

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.....	105246.07	
(c) Total Receipts (from Line 19)	18891.59	87663.05
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	124137.66	185765.53
7. Total Disbursements (from Line 31).....	10600.00	72227.87
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	113537.66	113537.66
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

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).....	15032.41	50294.59
(ii) Unitemized	3859.18	37368.46
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	18891.59	87663.05
(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)	18891.59	87663.05
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))..... ▶	18891.59	87663.05
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	18891.59	87663.05

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.....	10600.00	67600.00
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)) ..	10600.00	72227.87
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10600.00	72227.87

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)	18891.59	87663.05
34. Total Contribution Refunds (from Line 28(d))	0.00	-323.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	18891.59	87986.05
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 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

A. 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 ▼
247.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 18 / 2016

Transaction ID : AAA9E1878672E45E1B72

Amount of Each Receipt this Period
 38.00

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

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

Mailing Address 2005 S Camino Monte

City Palm Springs State CA Zip Code 92264-2606

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

Name of Employer DESERT REGIONAL MEDICAL CENTER Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2016

Transaction ID : A248D04D0C4DB499B8E7

Amount of Each Receipt this Period
 500.00

Memo Item

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

Mailing Address 203 ANNANDALE RD

City PASADENA State CA Zip Code 91105-1407

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

Name of Employer Tenet Healthcare Occupation Reg/Market CMO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2016

Transaction ID : AE4D98311F0094F8A8EF

Amount of Each Receipt this Period
 250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	788.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 51
	<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. Charles Stark
Full Name (Last, First, Middle Initial)

Mailing Address 1528 Pumphouse Court

City Vestavia State AL Zip Code 35243-6002

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

Name of Employer Occupation
BROOKWOOD MEDICAL CENTER President and CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
06 / 07 / 2016
Transaction ID : **ABE3B1BBFD4A54572BD5**

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 1120 ISLAY STREET

City SAN LUIS OBISP State CA Zip Code 93401-3708

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

Name of Employer Occupation
SIERRA VISTA DBD-ASSOC ADMINISTRATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
06 / 07 / 2016
Transaction ID : **AD934B76C6D95442E8E9**

Amount of Each Receipt this Period
250.00

Memo Item

C. DON W CHESTER
Full Name (Last, First, Middle Initial)

Mailing Address 148 BLOOMFIELD DR

City WEST PALM BEAC State FL Zip Code 33405-4102

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

Name of Employer Occupation
ST MARY'S MEDICAL CENTER Adm Director, Comm - Govt Rel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
06 / 07 / 2016
Transaction ID : **AB3C0D7A02F554C68AC7**

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00

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 51
	<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. GRAHAM REEVE
Full Name (Last, First, Middle Initial)

Mailing Address 215 E QUINCY

City SAN ANTONIO State TX Zip Code 78215

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

Name of Employer BAPTIST HEALTH SYSTEM Occupation CEO, Market

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 07 / 2016
Transaction ID : A43163A3D91E8435F9D3

Amount of Each Receipt this Period 1000.00

Memo Item

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

Mailing Address 8327 WINE CUP HILL

City SAN ANTONIO State TX Zip Code 78256-2498

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

Name of Employer BAPTIST HEALTH SYSTEM Occupation CEO-Chief Admin Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 459.00

Date of Receipt 06 / 07 / 2016
Transaction ID : AE65F7B73B498470BBDB

Amount of Each Receipt this Period 250.00

Memo Item

C. 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 ▼ 507.00

Date of Receipt 06 / 25 / 2016
Transaction ID : AB114BF6E6B814EB8A74

Amount of Each Receipt this Period 78.00

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

SUBTOTAL of Receipts This Page (optional)..... ▶ 1328.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 51
	<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

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

Mailing Address 8327 WINE CUP HILL

City SAN ANTONIO State TX Zip Code 78256-2498

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

Name of Employer BAPTIST HEALTH SYSTEM Occupation CEO-Chief Admin Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 497.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 25 / 2016

Transaction ID : A83B4AC8B474641F7AEF

Amount of Each Receipt this Period
 38.00

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

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

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:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 25 / 2016

Transaction ID : A53986E58880F43A8AF1

Amount of Each Receipt this Period
 80.00

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

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

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 ▼ 247.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 25 / 2016

Transaction ID : A3E30890B70D4488A963

Amount of Each Receipt this Period
 38.00

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

SUBTOTAL of Receipts This Page (optional)..... ▶ 156.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 51
	<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. 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 ▼ 260.00	

