



**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="2012"/>	<input type="text" value="98990.39"/>	<input type="text" value="98990.39"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="120017.14"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="10332.70"/>	<input type="text" value="40929.45"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="130349.84"/>	<input type="text" value="139919.84"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="6000.00"/>	<input type="text" value="15570.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="124349.84"/>	<input type="text" value="124349.84"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="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

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).....	6666.00	16628.00
(ii) Unitemized .....	3666.70	19301.45
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	10332.70	35929.45
(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) .....	10332.70	35929.45
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	5000.00
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))..... ▶	10332.70	40929.45
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	10332.70	40929.45

**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	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	6000.00	14720.00
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	0.00
(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	0.00
29. Other Disbursements .....	0.00	850.00
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)) ..	6000.00	15570.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6000.00	15570.00

**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) .....	10332.70	35929.45
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	10332.70	35929.45
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
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	0.00

**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 23
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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. KEVIN MCCASLIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1415 MAIN STREET #1403  
 City DALLAS State TX Zip Code 75202-4108  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer TENET HEALTHCARE CORPORATION Occupation DIR, COMPLIANCE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 672.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR1026156827544**  
 Amount of Each Receipt this Period 192.00  
 P/R Deduction (\$96.00 Bi-Weekly)

**B. JEFFREY KOURY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 42 BARNEBURG  
 City DOVE CANYON State CA Zip Code 92679-4210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer TENET HEALTHCARE CORPORATION Occupation SVP, REGIONAL OPERATIONS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 266.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR1481203527544**  
 Amount of Each Receipt this Period 76.00  
 P/R Deduction (\$38.00 Bi-Weekly)

**C. MICHAEL K BURTNETT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1131 N EDGEFIELD AVE  
 City DALLAS State TX Zip Code 75208-3624  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer TENET HEALTHCARE CORPORATION Occupation VP, OUTPATIENT SERVICES  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 266.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR1568624527544**  
 Amount of Each Receipt this Period 76.00  
 P/R Deduction (\$38.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	344.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 23
	<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 RICE**  
Full Name (Last, First, Middle Initial)

Mailing Address 15126 FERDINAND DR

City DALLAS State TX Zip Code 75248-6437

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation SVP, INVESTOR RELATIONS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 273.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR1592856027544**

Amount of Each Receipt this Period 78.00

P/R Deduction (\$39.00 Bi-Weekly)

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

Mailing Address 5325 TATE AVE

City PLANO State TX Zip Code 75093-3433

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation SVP, REGIONAL OPERATIONS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR1592857727544**

Amount of Each Receipt this Period 80.00

P/R Deduction (\$40.00 Bi-Weekly)

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

Mailing Address 401 N.CHURCH ST

City MCKINNEY State TX Zip Code 75069

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation VP, IT TECHNOLOGY

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR1592858227544**

Amount of Each Receipt this Period 90.00

P/R Deduction (\$45.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional).....▶ 248.00

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

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

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

FOR LINE NUMBER: PAGE 8 OF 23  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. JAY MIRANDA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15871 SW 148 TERRACE  
 City MIAMI State FL Zip Code 33196-5701  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CORAL GABLES HOSPITAL Occupation CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR1734839227544**  
 Amount of Each Receipt this Period 80.00  
 P/R Deduction (\$40.00 Bi-Weekly)

**B. LEA D FOURKILLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13219 GEORGE STREET  
 City FARMERS BRANCH State TX Zip Code 75234-5206  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer TENET PATIENT FINCL SVCS Occupation VP & CHIEF COMP OFFICER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 308.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR1735529127544**  
 Amount of Each Receipt this Period 88.00  
 P/R Deduction (\$44.00 Bi-Weekly)

**C. JEREMY CLARK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2411 N HALL ST#19  
 City DALLAS State TX Zip Code 75204-2839  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer TENET HEALTHCARE CORPORATION Occupation VICE PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR1735911027544**  
 Amount of Each Receipt this Period 60.00  
 P/R Deduction (\$30.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 228.00  
**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 23
	<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 CORPORATION Occupation VP, GOVERNMENT RELATIONS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 672.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR1814798527544**  
 Amount of Each Receipt this Period 192.00  
 P/R Deduction (\$96.00 Bi-Weekly)

