Period **38.00**  
 Memo Item  
 Payroll Deduction: \$19.00/Bi-Weekly

**C. JEREMY D FALKE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1701 NATURAL BRIDGE DR  
 City FRISCO State TX Zip Code 75034-1229  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Tenet Healthcare Occupation VP, Talent, Cult&Perf Sys  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **285.00**

Date of Receipt **07 / 23 / 2016**  
**Transaction ID : A78513BFC415C417EBED**  
 Amount of Each Receipt this Period **38.00**  
 Memo Item  
 Payroll Deduction: \$19.00/Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>268.00</b>
<b>TOTAL</b> 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 44
	<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. REGINALD EADIE**

Mailing Address 246 KEELSON DRIVE

City	State	Zip Code
DETROIT	MI	48215-1283

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

Name of Employer	Occupation
DMC-Harper University Hospital	CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
288.60

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	23	/	2016

**Transaction ID : A6E39C5C5814D4FC6B0E**

Amount of Each Receipt this Period  
38.48

Memo Item  
Payroll Deduction: \$19.24/Bi-Weekly

Full Name (Last, First, Middle Initial)  
**B. CONRAD MALLETT**

Mailing Address 19386 CUMBERLAND WAY

City	State	Zip Code
DETROIT	MI	48203-1456

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

Name of Employer	Occupation
DMC-Harper University Hospital	CAO - Detroit Market

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
577.05

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	23	/	2016

**Transaction ID : A253700B7F7A14563B2B**

Amount of Each Receipt this Period  
76.94

Memo Item  
Payroll Deduction: \$38.47/Bi-Weekly

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

Mailing Address 808 PYRENEES DRIVE

City	State	Zip Code
SOUTHLAKE	TX	76092-2052

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

Name of Employer	Occupation
Tenet Healthcare	SVP, Ops Integration

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1440.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	23	/	2016

**Transaction ID : AC2F9913DFADD4B929E2**

Amount of Each Receipt this Period  
192.00

Memo Item  
Payroll Deduction: \$96.00/Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	307.42
<b>TOTAL</b> 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 44
	<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. TIMOTHY PUTHOFF**  
Full Name (Last, First, Middle Initial)

Mailing Address 3910 BODEN LANE  
Suite 1400

City SPRING State TX Zip Code 77386-2703

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

Name of Employer HOUSTON NORTHWEST MEDICAL Occupation CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
585.00

Date of Receipt  
07 / 23 / 2016  
Transaction ID : **A64570CAD000C4C01AEC**

Amount of Each Receipt this Period  
78.00

Memo Item  
Payroll Deduction: \$39.00/Bi-Weekly

**B. LUANNE EWALD**  
Full Name (Last, First, Middle Initial)

Mailing Address 232 MIDLAND BLVD

City ROYAL OAK State MI Zip Code 48073-2670

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

Name of Employer DMC-Children's Hospital of Michigan Occupation DBD-ASSOC ADMINISTRATOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
518.64

Date of Receipt  
07 / 23 / 2016  
Transaction ID : **AD0A23C9916F74ED0A4E**

Amount of Each Receipt this Period  
38.00

Memo Item  
Payroll Deduction: \$19.00/Bi-Weekly

**C. KEITH PITTS**  
Full Name (Last, First, Middle Initial)

Mailing Address 4441 S. VERSAILLES AVE

City Dallas State TX Zip Code 75205-3012

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

Name of Employer Tenet Healthcare Occupation VICE CHAIRMAN

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2880.00

Date of Receipt  
07 / 23 / 2016  
Transaction ID : **A5EEA1226B84E45458C4**

Amount of Each Receipt this Period  
384.00

Memo Item  
Payroll Deduction: \$192.00/Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	500.00
<b>TOTAL</b> 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 11 OF 44
	<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. RUBEN O RODRIGUEZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6905 VILLA HERMOSA  
 City EL PASO State TX Zip Code 79912-2341  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PROVIDENCE EAST CAMPUS Occupation Director, Plant Operations  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **585.00**

Date of Receipt **07 / 23 / 2016**  
**Transaction ID : A315EDC313D70471BB2C**  
 Amount of Each Receipt this Period **78.00**  
 Memo Item  
 Payroll Deduction: \$39.00/Bi-Weekly

**B. ANDREAS M GRAF**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3975 STOCKTON LANE  
 City DALLAS State TX Zip Code 75287-4921  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Tenet Healthcare Occupation Manager, Travel  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **285.00**

Date of Receipt **07 / 23 / 2016**  
**Transaction ID : AE88089ECF8D0455DB2F**  
 Amount of Each Receipt this Period **38.00**  
 Memo Item  
 Payroll Deduction: \$19.00/Bi-Weekly

**C. ANTHONY TEDESCHI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 115 CHRISTINA CIRCLE  
 City WHEATON State IL Zip Code 60189-3115  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Weiss Memorial Hospital Occupation CEO, Market/Sys  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **285.00**

Date of Receipt **07 / 23 / 2016**  
**Transaction ID : A7F66A2D2516146549BE**  
 Amount of Each Receipt this Period **38.00**  
 Memo Item  
 Payroll Deduction: \$19.00/Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>154.00</b>
<b>TOTAL</b> 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 44
	<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. RICHARD E GLANCEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 4418 SAINT ANDREWS BLVD

City	State	Zip Code
IRVING	TX	75038-1709

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

Name of Employer	Occupation
Tenet Healthcare	Director, Government Relations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
585.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 23 / 2016

**Transaction ID : A91DB6EB0C057469DB2B**

Amount of Each Receipt this Period  
78.00

Memo Item  
Payroll Deduction: \$39.00/Bi-Weekly

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

Mailing Address 15408 FOX MEADOW LANE

City	State	Zip Code
FRISCO	TX	75035-3671

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

Name of Employer	Occupation
Tenet Patient Financial Services	VP, CLIENT DELIVERY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
505.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 23 / 2016