Date of Receipt
06 / 25 / 2016
Transaction ID : A090E6A6D3F6B4BD9B44

Amount of Each Receipt this Period
40.00

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

B. 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 & Traning	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 507.00	

Date of Receipt
06 / 25 / 2016
Transaction ID : A4212183964274FEAADB

Amount of Each Receipt this Period
78.00

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

C. THALIA MARTIN
Full Name (Last, First, Middle Initial)
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 247.00	

Date of Receipt
06 / 25 / 2016
Transaction ID : AC003BC4AE9944723940

Amount of Each Receipt this Period
38.00

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

SUBTOTAL of Receipts This Page (optional).....	156.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 51
	<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. 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 **247.00**

Date of Receipt **06 / 25 / 2016**
Transaction ID : AB5A0D98490824415A8A
 Amount of Each Receipt this Period **38.00**
 Memo Item
 Payroll Deduction: \$19.00/Bi-Weekly

B. HAROLD BANDY
 Full Name (Last, First, Middle Initial)
 Mailing Address 9004 OLD SMYRNA ROAD
 City BRENTWOOD State TN Zip Code 37027-6058
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Tenet Healthcare Occupation Sr Director, IS Architecture
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1248.00**

Date of Receipt **06 / 25 / 2016**
Transaction ID : A8D45C1B34D5444AE9AA
 Amount of Each Receipt this Period **192.00**
 Memo Item
 Payroll Deduction: \$96.00/Bi-Weekly

C. 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 **494.00**

Date of Receipt **06 / 25 / 2016**
Transaction ID : A929058C2876C4C7D989
 Amount of Each Receipt this Period **76.00**
 Memo Item
 Payroll Deduction: \$38.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	306.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 51
	<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. BARRY LEFFLER

Mailing Address 4123 WYCLIFF AVE

City	State	Zip Code
DALLAS	TX	75219-3005

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

Name of Employer	Occupation
Tenet Healthcare	VP, MARKETING

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
247.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	25	/	2016

Transaction ID : AD4CF83BFB8864EACA59

Amount of Each Receipt this Period
38.00

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

Full Name (Last, First, Middle Initial)
B. JOHN TURNER Jr.

Mailing Address 708 LAND FALL DRIVE

City	State	Zip Code
Rock Hill	SC	29732-9437

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

Name of Employer	Occupation
Tenet Healthcare	Sr Director, Practice Ops

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
468.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	11	/	2016

Transaction ID : ACFBDD19A486D44AD86B

Amount of Each Receipt this Period
39.00

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

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

Mailing Address 5541 HAWKS LANDING DRIVE

City	State	Zip Code
ARRINGTON	TN	37014-7499

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

Name of Employer	Occupation
Tenet Healthcare	CHIEF MEDICAL OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1248.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	25	/	2016

Transaction ID : A5E89EB2A36EC4333BCB

Amount of Each Receipt this Period
192.00

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

SUBTOTAL of Receipts This Page (optional).....	269.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 51
	<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. 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 ▼ **792.00**

Date of Receipt **06 / 25 / 2016**

Transaction ID : AFFEE7EE84D304B78901

Amount of Each Receipt this Period **192.00**

Memo Item
Payroll Deduction: \$96.00/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 ▼ **576.00**

Date of Receipt **06 / 25 / 2016**

Transaction ID : A12F1596DB4C94C6589F

Amount of Each Receipt this Period **192.00**

Memo Item
Payroll Deduction: \$96.00/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:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **507.00**

Date of Receipt **06 / 25 / 2016**

Transaction ID : A6F847CC2D82549FE860

Amount of Each Receipt this Period **78.00**

Memo Item
Payroll Deduction: \$39.00/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 15 OF 51
	<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. CRAIG C ARMIN

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 ▼
520.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2016

Transaction ID : A7F1DAD4394304285B4D

Amount of Each Receipt this Period
80.00

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

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

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 ▼
455.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2016

Transaction ID : AE92728341B43474DB3E

Amount of Each Receipt this Period
70.00

Memo Item
Payroll Deduction: \$35.00/Bi-Weekly

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

Mailing Address 10010 W. VILLA LINDO DR.