**B. ROBERT J CUNNAH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 163 VILLAGIO WEST  
 City PALM SPRINGS State CA Zip Code 92262-6395  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DESERT REGIONAL MEDICAL CENTER Occupation CHIEF MEDICAL OFFICER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR2174361627544**  
 Amount of Each Receipt this Period 100.00  
 P/R Deduction (\$50.00 Bi-Weekly)

**C. CATHRYN H FRASER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 272 ENCLAVES COURT  
 City COPPELL State TX Zip Code 75019-2125  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer TENET HEALTHCARE CORPORATION Occupation SVP, HUMAN RESOURCES  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 672.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR2174559927544**  
 Amount of Each Receipt this Period 192.00  
 P/R Deduction (\$96.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional).....▶ 484.00  
**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 23
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. 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 CORPORATION Occupation SR DIR, COMPLNCE POLICY  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 273.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR2174561227544**  
Amount of Each Receipt this Period 78.00  
P/R Deduction (\$39.00 Bi-Weekly)

**B. JOHN P LANDINO**  
Full Name (Last, First, Middle Initial)  
Mailing Address 911 LAKE BREEZE  
City HIGHLAND VILLAGE State TX Zip Code 75077-6491  
FEC ID number of contributing federal political committee. **C**  
Name of Employer TENET HEALTHCARE CORPORATION Occupation VP PHY RELT PROG,BUS DEV  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 273.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR2174561727544**  
Amount of Each Receipt this Period 78.00  
P/R Deduction (\$39.00 Bi-Weekly)

**C. BIGGS C PORTER**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4535 MANNING LANE  
City DALLAS State TX Zip Code 75220-6434  
FEC ID number of contributing federal political committee. **C**  
Name of Employer TENET HEALTHCARE CORPORATION Occupation CHIEF FINANCIAL OFFICER  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 700.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR2174563627544**  
Amount of Each Receipt this Period 200.00  
P/R Deduction (\$100.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional).....▶ 356.00  
**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 11 OF 23
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. JEFFERY FLOCKEN</b>			Date of Receipt MM / DD / YYYY 03 / 31 / 2012 <b>Transaction ID : PR2174567327544</b>
Mailing Address 27 NEW DAWN			Amount of Each Receipt this Period 200.00
City IRVINE	State CA	Zip Code 92620-1976	P/R Deduction (\$100.00 Bi-Weekly)
FEC ID number of contributing federal political committee. C			
Name of Employer TENET HEALTHCARE CORPORATION	Occupation SVP, REGIONAL OPERATIONS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 700.00	

Full Name (Last, First, Middle Initial) <b>B. SALLY A HURT-STEFFEN</b>			Date of Receipt MM / DD / YYYY 03 / 31 / 2012 <b>Transaction ID : PR2248480227544</b>
Mailing Address 712 WALTHAM CT			Amount of Each Receipt this Period 100.00
City EL PASO	State TX	Zip Code 79922-2128	P/R Deduction (\$50.00 Bi-Weekly)
FEC ID number of contributing federal political committee. C			
Name of Employer SIERRA PROVIDENCE EASTSIDE HOSPITAL	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>C. RICHARD E GLANCEY</b>			Date of Receipt MM / DD / YYYY 03 / 31 / 2012 <b>Transaction ID : PR2284144027544</b>
Mailing Address 6516 VASCO WAY			Amount of Each Receipt this Period 78.00
City EL PASO	State TX	Zip Code 79912-1709	P/R Deduction (\$39.00 Bi-Weekly)
FEC ID number of contributing federal political committee. C			
Name of Employer SIERRA MEDICAL CENTER	Occupation DIR, EXTERNAL AFFAIRS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 273.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	378.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 12 OF 23  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. MICHAEL BLACKBURN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4141 16TH STREET NE  
 City HICKORY State NC Zip Code 28601-8408  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FRYE REGIONAL MEDICAL CENTER Occupation CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 266.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR2369304327544**  
 Amount of Each Receipt this Period 76.00  
 P/R Deduction (\$38.00 Bi-Weekly)