**Transaction ID : AB4DCD1CEEE8A486B9F9**

Amount of Each Receipt this Period  
78.00

Memo Item  
Payroll Deduction: \$39.00/Bi-Weekly

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

Mailing Address 1129 WISHING WELL CT

City	State	Zip Code
CEDAR HILL	TX	75104-8255

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

Name of Employer	Occupation
Tenet Healthcare	Director, Business Continuity

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
285.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 23 / 2016

**Transaction ID : A0A0F4A85359342899AE**

Amount of Each Receipt this Period  
38.00

Memo Item  
Payroll Deduction: \$19.00/Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	194.00
<b>TOTAL</b> 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 44
	<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. THALIA MARTIN**

Mailing Address 3802 SACO WAY  
Suite 1400

City EL PASO State TX Zip Code 79928-2703

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

Name of Employer PROVIDENCE EAST CAMPUS Occupation Network Director, CQI Market

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
285.00

Date of Receipt  
07 / 23 / 2016  
**Transaction ID : AECDDF469D686460BBCC**

Amount of Each Receipt this Period  
38.00

Memo Item  
Payroll Deduction: \$19.00/Bi-Weekly

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

Mailing Address 179 NIBLICK ROAD #129

City PASO ROBLES State CA Zip Code 93446-2120

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

Name of Employer TWIN CITIES COMMUNITY HOSPITAL Occupation CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
585.00

Date of Receipt  
07 / 23 / 2016  
**Transaction ID : A9E6FD884B4A84793B0B**

Amount of Each Receipt this Period  
78.00

Memo Item  
Payroll Deduction: \$39.00/Bi-Weekly

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

Mailing Address 11549 CROMWELL CIRCLE

City DALLAS State TX Zip Code 75229-7503

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

Name of Employer Tenet Patient Financial Services Occupation PRESIDENT, CONIFER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
870.00

Date of Receipt  
07 / 23 / 2016  
**Transaction ID : A5DBBADEC432F41FE97D**

Amount of Each Receipt this Period  
192.00

Memo Item  
Payroll Deduction: \$96.00/Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	308.00
<b>TOTAL</b> 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 44
	<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. 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 Occupation Director, Government Relations  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **585.00**

Date of Receipt **07 / 23 / 2016**  
**Transaction ID : A63C2EFCFECF64755B0C**  
 Amount of Each Receipt this Period **78.00**  
 Memo Item  
 Payroll Deduction: \$39.00/Bi-Weekly

**B. MICHAEL S HONGOLA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6704 WESTMONT DRIVE  
 City COLLEYVILLE State TX Zip Code 76034-7263  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Tenet Healthcare Occupation VP, Erp Systems  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **297.00**

Date of Receipt **07 / 23 / 2016**  
**Transaction ID : A1EBDA6ABF22F4FEF9E2**  
 Amount of Each Receipt this Period **38.00**  
 Memo Item  
 Payroll Deduction: \$19.00/Bi-Weekly

**C. SALLY A HURT-DEITCH**  
 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 Providence Memorial Campus Occupation CEO, Market/Sys  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **750.00**

Date of Receipt **07 / 23 / 2016**  
**Transaction ID : ABBE7B9991606440B8E9**  
 Amount of Each Receipt this Period **100.00**  
 Memo Item  
 Payroll Deduction: \$50.00/Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>216.00</b>
<b>TOTAL</b> 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 15 OF 44  
(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. JAMES BRASHEAR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3560 DALLAS PARKWAY  
 City FRISCO State TX Zip Code 75034  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Tenet Patient Financial Services Occupation SVP, General Counsel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1056.00

Date of Receipt 07 / 23 / 2016  
**Transaction ID : A8D5ACB2D61F34358852**  
 Amount of Each Receipt this Period 192.00  
 Memo Item  
 Payroll Deduction: \$96.00/Bi-Weekly

**B. BARBARA EUSEBIO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 82-814 PEMBROKE LANE  
 City INDIO State CA Zip Code 92201-9692  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer John F Kennedy Memorial Hospital Occupation CNO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 07 / 23 / 2016  
**Transaction ID : AE24B0303B5B8414F9AF**  
 Amount of Each Receipt this Period 38.00  
 Memo Item  
 Payroll Deduction: \$19.00/Bi-Weekly

**C. 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 Occupation Director, Relocation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 23 / 2016  
**Transaction ID : A7D543364B8A44E0CBC4**  
 Amount of Each Receipt this Period 40.00  
 Memo Item  
 Payroll Deduction: \$20.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 270.00  
**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 16 OF 44
	<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. ELIZABETH JOHNSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 3302 MARSH LANE

City GRAPEVINE State TX Zip Code 76051-6828

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

Name of Employer Tenet Healthcare Occupation VP, APPLIED CLINICAL INF

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 570.00

Date of Receipt 07 / 23 / 2016  
Transaction ID : **A30F78412B09149B79EB**

Amount of Each Receipt this Period 76.00

Memo Item  
Payroll Deduction: \$38.00/Bi-Weekly

**B. WESLEY CHICK**  
Full Name (Last, First, Middle Initial)

Mailing Address 6401 FITZGERALD DR. #1400

City PLANO State TX Zip Code 75074-2703

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

Name of Employer Tenet Healthcare Occupation Sr Director, Managed Care

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 585.00

Date of Receipt 07 / 23 / 2016  
Transaction ID : **A0848656B993E4FF5B5B**

Amount of Each Receipt this Period 78.00

Memo Item  
Payroll Deduction: \$39.00/Bi-Weekly

**C. DAVID KATZIN**  
Full Name (Last, First, Middle Initial)

Mailing Address 3080 CANTERBERRY DRIVE

City BOCA RATON State FL Zip Code 33434

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

Name of Employer Tenet Florida Service Center Occupation Reg/Market CMO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt 07 / 23 / 2016  
Transaction ID : **AF2CBAFF644D2488FA2C**