City PEORIA State AZ Zip Code 85383-3486

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

Name of Employer TENET PRACTICE RESOURCES Occupation CEO, Market/Sys

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
494.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2016

Transaction ID : A1FB0A4644EC74C868CC

Amount of Each Receipt this Period
76.00

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

SUBTOTAL of Receipts This Page (optional).....	226.00
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 51
	<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. 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 ▼ 247.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2016
Transaction ID : A358B6E849F804CA8A72
 Amount of Each Receipt this Period
 38.00
 Memo Item
 Payroll Deduction: \$19.00/Bi-Weekly

B. 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: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 247.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2016
Transaction ID : A82E216F27526416D9CB
 Amount of Each Receipt this Period
 38.00
 Memo Item
 Payroll Deduction: \$19.00/Bi-Weekly

C. 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 ▼ 247.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2016
Transaction ID : ADBFBD11F84AF4B00B29
 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 17 OF 51
	<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. BENSON P CHACKO
Full Name (Last, First, Middle Initial)

Mailing Address 6308 LA POSTA

City	State	Zip Code
EL PASO	TX	79912-3040

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

Name of Employer	Occupation
PROVIDENCE SIERRA CAMPUS	COO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
247.00

Date of Receipt
 06 / 25 / 2016
Transaction ID : AD508F1927340494ABEE

Amount of Each Receipt this Period
 38.00

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

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

Mailing Address 641 NORTH AVE N.E. #1407

City	State	Zip Code
ATLANTA	GA	30308-9582

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

Name of Employer	Occupation
BROOKWOOD MEDICAL CENTER	ASSOCIATE ADMINISTRATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
507.00

Date of Receipt
 06 / 25 / 2016
Transaction ID : A93F86B23B98041A7B29

Amount of Each Receipt this Period
 78.00

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

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

Mailing Address 3910 BODEN LANE
Suite 1400

City	State	Zip Code
SPRING	TX	77386-2703

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

Name of Employer	Occupation
HOUSTON NORTHWEST MEDICAL	CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
507.00

Date of Receipt
 06 / 25 / 2016
Transaction ID : A43D09D1937394B4D94F

Amount of Each Receipt this Period
 78.00

Memo Item
 Payroll Deduction: \$39.00/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 18 OF 51
	<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 1248.00

Date of Receipt 06 / 25 / 2016
Transaction ID : AEF2D9EC695FE47DAA81
 Amount of Each Receipt this Period 192.00
 Memo Item
 Payroll Deduction: \$96.00/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 247.00

Date of Receipt 06 / 25 / 2016
Transaction ID : ABD6F6850C9A04E9A434
 Amount of Each Receipt this Period 38.00
 Memo Item
 Payroll Deduction: \$19.00/Bi-Weekly

C. STEPHEN M MOONEY
 Full Name (Last, First, Middle Initial)
 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 678.00

Date of Receipt 06 / 25 / 2016
Transaction ID : A8C734D7B5EFD443E979
 Amount of Each Receipt this Period 192.00
 Memo Item
 Payroll Deduction: \$96.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	422.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 51
	<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. MARY CLEARY

Mailing Address 940 BONNIE BRAE PLACE

City RIVER FOREST	State IL	Zip Code 60305-1512
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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 ▼
507.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 25 / 2016
Transaction ID : A47A6A69D31E04AB2980

Amount of Each Receipt this Period
78.00

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

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

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 ▼
864.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 25 / 2016
Transaction ID : A2AF0B2EE7D4C48E9A77

Amount of Each Receipt this Period
192.00

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

Full Name (Last, First, Middle Initial)
C. 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 ▼
247.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 25 / 2016
Transaction ID : AFC54195A53624C29B9B

Amount of Each Receipt this Period
38.00

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

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 21 OF 51
	<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. JANIE PATTERSON
Full Name (Last, First, Middle Initial)

Mailing Address 5572 SOUTHERN HILLS DR

City	State	Zip Code
FRISCO	TX	75034-1566

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
38.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 25 / 2016
Transaction ID : A85C7DDAEE9A74CA0B56

Amount of Each Receipt this Period
 38.00

Memo Item
 Payroll Deduction: \$19.00/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 ▼
427.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 25 / 2016
Transaction ID : A2D69B6A4CB284ADB80F

Amount of Each Receipt this Period
 78.00

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

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

Mailing Address 5760 DANIEL RD

City	State	Zip Code
PLANO	TX	75024-5914

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

Name of Employer	Occupation
Tenet Patient Financial Services	Sr Director, AR Management Ops