**B. JOHN SHORT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3108 CLYMER DR  
 City PLANO State TX Zip Code 75025-5325  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer TENET HEALTHCARE CORPORATION Occupation VP, PERF MGMT & INNOVAT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 273.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR2387796627544**  
 Amount of Each Receipt this Period 78.00  
 P/R Deduction (\$39.00 Bi-Weekly)

**C. MR MICHAEL R HOLMES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4241 VETERANS BLVD #200 #200  
 City METAIRIE State LA Zip Code 70006  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer TPS LOUISIANA DIS Occupation CEO - DIS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 266.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR2440288727544**  
 Amount of Each Receipt this Period 76.00  
 P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional).....▶ 230.00  
**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 23
	<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. KELVIN A BAGGETT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6453 TULIP LANE  
 City DALLAS State TX Zip Code 75230-4148  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer TENET HEALTHCARE CORPORATION Occupation SVP, CHIEF MEDICAL OFCR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 273.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR2444580827544**  
 Amount of Each Receipt this Period 78.00  
 P/R Deduction (\$39.00 Bi-Weekly)

**B. STEVE BROWN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16 SARAH NASH CT  
 City DALLAS State TX Zip Code 75225-2072  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer TENET HEALTHCARE CORPORATION Occupation EVP, CHIEF INFO OFFICER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1330.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR407210627544**  
 Amount of Each Receipt this Period 380.00  
 P/R Deduction (\$190.00 Bi-Weekly)

**C. JOHN B MCDONALD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2230 WARNER ROAD  
 City FORT WORTH State TX Zip Code 76110-1752  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer TENET HEALTHCARE CORPORATION Occupation VP, A&D  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 266.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR407215827544**  
 Amount of Each Receipt this Period 76.00  
 P/R Deduction (\$38.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	534.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 23
	<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. JOE D THOMASON**  
Full Name (Last, First, Middle Initial)

Mailing Address 6304 CARMEL FALLS CT

City MCKINNEY State TX Zip Code 75070-8768

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

Name of Employer CENTENNIAL MEDICAL CENTER Occupation CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 266.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR407222127544**

Amount of Each Receipt this Period 76.00

P/R Deduction (\$38.00 Bi-Weekly)

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

Mailing Address 11122 W RICKS CIRCLE

City DALLAS State TX Zip Code 75230-3032

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation REGIONAL CMO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR407222827544**

Amount of Each Receipt this Period 100.00

P/R Deduction (\$50.00 Bi-Weekly)

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

Mailing Address 714 KENT CT

City SOUTHLAKE State TX Zip Code 76092-8868

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation SVP & GENERAL COUNSEL

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1344.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR407229227544**

Amount of Each Receipt this Period 384.00

P/R Deduction (\$96.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 560.00

**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 23
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

Mailing Address 1138 PINE VALLEY ROAD

City State Zip Code  
GRIFFIN GA 30224-4953

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

Name of Employer Occupation  
SPALDING REGIONAL HOSPITAL CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 266.00

Date of Receipt  
03 / 31 / 2012  
Transaction ID : PR407236027544

Amount of Each Receipt this Period  
38.00

P/R Deduction (\$38.00 Bi-Weekly)

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

Mailing Address 3610 EDGEWATER STREET

City State Zip Code  
DALLAS TX 75205-4317

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

Name of Employer Occupation  
TENET HEALTHCARE CORPORATION SVP, REGIONAL OPERATIONS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 672.00

Date of Receipt  
03 / 31 / 2012  
Transaction ID : PR407242927544

Amount of Each Receipt this Period  
192.00

P/R Deduction (\$96.00 Bi-Weekly)

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

Mailing Address 264 IDLEWILDE LANE

City State Zip Code  
SANFORD NC 27332-9304

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

Name of Employer Occupation  
CENTRAL CAROLINA HOSPITAL CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt  
03 / 31 / 2012  
Transaction ID : PR407244827544

Amount of Each Receipt this Period  
70.00

P/R Deduction (\$35.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 300.00

**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 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. DAVID 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 SAINT FRANCIS HOSPITAL Occupation MARKET CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 672.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR407250427544**  
 Amount of Each Receipt this Period 192.00  
 P/R Deduction (\$96.00 Bi-Weekly)