Amount of Each Receipt this Period 38.00

Memo Item  
Payroll Deduction: \$19.00/Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	192.00
<b>TOTAL</b> 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 44
	<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. 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 Occupation VP, HR Services

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt **07 / 23 / 2016**

**Transaction ID : AB88BFF0F37F54AF0AB6**

Amount of Each Receipt this Period **50.00**

Memo Item  
Payroll Deduction: \$25.00/Bi-Weekly

Full Name (Last, First, Middle Initial)  
**B. JOSEPH STEINER**

Mailing Address 11226 POINTE COURT

City SAINT LOUIS State MO Zip Code 63127-1741

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

Name of Employer MacNeal Hospital Occupation CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **285.00**

Date of Receipt **07 / 23 / 2016**

**Transaction ID : A616FBC33A0E2472F879**

Amount of Each Receipt this Period **38.00**

Memo Item  
Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)  
**C. DANIEL M KARNUTA**

Mailing Address 981 PATRICIAN COURT

City FARVIEW State TX Zip Code 75069-8781

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

Name of Employer Tenet Patient Financial Services Occupation SVP, CFO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **540.00**

Date of Receipt **07 / 23 / 2016**

**Transaction ID : ACB47645254CF43738E5**

Amount of Each Receipt this Period **80.00**

Memo Item  
Payroll Deduction: \$40.00/Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>168.00</b>
<b>TOTAL</b> 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 18 OF 44
	<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. MARGARET PERREIRA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2972 HARROW ROAD  
 City SPRING HILL State FL Zip Code 34608-4429  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Tenet Healthcare Occupation SR SPEC, INPAT/CASE MGMT  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **285.00**

Date of Receipt **07 / 23 / 2016**  
**Transaction ID : ACF122793590B4406909**  
 Amount of Each Receipt this Period **38.00**  
 Memo Item  
 Payroll Deduction: \$19.00/Bi-Weekly

**B. AUDREY T ANDREWS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 702 PENFOLDS  
 City COPPELL State TX Zip Code 75019-4544  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Tenet Healthcare Occupation SVP, General Counsel  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **2880.00**

Date of Receipt **07 / 23 / 2016**  
**Transaction ID : A0372290679CB4DCEB4A**  
 Amount of Each Receipt this Period **384.00**  
 Memo Item  
 Payroll Deduction: \$192.00/Bi-Weekly

**C. ENRIQUE MARTINEZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1212 CALLE LAGO Suite 1400  
 City EL PASO State TX Zip Code 79912-2703  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Providence Memorial Campus Occupation CHIEF MEDICAL OFFICER  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **285.00**

Date of Receipt **07 / 23 / 2016**  
**Transaction ID : A8DE4606FB7C3438AA51**  
 Amount of Each Receipt this Period **38.00**  
 Memo Item  
 Payroll Deduction: \$19.00/Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>460.00</b>
<b>TOTAL</b> 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 20 OF 44
	<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. KENT G CLAYTON**  
Full Name (Last, First, Middle Initial)  
Mailing Address 125 BRANCH  
City IRVINE State CA Zip Code 92618-4266  
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 **570.00**

Date of Receipt **07 / 23 / 2016**  
**Transaction ID : A96B16A4813594A05882**  
Amount of Each Receipt this Period **76.00**  
 Memo Item  
Payroll Deduction: \$38.00/Bi-Weekly

**B. STAN HOLM**  
Full Name (Last, First, Middle Initial)  
Mailing Address 20996 W. CORA VISTA Suite 1400  
City BUCKEYE State AZ Zip Code 85396-2703  
FEC ID number of contributing federal political committee. **C**  
Name of Employer ABRAZO WEST CAMPUS Occupation CEO  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **285.00**

Date of Receipt **07 / 23 / 2016**  
**Transaction ID : A87F84246AB8945A2ABB**  
Amount of Each Receipt this Period **38.00**  
 Memo Item  
Payroll Deduction: \$19.00/Bi-Weekly

**C. JASON E EVANS**  
Full Name (Last, First, Middle Initial)  
Mailing Address 3409 VILLANOVA STREET  
City DALLAS State TX Zip Code 75225-6018  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Tenet Healthcare Occupation CEO, Region  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **585.00**

Date of Receipt **07 / 23 / 2016**  
**Transaction ID : A0C493F3DE6CA4250BE9**  
Amount of Each Receipt this Period **78.00**  
 Memo Item  
Payroll Deduction: \$39.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... **192.00**  
**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 21 OF 44
	<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. DAVID W BORDOFSKE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5001 ASHLAND BELLE LANE  
 City FRISCO State TX Zip Code 75035-7682  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Tenet Healthcare Occupation VP, Patient Mgmt System  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **600.00**

Date of Receipt **07 / 23 / 2016**  
**Transaction ID : AFB3A816A74EB41B2987**  
 Amount of Each Receipt this Period **80.00**  
 Memo Item  
 Payroll Deduction: \$40.00/Bi-Weekly

**B. KENNETH E JORDAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 17331 ALMELO LANE  
 City HUNTINGTON BEA State CA Zip Code 92649-9046  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FOUNTAIN VALLEY REGIONAL HOSPITAL Occupation CFO  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **285.00**

Date of Receipt **07 / 23 / 2016**  
**Transaction ID : A5E5BBDC90D0F4807A22**  
 Amount of Each Receipt this Period **38.00**  
 Memo Item  
 Payroll Deduction: \$19.00/Bi-Weekly

**C. TREVOR FETTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3806 BEVERLY DRIVE  
 City DALLAS State TX Zip Code 75205-2807  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Tenet Healthcare Occupation CEO & President  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **4995.00**

Date of Receipt **07 / 23 / 2016**  
**Transaction ID : AD6121BF46FE64787AEF**  
 Amount of Each Receipt this Period **666.00**  
 Memo Item  
 Payroll Deduction: \$333.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... **784.00**  
**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 44
	<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. JOHN A GRAH**  
Full Name (Last, First, Middle Initial)