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1248.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 25 / 2016
Transaction ID : ACACA66F4375240D6AD4

Amount of Each Receipt this Period
 192.00

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

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 22 OF 51
	<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 ▼
507.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 25 / 2016

Transaction ID : AEEFF9E6488C54C98B12

Amount of Each Receipt this Period
 78.00

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

B. JASON E EVANS
Full Name (Last, First, Middle Initial)

Mailing Address 3409 VILLANOVA STREET

City	State	Zip Code
DALLAS	TX	75225-6018

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

Name of Employer	Occupation
Tenet Healthcare	CEO, Region

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
507.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 25 / 2016

Transaction ID : AC199680B0F9F4F03B8E

Amount of Each Receipt this Period
 78.00

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

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

Mailing Address 1955 MARKET CTR BD #2418

City	State	Zip Code
DALLAS	TX	75207-3480

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

Name of Employer	Occupation
Tenet Healthcare	Manager, Public Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
247.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 25 / 2016

Transaction ID : A9BCC51F81AB94451A30

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 51
	<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	State	Zip Code
FRISCO	TX	75033-1328

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

Name of Employer	Occupation
Tenet Healthcare	VP, HR Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	25	/	2016

Transaction ID : A780815488F20476DBA5

Amount of Each Receipt this Period

50.00

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

Full Name (Last, First, Middle Initial)
B. 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 ▼ **1248.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	25	/	2016

Transaction ID : A04467C270D5C41FF83C

Amount of Each Receipt this Period

192.00

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

Full Name (Last, First, Middle Initial)
C. JEREMY D FALKE

Mailing Address 1701 NATURAL BRIDGE DR

City	State	Zip Code
FRISCO	TX	75034-1229

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

Name of Employer	Occupation
Tenet Healthcare	VP, Talent, Cult&Perf Sys

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **247.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	25	/	2016

Transaction ID : A42657768F1E64FEC9A8

Amount of Each Receipt this Period

38.00

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

SUBTOTAL of Receipts This Page (optional).....▶	280.00
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 24 OF 51
	<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. 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 ▼ 2496.00

Date of Receipt 06 / 25 / 2016
Transaction ID : AC3E29C8E1A6C4C2B91F

Amount of Each Receipt this Period 384.00

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

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

Mailing Address 108 LONDONBERRY TERR.

City SOUTHLAKE State TX Zip Code 76092-7321

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

Name of Employer Tenet Healthcare Occupation VP & Treasurer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 247.00

Date of Receipt 06 / 25 / 2016
Transaction ID : AE443F37EB9E144AF808

Amount of Each Receipt this Period 38.00

Memo Item
Payroll Deduction: \$19.00/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 ▼ 249.99

Date of Receipt 06 / 25 / 2016
Transaction ID : A7D194DBF31CF4A21B29

Amount of Each Receipt this Period 38.46

Memo Item
Payroll Deduction: \$19.23/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	460.46
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 51
	<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. 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 ▼
494.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2016

Transaction ID : A3F041C891BDB4BD7AA2

Amount of Each Receipt this Period
76.00

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

B. 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 ▼
507.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2016

Transaction ID : A6C14725642EF4168B0D

Amount of Each Receipt this Period
78.00

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

C. 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 ▼
585.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2016

Transaction ID : A492C6BAF0FA243729A0

Amount of Each Receipt this Period
90.00

Memo Item
Payroll Deduction: \$45.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	244.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 51
	<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 ▼
1248.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	25	/	2016

Transaction ID : A2DBFDE8E6CDA4CEA8C

Amount of Each Receipt this Period
192.00

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

B. 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 ▼
247.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	25	/	2016

Transaction ID : AB2F1E184DD5F4E0DBE9

Amount of Each Receipt this Period
38.00

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

C. 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 ▼
247.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	25	/	2016

Transaction ID : A5389299BD1724959A65

Amount of Each Receipt this Period
38.00

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

SUBTOTAL of Receipts This Page (optional).....▶	268.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 51
	<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. 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 ▼ 507.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2016

Transaction ID : A5AE3E976B7F949318DF

Amount of Each Receipt this Period
 78.00

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

B. 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 ▼ 507.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2016

Transaction ID : AF06A4F437E734D059C6

Amount of Each Receipt this Period
 78.00

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

C. 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 ▼ 507.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2016

Transaction ID : A346199EDD80D4A89A97

Amount of Each Receipt this Period
 78.00

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

SUBTOTAL of Receipts This Page (optional).....	234.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 51
	<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. 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 **247.39**

Date of Receipt **06 / 25 / 2016**
Transaction ID : AABAA844A5C2C415CA79
Amount of Each Receipt this Period **38.06**
 Memo Item
Payroll Deduction: \$19.03/Bi-Weekly

B. 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 **247.00**

Date of Receipt **06 / 25 / 2016**
Transaction ID : A321EA769DD8A4BBB968
Amount of Each Receipt this Period **38.00**
 Memo Item
Payroll Deduction: \$19.00/Bi-Weekly

C. 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 **247.00**

Date of Receipt **06 / 25 / 2016**
Transaction ID : A46728F5D092B4892AB8
Amount of Each Receipt this Period **38.00**
 Memo Item
Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... **114.06**
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 29 OF 51
	<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. 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 **247.00**

Date of Receipt **06 / 25 / 2016**
Transaction ID : AE156D58F94B74A8A94D
 Amount of Each Receipt this Period **38.00**
 Memo Item
 Payroll Deduction: \$19.00/Bi-Weekly

B. 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 **247.00**

Date of Receipt **06 / 25 / 2016**
Transaction ID : A144CA817583B4BCFA4C
 Amount of Each Receipt this Period **38.00**
 Memo Item
 Payroll Deduction: \$19.00/Bi-Weekly

C. 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 **247.00**

Date of Receipt **06 / 25 / 2016**
Transaction ID : ABE31A0A59DFB4E62AAE
 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 30 OF 51
	<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. 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 ▼ 247.00

Date of Receipt 06 / 25 / 2016
Transaction ID : AB06FDDABC91B48DE8A1

Amount of Each Receipt this Period 38.00

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

B. 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 ▼ 247.00

Date of Receipt 06 / 25 / 2016
Transaction ID : AF3F2589E519E41E388F

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 ▼ 507.00

Date of Receipt 06 / 25 / 2016
Transaction ID : AC50B1E4EF2504AE09A1

Amount of Each Receipt this Period 78.00

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

SUBTOTAL of Receipts This Page (optional).....▶ 154.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 51
	<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. 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 ▼
507.00

Date of Receipt
06 / 25 / 2016
Transaction ID : A7F1C41C955734713B44

Amount of Each Receipt this Period
78.00

Memo Item
Payroll Deduction: \$39.00/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:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
247.00

Date of Receipt
06 / 25 / 2016
Transaction ID : A16B8045818024ACE80C

Amount of Each Receipt this Period
38.00

Memo Item
Payroll Deduction: \$19.00/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 ▼
247.00

Date of Receipt
06 / 25 / 2016
Transaction ID : ADC84EF2EF1364585B53

Amount of Each Receipt this Period
38.00

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

SUBTOTAL of Receipts This Page (optional).....▶	154.00
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 51
	<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 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 ▼ 247.00

Date of Receipt 06 / 25 / 2016
Transaction ID : AF51C5AE036754015BBB

Amount of Each Receipt this Period 38.00

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

B. 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 ▼ 1248.00

Date of Receipt 06 / 25 / 2016
Transaction ID : A5088418224AB458C98E

Amount of Each Receipt this Period 192.00

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

C. 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: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 247.00

Date of Receipt 06 / 25 / 2016
Transaction ID : AE4FF5A3D722F4082A03

Amount of Each Receipt this Period 38.00

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

SUBTOTAL of Receipts This Page (optional)..... ▶ 268.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 51
	<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. 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 **507.00**

Date of Receipt **06 / 25 / 2016**
Transaction ID : AA72A9EDD2211435EB6D
 Amount of Each Receipt this Period **78.00**
 Memo Item
 Payroll Deduction: \$39.00/Bi-Weekly

B. 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 **650.00**

Date of Receipt **06 / 25 / 2016**
Transaction ID : AE582570372F24821897
 Amount of Each Receipt this Period **100.00**
 Memo Item
 Payroll Deduction: \$50.00/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 **247.00**

Date of Receipt **06 / 25 / 2016**
Transaction ID : A961EC3041B0A4FC189A
 Amount of Each Receipt this Period **38.00**
 Memo Item
 Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	216.00
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 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. SHELLEY GILES
Full Name (Last, First, Middle Initial)
Mailing Address 3803 STOCKTON LN
City DALLAS State TX Zip Code 75287-4919
FEC ID number of contributing federal political committee. **C**
Name of Employer Tenet Healthcare Occupation Director, Relocation
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 260.00