Mailing Address 7933 CORNELL AVE

City ST LOUIS State MO Zip Code 63130-1842

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

Name of Employer LAKEWOOD REGIONAL MEDICAL CENTER Occupation CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 585.00

Date of Receipt 07 / 23 / 2016  
**Transaction ID : A24320662C73A40C395E**

Amount of Each Receipt this Period 78.00

Memo Item  
Payroll Deduction: \$39.00/Bi-Weekly

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

Mailing Address 3507 MUNSTEAD TRAIL

City FRISCO State TX Zip Code 75034-1166

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

Name of Employer Tenet Patient Financial Services Occupation SVP, President, Revenue Cycle Manageme

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt 07 / 23 / 2016  
**Transaction ID : AC00598F4AEDA48CA86F**

Amount of Each Receipt this Period 78.00

Memo Item  
Payroll Deduction: \$39.00/Bi-Weekly

**C. DAVID SASSANO**  
Full Name (Last, First, Middle Initial)

Mailing Address 10847 LOCHSPRING DRIVE

City DALLAS State TX Zip Code 75218-1201

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

Name of Employer Tenet Healthcare Occupation Director, Reg Phy Bus Dev

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt 07 / 23 / 2016  
**Transaction ID : A57CCF3A1DDB544EEB61**

Amount of Each Receipt this Period 38.00

Memo Item  
Payroll Deduction: \$19.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 194.00

**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 23 OF 44
	<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. TERESA L HUSKEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4333 PERSHING AVE  
 City FORT WORTH State TX Zip Code 76107-4243  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Tenet Patient Financial Services Occupation Sr Director, Government Relations  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt 07 / 23 / 2016  
**Transaction ID : A0C7208E4F73F410DB48**  
 Amount of Each Receipt this Period 192.00  
 Memo Item  
 Payroll Deduction: \$96.00/Bi-Weekly  
 Aggregate Year-to-Date 1344.00

**B. BENSON P CHACKO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6308 LA POSTA  
 City EL PASO State TX Zip Code 79912-3040  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PROVIDENCE SIERRA CAMPUS Occupation COO  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt 07 / 23 / 2016  
**Transaction ID : AF09486C2088D427489A**  
 Amount of Each Receipt this Period 38.00  
 Memo Item  
 Payroll Deduction: \$19.00/Bi-Weekly  
 Aggregate Year-to-Date 285.00

**C. STEVEN MACLAUHLAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 123 SUMMER STREET  
 City WORCESTER State MA Zip Code 01608  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer St. Vincent Hospital Occupation CEO  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt 07 / 23 / 2016  
**Transaction ID : A9C3693C3071D4EC48A1**  
 Amount of Each Receipt this Period 78.00  
 Memo Item  
 Payroll Deduction: \$39.00/Bi-Weekly  
 Aggregate Year-to-Date 273.00

**SUBTOTAL** of Receipts This Page (optional)..... 308.00  
**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 25 OF 44
	<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. MANUEL LINARES**  
Full Name (Last, First, Middle Initial)

Mailing Address 6801 SW 75TH AVE  
Apt 901

City MIAMI State FL Zip Code 33143-3693

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 ▼  
570.00

Date of Receipt  
07 / 23 / 2016  
**Transaction ID : A9C358ADCA60D46C5A8F**

Amount of Each Receipt this Period  
76.00

Memo Item  
Payroll Deduction: \$38.00/Bi-Weekly

**B. 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 Occupation SVP, Public Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1440.00

Date of Receipt  
07 / 23 / 2016  
**Transaction ID : AF339A0295EA348EC9B3**

Amount of Each Receipt this Period  
192.00

Memo Item  
Payroll Deduction: \$96.00/Bi-Weekly

**C. DOUGLAS BREWER**  
Full Name (Last, First, Middle Initial)

Mailing Address 641 NORTH AVE N.E. #1407

City ATLANTA State GA Zip Code 30308-9582

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

Name of Employer BROOKWOOD MEDICAL CENTER Occupation ASSOCIATE ADMINISTRATOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
585.00

Date of Receipt  
07 / 23 / 2016  
**Transaction ID : ADDC16A97E5414D82BF6**

Amount of Each Receipt this Period  
78.00

Memo Item  
Payroll Deduction: \$39.00/Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	346.00
<b>TOTAL</b> 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 44
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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. PATRICK MALONEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 581 S ARLINGTON AVENUE  
 City ELMHURST State IL Zip Code 60126-4040  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer West Suburban Medical Center Occupation CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 585.00

Date of Receipt 07 / 23 / 2016  
**Transaction ID : A0B05776734964735BF8**  
 Amount of Each Receipt this Period 78.00  
 Memo Item  
 Payroll Deduction: \$39.00/Bi-Weekly

**B. CRAIG C ARMIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 23510 BERDON STREET  
 City WOODLAND HILLS State CA Zip Code 91367-3004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Tenet Healthcare Occupation VP, GOVT PROGRAMS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 07 / 23 / 2016  
**Transaction ID : AF74539D79AF0411F858**  
 Amount of Each Receipt this Period 80.00  
 Memo Item  
 Payroll Deduction: \$40.00/Bi-Weekly

**C. MICHAEL HALTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 141 RODNEY CIRCLE  
 City BRYN MAWR State PA Zip Code 19010-1312  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HAHNEMANN HOSPITAL Occupation CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt 07 / 23 / 2016  
**Transaction ID : A323F6D78338F4A18ACF**  
 Amount of Each Receipt this Period 78.00  
 Memo Item  
 Payroll Deduction: \$39.00/Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	236.00
<b>TOTAL</b> 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 44
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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. EDLECIA SHERROD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1955 MARKET CTR BD #2418  
 City DALLAS State TX Zip Code 75207-3480  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Tenet Healthcare Occupation Manager, Public Affairs  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **285.00**