Date of Receipt 06 / 25 / 2016
Transaction ID : ACB3A4426E17F4FFEA84
Amount of Each Receipt this Period 40.00
 Memo Item
Payroll Deduction: \$20.00/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 247.00

Date of Receipt 06 / 25 / 2016
Transaction ID : A71261EB6963349A0869
Amount of Each Receipt this Period 38.00
 Memo Item
Payroll Deduction: \$19.00/Bi-Weekly

C. 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 240.00

Date of Receipt 06 / 11 / 2016
Transaction ID : A95A67C112E1444EDB33
Amount of Each Receipt this Period 20.00
 Memo Item
Payroll Deduction: \$20.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... 98.00
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 51
	<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. 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 **1248.00**

Date of Receipt **06 / 25 / 2016**
Transaction ID : A69752DEE3FD9418CBB8
 Amount of Each Receipt this Period **192.00**
 Memo Item
 Payroll Deduction: \$96.00/Bi-Weekly

B. LEONARD DEONARINE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1129 WISHING WELL CT
 City CEDAR HILL State TX Zip Code 75104-8255
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Tenet Healthcare Occupation Director, Business Continuity
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **247.00**

Date of Receipt **06 / 25 / 2016**
Transaction ID : A43BB9C3FB23E4F8BA0F
 Amount of Each Receipt this Period **38.00**
 Memo Item
 Payroll Deduction: \$19.00/Bi-Weekly

C. 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 **520.00**

Date of Receipt **06 / 25 / 2016**
Transaction ID : AC5F50AC5DB2247F8BD7
 Amount of Each Receipt this Period **80.00**
 Memo Item
 Payroll Deduction: \$40.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	310.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 51
	<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. 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 ▼ 247.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2016
Transaction ID : A998D7B40A89847B5AD6

Amount of Each Receipt this Period
 38.00

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

B. 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 ▼ 494.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2016
Transaction ID : A83086CFCE83D4EFB840

Amount of Each Receipt this Period
 76.00

Memo Item
 Payroll Deduction: \$38.00/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 ▼ 4329.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2016
Transaction ID : A3219CCA5E2184806B18

Amount of Each Receipt this Period
 666.00

Memo Item
 Payroll Deduction: \$333.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	780.00
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 37 OF 51
	<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. 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 ▼ 228.00

Date of Receipt 06 / 11 / 2016
Transaction ID : A8EEDB2BF15CF48EB8D5

Amount of Each Receipt this Period 19.00

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

B. 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 ▼ 494.00

Date of Receipt 06 / 25 / 2016
Transaction ID : AA599B10A8221464E910

Amount of Each Receipt this Period 76.00

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

C. 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 ▼ 494.00

Date of Receipt 06 / 25 / 2016
Transaction ID : A66D7AC49306D4C22B7F

Amount of Each Receipt this Period 76.00

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

SUBTOTAL of Receipts This Page (optional)..... ▶ 171.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 51
	<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. 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 **1248.00**

Date of Receipt **06 / 25 / 2016**
Transaction ID : A840C783BE36F4E218D7
 Amount of Each Receipt this Period **192.00**
 Memo Item
 Payroll Deduction: \$96.00/Bi-Weekly

B. TIMOTHY MENTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 3700 East South Street
 City Lakewood State CA Zip Code 90712-1419
 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 **480.00**

Date of Receipt **06 / 25 / 2016**
Transaction ID : AA6F35EF9ED4A4F26A0A
 Amount of Each Receipt this Period **192.00**
 Memo Item
 Payroll Deduction: \$96.00/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 **247.00**

Date of Receipt **06 / 25 / 2016**
Transaction ID : A110D2D8A8A8C44569EF
 Amount of Each Receipt this Period **38.00**
 Memo Item
 Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	422.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 51
	<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 ▼ **325.00**

Date of Receipt **06 / 25 / 2016**

Transaction ID : AF6FABC3982394381BFC

Amount of Each Receipt this Period **50.00**

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

B. 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 ▼ **507.00**

Date of Receipt **06 / 25 / 2016**

Transaction ID : A93DDB2FD02F1472782E

Amount of Each Receipt this Period **78.00**

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

C. 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 ▼ **461.64**

Date of Receipt **06 / 11 / 2016**

Transaction ID : AE5D5893B7CE4478C8BA

Amount of Each Receipt this Period **38.47**

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

SUBTOTAL of Receipts This Page (optional)..... **166.47**

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 51		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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