Date of Receipt 07 / 23 / 2016  
**Transaction ID : A97F5645575B148A2B9A**  
 Amount of Each Receipt this Period **38.00**  
 Memo Item  
 Payroll Deduction: \$19.00/Bi-Weekly

**B. ALAN R CASON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2053 MOSSBERG DR. Apt 1503  
 City PLANO State TX Zip Code 75023-5691  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Tenet Healthcare Occupation VP, UCC & Satellite Eds  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **285.00**

Date of Receipt 07 / 23 / 2016  
**Transaction ID : AF2828E521BD44CBCBB0**  
 Amount of Each Receipt this Period **38.00**  
 Memo Item  
 Payroll Deduction: \$19.00/Bi-Weekly

**C. KENNETH F SUTHERLAND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1809 ST. PHILIP AVENUE  
 City SOUTHLAKE State TX Zip Code 76092-8492  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Tenet Healthcare Occupation VP, Construction & Design  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **570.00**

Date of Receipt 07 / 23 / 2016  
**Transaction ID : A19F49E258B7A4D79A85**  
 Amount of Each Receipt this Period **76.00**  
 Memo Item  
 Payroll Deduction: \$38.00/Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>152.00</b>
<b>TOTAL</b> 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 44
	<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. 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 Occupation Sr Director, Policy & Training  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **585.00**

Date of Receipt 07 / 23 / 2016  
**Transaction ID : A360B02EF0FB946FA835**  
Amount of Each Receipt this Period **78.00**  
 Memo Item  
Payroll Deduction: \$39.00/Bi-Weekly

**B. RICKY JOHNSTON**  
Full Name (Last, First, Middle Initial)  
Mailing Address 401 N.CHURCH ST  
City MCKINNEY State TX Zip Code 75069-3854  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Tenet Healthcare Occupation VP, Ops And Technology  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **675.00**

Date of Receipt 07 / 23 / 2016  
**Transaction ID : A90CB9FDF568649B3BA5**  
Amount of Each Receipt this Period **90.00**  
 Memo Item  
Payroll Deduction: \$45.00/Bi-Weekly

**C. SCOTT MOREY**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4634 NORTH 36TH STREET Suite 1400  
City PHOENIX State AZ Zip Code 85018-2703  
FEC ID number of contributing federal political committee. **C**  
Name of Employer ABRAZO WEST CAMPUS Occupation CNO  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **285.00**

Date of Receipt 07 / 23 / 2016  
**Transaction ID : AE2D0080CCACF408C999**  
Amount of Each Receipt this Period **38.00**  
 Memo Item  
Payroll Deduction: \$19.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... **206.00**  
**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 44
	<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. MONICA C VARGAS**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4017 FLAMINGO

City EL PASO	State TX	Zip Code 79902-1313
FEC ID number of contributing federal political committee. C		
Name of Employer PROVIDENCE SIERRA CAMPUS	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.00	

Date of Receipt  
07 / 23 / 2016  
**Transaction ID : A62717FD3FC7A415BA0A**

Amount of Each Receipt this Period  
38.00

Memo Item  
Payroll Deduction: \$19.00/Bi-Weekly

**B. KAREN R FOWLER**  
Full Name (Last, First, Middle Initial)  
Mailing Address 8306 TURQUOISE

City EL PASO	State TX	Zip Code 79904-2513
FEC ID number of contributing federal political committee. C		
Name of Employer Providence Memorial Campus	Occupation CNO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.00	

Date of Receipt  
07 / 23 / 2016  
**Transaction ID : AB25097D536DF4F82AC9**

Amount of Each Receipt this Period  
38.00

Memo Item  
Payroll Deduction: \$19.00/Bi-Weekly

**C. JASON PINKALL**  
Full Name (Last, First, Middle Initial)  
Mailing Address 6526 ANITA ST

City DALLAS	State TX	Zip Code 75214-2706
FEC ID number of contributing federal political committee. C		
Name of Employer Tenet Healthcare	Occupation SENIOR COUNSEL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 585.00	

Date of Receipt  
07 / 23 / 2016  
**Transaction ID : A562A851ACA484CF8BF5**

Amount of Each Receipt this Period  
78.00

Memo Item  
Payroll Deduction: \$39.00/Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	154.00
<b>TOTAL</b> 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 44
	<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. RICHARD D CARTER**  
Full Name (Last, First, Middle Initial)

Mailing Address 5166 LAKE CREST CR

City BIRMINGHAM    State AL    Zip Code 35226-3543

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

Name of Employer BAPTIST HEALTH SYSTEM    Occupation CFO, Market/Sys

Receipt For:  Primary     General     Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt 07 / 23 / 2016  
**Transaction ID : A3A906957D28A428895E**

Amount of Each Receipt this Period 38.00

Memo Item  
Payroll Deduction: \$19.00/Bi-Weekly

**B. MARK H BRYAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 17318 PAVAROSO ST

City BOCA RATON    State FL    Zip Code 33496-2581

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

Name of Employer DELRAY COMMUNITY HOSPITAL    Occupation CEO

Receipt For:  Primary     General     Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt 07 / 23 / 2016  
**Transaction ID : A6716C40608154435A35**

Amount of Each Receipt this Period 38.00

Memo Item  
Payroll Deduction: \$19.00/Bi-Weekly

**C. 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 San Ramon Regional Medical Center    Occupation CEO

Receipt For:  Primary     General     Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt 07 / 23 / 2016  
**Transaction ID : AEAE6B95FFA8F41FAAF3**

Amount of Each Receipt this Period 38.00

Memo Item  
Payroll Deduction: \$19.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 114.00

**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 44
	<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. NORMA A ZERINGUE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5757 SOUTHWESTERN BLVD  
 City DALLAS State TX Zip Code 75209-3437  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Tenet Patient Financial Services Occupation SVP, STRATEGY  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 345.00

Date of Receipt 07 / 23 / 2016  
**Transaction ID : A62A01561A715431F90B**  
 Amount of Each Receipt this Period 78.00  
 Memo Item  
 Payroll Deduction: \$39.00/Bi-Weekly

**B. TERRY WHEELER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13802 MAGNOLIA MANOR  
 City CYPRESS State TX Zip Code 77429-8162  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Cypress Fairbanks Med Center Occupation CEO  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 525.00

Date of Receipt 07 / 23 / 2016  
**Transaction ID : A453D637E07F542618BB**  
 Amount of Each Receipt this Period 70.00  
 Memo Item  
 Payroll Deduction: \$35.00/Bi-Weekly

**C. FRANK MOLINARO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6783 W GREENBRIAR DRIVE Suite 1400  
 City GLENDALE State AZ Zip Code 85308-2703  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ABRAZO ARROWHEAD CAMPUS Occupation CEO  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 585.00

Date of Receipt 07 / 23 / 2016  
**Transaction ID : A3C4F9769B2A84B5FA5B**  
 Amount of Each Receipt this Period 78.00  
 Memo Item  
 Payroll Deduction: \$39.00/Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	226.00
<b>TOTAL</b> 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 44
	<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. JOSEPH MULLANY**  
Full Name (Last, First, Middle Initial)

Mailing Address 2169 TOTTENHAM ROAD

City BLOOMFIELD HIL State MI Zip Code 48301-2332

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

Name of Employer DMC-Harper University Hospital Occupation CEO, Market

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1440.00

Date of Receipt 07 / 23 / 2016  
Transaction ID : **A97F4C1C91F47489CB68**

Amount of Each Receipt this Period 192.00

Memo Item  
Payroll Deduction: \$96.00/Bi-Weekly

**B. VICTOR JORDAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 314 VAILWOOD COURT

City Bloomfield Hills State MI Zip Code 48302-1573

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

Name of Employer DMC-Harper University Hospital Occupation CFO, REGION

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 585.00

Date of Receipt 07 / 23 / 2016  
Transaction ID : **A0CE83E7F445E43B78DA**

Amount of Each Receipt this Period 78.00

Memo Item  
Payroll Deduction: \$39.00/Bi-Weekly

**C. GARY L HONTS, JR.**  
Full Name (Last, First, Middle Initial)

Mailing Address 78795 SAINT THOMAS DRIVE

City BERMUDA DUNES State CA Zip Code 92203-1723

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

Name of Employer John F Kennedy Memorial Hospital Occupation CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1440.00

Date of Receipt 07 / 23 / 2016  
Transaction ID : **A474426E560B641D7BCE**

Amount of Each Receipt this Period 192.00

Memo Item  
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 34 OF 44
	<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. MARITA COVARRUBIAS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7115 WILDGROVE AVE  
 City DALLAS State TX Zip Code 75214-3841  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Tenet Healthcare Occupation VP, ASST GENERAL COUNSEL  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **285.00**

Date of Receipt 07 / 23 / 2016  
**Transaction ID : ABBEF1D2A4A1C494A85A**  
 Amount of Each Receipt this Period **38.00**  
 Memo Item  
 Payroll Deduction: \$19.00/Bi-Weekly

**B. THOMAS WOLF**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2613 MILLINGTON DRIVE  
 City PLANO State TX Zip Code 75093-3560  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Tenet Healthcare Occupation Manager, Reimbursement  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **240.00**

Date of Receipt 07 / 23 / 2016  
**Transaction ID : ADFB552A4C7084BD5B2B**  
 Amount of Each Receipt this Period **32.00**  
 Memo Item  
 Payroll Deduction: \$16.00/Bi-Weekly

**C. DAVID KATZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 363 ST. CLAIR  
 City GROSSE POINTE State MI Zip Code 48230-1501  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Tenet Healthcare Occupation Director, Government Relations  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **288.45**

Date of Receipt 07 / 23 / 2016  
**Transaction ID : AFAFFA0E9E4D54F008D1**  
 Amount of Each Receipt this Period **38.46**  
 Memo Item  
 Payroll Deduction: \$19.23/Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>108.46</b>
<b>TOTAL</b> 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 44
	<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. DOUGLAS E RABE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7746 EAGLE TRAIL  
 City DALLAS State TX Zip Code 75238-4115  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Tenet Healthcare Occupation VP, Tax  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **585.00**

Date of Receipt **07 / 23 / 2016**  
**Transaction ID : A1652FB0298B346C7AD4**  
 Amount of Each Receipt this Period **78.00**  
 Memo Item  
 Payroll Deduction: \$39.00/Bi-Weekly

**B. KEITH STANHILL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2819 WEDGEWOOD DRIVE  
 City PASO ROBLES State CA Zip Code 93446-5436  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer TWIN CITIES COMMUNITY HOSPITAL Occupation CHIEF HR OFFICER  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **285.00**

Date of Receipt **07 / 23 / 2016**  
**Transaction ID : A3C8E22E96A99483E8B2**  
 Amount of Each Receipt this Period **38.00**  
 Memo Item  
 Payroll Deduction: \$19.00/Bi-Weekly

**C. MICHAEL J BIERMAN, JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 18 CENTER CT  
 City HEATH State TX Zip Code 75032-5999  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Tenet Healthcare Occupation VP, OPS FINANCE  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **285.00**

Date of Receipt **07 / 23 / 2016**  
**Transaction ID : A62A6FCE41C914595BCD**  
 Amount of Each Receipt this Period **38.00**  
 Memo Item  
 Payroll Deduction: \$19.00/Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>154.00</b>
<b>TOTAL</b> 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 44
	<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. BARRY LEFFLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4123 WYCLIFF AVE  
 City DALLAS State TX Zip Code 75219-3005  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Tenet Healthcare Occupation VP, MARKETING  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **285.00**