A. MARK P LISA
 Full Name (Last, First, Middle Initial)
 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 **507.00**

Date of Receipt **06 / 25 / 2016**
Transaction ID : A7E96AC65F0844644831
 Amount of Each Receipt this Period **78.00**
 Memo Item
 Payroll Deduction: \$39.00/Bi-Weekly

B. 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 **247.00**

Date of Receipt **06 / 25 / 2016**
Transaction ID : A0933814961FC431C970
 Amount of Each Receipt this Period **38.00**
 Memo Item
 Payroll Deduction: \$19.00/Bi-Weekly

C. 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 **247.00**

Date of Receipt **06 / 25 / 2016**
Transaction ID : A8617234E175A4171810
 Amount of Each Receipt this Period **38.00**
 Memo Item
 Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	154.00
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 51
	<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 ▼
250.12

Date of Receipt
06 / 25 / 2016
Transaction ID : AFDE79B45C7614EB786A

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 ▼
500.11

Date of Receipt
06 / 25 / 2016
Transaction ID : A8030469AA6004B388A3

Amount of Each Receipt this Period
76.94

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

Full Name (Last, First, Middle Initial)
C. STEPHANIE S SHERMAN

Mailing Address 10481 MATEO COURT

City State Zip Code
BOCA RATON FL 33498-6733

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

Name of Employer Occupation
WEST BOCA MEDICAL CENTER CHIEF HR OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
06 / 16 / 2016
Transaction ID : A8ACF65864F4943BFAE9

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	365.42
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 51
	<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. MARTHA GERGANOFF
Full Name (Last, First, Middle Initial)

Mailing Address 1601 W ST MARYS RD

City TUCSON State AZ Zip Code 85745

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

Name of Employer Carondelet St Marys Hospital Occupation COO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 16 / 2016

Transaction ID : AA598CE039FB044E1A5B

Amount of Each Receipt this Period
 250.00

Memo Item

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

Mailing Address 5000 W OAKLAND PARK BLVD

City FT LAUDERDALE State FL Zip Code 33313

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

Name of Employer FLORIDA MEDICAL CENTER Occupation CEO-Chief Admin Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 16 / 2016

Transaction ID : A5F86B07CF4454066BBA

Amount of Each Receipt this Period
 250.00

Memo Item

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

Mailing Address 244 South Waters Edge Drive

City Ponte Vedra Beach State FL Zip Code 32082-2579

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation CEO Florida Region

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 16 / 2016

Transaction ID : A81480FE25FEC46659A7

Amount of Each Receipt this Period
 500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 51
	<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. Craig Bloom
Full Name (Last, First, Middle Initial)

Mailing Address 21642 Marigot Drive

City Boca Raton State FL Zip Code 33428-4824

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation CBDO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 16 / 2016
Transaction ID : AA390DC1FF79649B89ED

Amount of Each Receipt this Period 250.00

Memo Item

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

Mailing Address 10877 NW 72nd Place

City Parkland State FL Zip Code 33076-1853

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation CFO Florida Region

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 16 / 2016
Transaction ID : A24D2EBE7870541DE8F3

Amount of Each Receipt this Period 250.00

Memo Item

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 ▼ 267.00

Date of Receipt 06 / 25 / 2016
Transaction ID : A5AD11B7D0B494C39AF4

Amount of Each Receipt this Period 39.00

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

SUBTOTAL of Receipts This Page (optional)..... ▶ 539.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 51
	<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. 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 ▼ **480.64**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2016
Transaction ID : A138889CF77E040D98C4

Amount of Each Receipt this Period
 19.00

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

B. 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 ▼ **487.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2016
Transaction ID : A94675D1FB24F4428A75

Amount of Each Receipt this Period
 19.00

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

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

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 ▼ **460.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2016
Transaction ID : AC6079D3B3FC84768A4E

Amount of Each Receipt this Period
 40.00

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

SUBTOTAL of Receipts This Page (optional)..... **78.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 51
	<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. 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 ▼ 208.00

Date of Receipt 06 / 25 / 2016
Transaction ID : AB5724BFC82B04233B2A

Amount of Each Receipt this Period 32.00

Memo Item
Payroll Deduction: \$16.00/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 ▼ 247.00