Date of Receipt **07 / 23 / 2016**  
**Transaction ID : AAD808EE441BC4E3D949**  
 Amount of Each Receipt this Period **38.00**  
 Memo Item  
 Payroll Deduction: \$19.00/Bi-Weekly

**B. TARA JONES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 24 SURREY LANE  
 City NATICK State MA Zip Code 01760-5200  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Tenet Healthcare Occupation VP, Client Services  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **285.00**

Date of Receipt **07 / 23 / 2016**  
**Transaction ID : AB938560208474960BF9**  
 Amount of Each Receipt this Period **38.00**  
 Memo Item  
 Payroll Deduction: \$19.00/Bi-Weekly

**C. JOHN TURNER Jr.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 708 LAND FALL DRIVE  
 City Rock Hill State SC Zip Code 29732-9437  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Tenet Healthcare Occupation Sr Director, Practice Ops  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **525.00**

Date of Receipt **07 / 23 / 2016**  
**Transaction ID : A6F88077FDE494B25BA2**  
 Amount of Each Receipt this Period **38.00**  
 Memo Item  
 Payroll Deduction: \$19.00/Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>114.00</b>
<b>TOTAL</b> 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 37 OF 44
	<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. 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 HEALTHCARE CORPORATION	Occupation ASST - ADMINISTRATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Date of Receipt  
07 / 23 / 2016  
**Transaction ID : AC2EE074D9BE3446AA3E**

Amount of Each Receipt this Period  
40.00

Memo Item  
Payroll Deduction: \$20.00/Bi-Weekly

**B. CEZAR L QUIAMBAO**  
Full Name (Last, First, Middle Initial)  
Mailing Address 845 BRISA DEL MAR

City EL PASO	State TX	Zip Code 79912-1513
FEC ID number of contributing federal political committee. C		
Name of Employer Providence Memorial Campus	Occupation Director, Respiratory Services	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.00	

Date of Receipt  
07 / 23 / 2016  
**Transaction ID : ACD9C3507D89047C1893**

Amount of Each Receipt this Period  
38.00

Memo Item  
Payroll Deduction: \$19.00/Bi-Weekly

**C. JEREMY CLARK**  
Full Name (Last, First, Middle Initial)  
Mailing Address 111 S. PORT ROYAL DRIVE  
Apt 19

City HILTON HEAD	State SC	Zip Code 29928-2839
FEC ID number of contributing federal political committee. C		
Name of Employer HILTON HEAD HOSPITAL	Occupation MARKET CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Date of Receipt  
07 / 23 / 2016  
**Transaction ID : A8E66A76D132948E78DE**

Amount of Each Receipt this Period  
80.00

Memo Item  
Payroll Deduction: \$40.00/Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	158.00
<b>TOTAL</b> 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 44
	<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. GARY K RUFF**  
Full Name (Last, First, Middle Initial)

Mailing Address 1724 BYRON NELSON PKWY

City SOUTHLAKE State TX Zip Code 76092-8868

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

Name of Employer Tenet Healthcare Occupation SVP, Physician Resources

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1440.00

Date of Receipt 07 / 23 / 2016  
Transaction ID : **AF782A2795C6F4AA29E8**

Amount of Each Receipt this Period 192.00

Memo Item  
Payroll Deduction: \$96.00/Bi-Weekly

**B. MICHAEL MALONEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 4514 WILDWOOD RD Suite 1400

City DALLAS State TX Zip Code 75209-2703

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

Name of Employer Tenet Healthcare Occupation SVP, Acquisitions & Development

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt 07 / 23 / 2016  
Transaction ID : **AB8DC70BB9AF74D1CBDE**

Amount of Each Receipt this Period 38.00

Memo Item  
Payroll Deduction: \$19.00/Bi-Weekly

**C. KATHLEEN TREGEAR**  
Full Name (Last, First, Middle Initial)

Mailing Address 3914 DEEP RIVER #1400

City SAN ANTONIO State TX Zip Code 78253-2703

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

Name of Employer Mission Trail Baptist Hospital Occupation CNO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 585.00

Date of Receipt 07 / 23 / 2016  
Transaction ID : **A3551FCD00C364117965**

Amount of Each Receipt this Period 78.00

Memo Item  
Payroll Deduction: \$39.00/Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	308.00
<b>TOTAL</b> 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 44
	<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. RUSTY MCNEW**  
Full Name (Last, First, Middle Initial)  
Mailing Address 3141 LOVERS LANE  
City DALLAS State TX Zip Code 75225-7720  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Tenet Healthcare Occupation REG CHIEF NURSING EXEC  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **285.45**

Date of Receipt 07 / 23 / 2016  
**Transaction ID : A543D7BBC81194E4DA30**  
Amount of Each Receipt this Period **38.06**  
 Memo Item  
Payroll Deduction: \$19.03/Bi-Weekly

**B. CAROL BAILEY**  
Full Name (Last, First, Middle Initial)  
Mailing Address 20 BURTON HILLS BLVD  
City NASHVILLE State TN Zip Code 37215  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Tenet Healthcare Occupation VP, Ops Reimbursement  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **768.00**

Date of Receipt 07 / 23 / 2016  
**Transaction ID : A70F3625F188C466F874**  
Amount of Each Receipt this Period **192.00**  
 Memo Item  
Payroll Deduction: \$96.00/Bi-Weekly

**C. LORI HOLMAN**  
Full Name (Last, First, Middle Initial)  
Mailing Address 7213 ELLIS ROAD  
City FORT WORTH State TX Zip Code 76112-4301  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Tenet Healthcare Occupation Manager, Human Resources  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **285.00**

Date of Receipt 07 / 23 / 2016  
**Transaction ID : A6A4273543F1E4F5692F**  
Amount of Each Receipt this Period **38.00**  
 Memo Item  
Payroll Deduction: \$19.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... **268.06**  
**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 44
	<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. MARY CLEARY**  
Full Name (Last, First, Middle Initial)