Date of Receipt 06 / 25 / 2016
Transaction ID : A90AA8F4E3BA54538A12

Amount of Each Receipt this Period 19.00

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

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

Mailing Address 111 DALLAS ST

City SAN ANTONIO State TX Zip Code 78205

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

Name of Employer Baptist Medical Center Occupation CNO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 29 / 2016
Transaction ID : A6E04DEF8EEAD4E74828

Amount of Each Receipt this Period 250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 301.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 51
	<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. KATHLEEN HEALY-COLLIER
 Full Name (Last, First, Middle Initial)
 Mailing Address 2022 BROOKWOOD MEDICAL CENTER DR
 City BIRMINGHAM State AL Zip Code 35209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 BROOKWOOD MEDICAL CENTER COO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 29 / 2016
Transaction ID : A3E803154457C4F5695D
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. BRADLEY STOLTZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 1445 ROSS AVENUE
 City DALLAS State TX Zip Code 75202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Tenet Healthcare VICE PRESIDENT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 29 / 2016
Transaction ID : A24193442BE0D4E66ADE
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. EMILY VOLK
 Full Name (Last, First, Middle Initial)
 Mailing Address 215 E QUINCY
 City SAN ANTONIO State TX Zip Code 78215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 BAPTIST HEALTH SYSTEM CHIEF, QUALITY OFFICER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 29 / 2016
Transaction ID : A4E5C5ADD1C424CE395F
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 51
	<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

Full Name (Last, First, Middle Initial) A. MITCHELL S FELDMAN		Date of Receipt MM / DD / YYYY 06 / 29 / 2016
Mailing Address 7021 W. CYPRESS HEAD DR		Transaction ID : A416BCA24BFA44F9CAEE
City PARKLAND	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer WEST BOCA MEDICAL CENTER	Occupation CEO	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B.		Date of Receipt MM / DD / YYYY
Mailing Address		Amount of Each Receipt this Period
City	State	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) C.		Date of Receipt MM / DD / YYYY
Mailing Address		Amount of Each Receipt this Period
City	State	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	15032.41

**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. TIBERI FOR CONGRESS

Mailing Address 2931 E DUBLIN GRANVILLE ROAD
SUITE 190

City COLUMBUS State OH Zip Code 43231

Purpose of Disbursement
Political Contribution

Candidate Name

Patrick J Tiberi

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: OH District: 12

Date of Disbursement

MM / DD / YYYY
06 / 27 / 2016

Transaction ID : B515EFDBF398847B0A28

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Brenda Lawrence for Congress

Mailing Address P.O. BOX 3060

City Southfield State MI Zip Code 48037-3060

Purpose of Disbursement
Political Contribution

Candidate Name

Brenda Lawrence

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: MI District: 14

Date of Disbursement

MM / DD / YYYY
06 / 27 / 2016

Transaction ID : BDD5B1EAD1EAA4A3BAE

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. SWALWELL FOR CONGRESS

Mailing Address P.O. BOX 2847

City Dublin State CA Zip Code 94568-0847

Purpose of Disbursement
Political Contribution

Candidate Name

Eric Michael Swalwell

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: CA District: 15

Date of Disbursement

MM / DD / YYYY
06 / 27 / 2016

Transaction ID : BB55F011FEAD14366ACC

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

8500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. DR. RAUL RUIZ FOR CONGRESS

Mailing Address PO BOX 6116

City La Quinta State CA Zip Code 92248-6116

Purpose of Disbursement
Political Contribution

Candidate Name

Raul Ruiz

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

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 27 / 2016

Transaction ID : **B6BC3AD889E354CC49F5**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. LEVIN FOR CONGRESS

Mailing Address PO BOX 37

City ROSEVILLE State MI Zip Code 48066

Purpose of Disbursement
Political Contribution

Candidate Name

Sander M Levin

Office Sought: House
 Senate
 President
State: MI District: 09

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 27 / 2016

Transaction ID : **B0F2354A86E874144B54**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Hospital & Healthsystem Association of PA PAC

Mailing Address P.O. Box 2335

City Harrisburg State PA Zip Code 17105-2335

Purpose of Disbursement
PAC

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼
Other

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 14 / 2016

Transaction ID : **BB2A5A68596054E9BB4E**

Amount of Each Disbursement this Period

100.00

Memo Item

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

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

2100.00

10600.00