Mailing Address 940 BONNIE BRAE PLACE

City RIVER FOREST State IL Zip Code 60305-1512

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

Name of Employer MacNeal Hospital Occupation CFO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 585.00

Date of Receipt 07 / 23 / 2016  
**Transaction ID : ABC8097ADBB874E819A3**

Amount of Each Receipt this Period 78.00

Memo Item  
Payroll Deduction: \$39.00/Bi-Weekly

**B. MARK MONTONEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 5541 HAWKS LANDING DRIVE

City ARRINGTON State TN Zip Code 37014-7499

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

Name of Employer Tenet Healthcare Occupation CHIEF MEDICAL OFFICER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1440.00

Date of Receipt 07 / 23 / 2016  
**Transaction ID : A47D99323FE3C4DECAC2**

Amount of Each Receipt this Period 192.00

Memo Item  
Payroll Deduction: \$96.00/Bi-Weekly

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

Mailing Address 1224 BLAIRWOOD DR

City FLOWER MOUND State TX Zip Code 75028-3617

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

Name of Employer Tenet Healthcare Occupation VP, GOVERNMENT RELATIONS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 984.00

Date of Receipt 07 / 23 / 2016  
**Transaction ID : A2F60B6E6834343219BD**

Amount of Each Receipt this Period 192.00

Memo Item  
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 41 OF 44
	<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. EDWARD MESCO**  
Full Name (Last, First, Middle Initial)

Mailing Address 7365 NW 54TH STREET

City LAUDERHILL State FL Zip Code 33319-6346

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

Name of Employer Tenet Florida Service Center Occupation Director, Reg Reimbursement

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt **07 / 23 / 2016**

**Transaction ID : A730844F97D9E4645A18**

Amount of Each Receipt this Period **50.00**

Memo Item  
Payroll Deduction: \$25.00/Bi-Weekly

**B. 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 Occupation VP, Deputy General Counsel & Corp Sec

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **285.00**

Date of Receipt **07 / 23 / 2016**

**Transaction ID : A609481D4655547A08F0**

Amount of Each Receipt this Period **38.00**

Memo Item  
Payroll Deduction: \$19.00/Bi-Weekly

**C. KEN SCHWARTZ**  
Full Name (Last, First, Middle Initial)

Mailing Address 3560 DALLAS PARKWAY

City FRISCO State TX Zip Code 75034

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

Name of Employer Tenet Patient Financial Services Occupation SENIOR COUNSEL

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **209.00**

Date of Receipt **07 / 23 / 2016**

**Transaction ID : A55E261816C694846B8B**

Amount of Each Receipt this Period **38.00**

Memo Item  
Payroll Deduction: \$19.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... **126.00**

**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 44
	<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. CHAD W LAND**  
Full Name (Last, First, Middle Initial)  
Mailing Address 310 LAKEWOOD DRIVE  
City TROPHY CLUB State TX Zip Code 76262-5294  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Tenet Healthcare Occupation Director, Audit Services  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **213.00**

Date of Receipt 07 / 23 / 2016  
**Transaction ID : A76E4C7149464455F9DD**  
Amount of Each Receipt this Period **38.00**  
 Memo Item  
Payroll Deduction: \$19.00/Bi-Weekly

**B. JENNIFER A MASON**  
Full Name (Last, First, Middle Initial)  
Mailing Address 5411 NE 22ND AVENUE  
City FORT LAUDERDAL State FL Zip Code 33308-3224  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Tenet Patient Financial Services Occupation COMPLIANCE OFFICER SR  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **209.00**

Date of Receipt 07 / 23 / 2016  
**Transaction ID : ACFA10DED0D224971A6A**  
Amount of Each Receipt this Period **38.00**  
 Memo Item  
Payroll Deduction: \$19.00/Bi-Weekly

**C. JAMES BEIERMANN**  
Full Name (Last, First, Middle Initial)  
Mailing Address 3560 DALLAS PARKWAY  
City FRISCO State TX Zip Code 75034  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Tenet Patient Financial Services Occupation VP, OPS PERF & ANALYTICS  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **209.00**

Date of Receipt 07 / 23 / 2016  
**Transaction ID : A25A9D2E5BC064CFC9C6**  
Amount of Each Receipt this Period **38.00**  
 Memo Item  
Payroll Deduction: \$19.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... **114.00**  
**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 43 OF 44  
(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**

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

Mailing Address 3560 DALLAS PARKWAY

City FRISCO	State TX	Zip Code 75034
----------------	-------------	-------------------

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

Name of Employer Tenet Patient Financial Services	Occupation VP, Information SystemS
--	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
209.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
07	/	23	/	2016

**Transaction ID : A9301ADD37CB24267BEF**

Amount of Each Receipt this Period  

38.00
-------

 Memo Item  
 Payroll Deduction: \$19.00/Bi-Weekly

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

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  

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

Amount of Each Receipt this Period  

--

 Memo Item

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

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  

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

Amount of Each Receipt this Period  

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 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	38.00
<b>TOTAL</b> This Period (last page this line number only).....▶	9226.94

**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. TOM RICE FOR CONGRESS**

Mailing Address PO BOX 70098

City Myrtle Beach State SC Zip Code 29572-0020

Purpose of Disbursement  
Political Contribution

Candidate Name

**Tom Rice**

Office Sought:  House  
 Senate  
 President  
State: SC District: 07

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 25 / 2016

Transaction ID : B85F661C7A7F34863993

Amount of Each Disbursement this Period

3000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. The Richard Burr Committee**

Mailing Address Post Office Box 5928

City Winston Salem State NC Zip Code 27113-5928

Purpose of Disbursement  
Political Contribution

Candidate Name

**Sen. Richard Burr**

Office Sought:  House  
 Senate  
 President  
State: NC District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 25 / 2016

Transaction ID : B9F67512F11234D31BF4

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

Memo Item

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

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

8000.00

8000.00