**B. STEPHEN L NEWMAN MD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11034 TIBBS STREET  
 City DALLAS State TX Zip Code 75230-3450  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer TENET HEALTHCARE CORPORATION Occupation CHIEF OPERATING OFFICER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1344.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR407257727544**  
 Amount of Each Receipt this Period 384.00  
 P/R Deduction (\$192.00 Bi-Weekly)

**C. TERRY WHEELER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13802 MAGNOLIA MANOR  
 City CYPRESS State TX Zip Code 77429-8162  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CYPRESS FAIRBANKS MEDICAL CENTER Occupation CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR407265627544**  
 Amount of Each Receipt this Period 70.00  
 P/R Deduction (\$35.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	646.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 23
	<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. GARY L HONTS JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7707 N 127TH AVE  
 City OMAHA State NE Zip Code 68142-1723  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CREIGHTON UNIVERSITY MEDICAL CENTER Occupation CEO  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **210.00**

Date of Receipt **03 / 31 / 2012**  
**Transaction ID : PR407266427544**  
 Amount of Each Receipt this Period **60.00**  
 P/R Deduction (\$30.00 Bi-Weekly)

**B. MICHELE C MEYER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 230 GRIMSLEY STAT BLUFF  
 City SAINT LOUIS State MO Zip Code 63129-5030  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DES PERES HOSPITAL Occupation CEO  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **266.00**

Date of Receipt **03 / 31 / 2012**  
**Transaction ID : PR407268527544**  
 Amount of Each Receipt this Period **76.00**  
 P/R Deduction (\$38.00 Bi-Weekly)

**C. CRAIG C ARMIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 23510 BERDON STREET  
 City WOODLAND HILLS State CA Zip Code 91367-3004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer TENET HEALTHCARE CORPORATION Occupation VP, GOV'T PROGRAMS  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **280.00**

Date of Receipt **03 / 31 / 2012**  
**Transaction ID : PR407274127544**  
 Amount of Each Receipt this Period **80.00**  
 P/R Deduction (\$40.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>216.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. KENT G CLAYTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3 TURTLE BAY DRIVE  
 City NEWPORT BEACH State CA Zip Code 92660-4266  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PLACENTIA LINDA HOSPITAL Occupation CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 266.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR407278127544**  
 Amount of Each Receipt this Period 76.00  
 P/R Deduction (\$38.00 Bi-Weekly)

**B. CANDACE MARKWITH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 980 ISABELLA WAY  
 City SAN LUIS OBISPO State CA Zip Code 93405-6186  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SIERRA VISTA REGIONAL MEDICAL CENTER Occupation CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 273.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR407280327544**  
 Amount of Each Receipt this Period 78.00  
 P/R Deduction (\$39.00 Bi-Weekly)

**C. RODNEY A REASONER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1960 MARY LEE LN  
 City ALLEN State TX Zip Code 75002-8528  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer TENET HEALTHCARE CORPORATION Occupation VP, FINANCE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 266.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR407280927544**  
 Amount of Each Receipt this Period 76.00  
 P/R Deduction (\$38.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	230.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 19 OF 23  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. MICHELE M FINNEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 21521 TURTLEDOVE STREET  
 City State Zip Code  
 TRABUCO CANYON CA 92679-3486  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 LOS ALAMITOS MEDICAL CENTER CEO  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 266.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2012  
**Transaction ID : PR407283927544**  
 Amount of Each Receipt this Period  
 76.00  
 P/R Deduction (\$38.00 Bi-Weekly)

**B. KEN WHEAT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 38041 E.BOGERT TRAIL  
 City State Zip Code  
 PALM SPRINGS CA 92264-9638  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 DESERT REGIONAL MEDICAL CENTER COO  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 266.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2012  
**Transaction ID : PR407288727544**  
 Amount of Each Receipt this Period  
 76.00  
 P/R Deduction (\$38.00 Bi-Weekly)

**C. KENNETH F SUTHERLAND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 102 WILMINGTON CT  
 City State Zip Code  
 SOUTHLAKE TX 76092-8492  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 TENET HEALTHCARE CORPORATION VP, CONSTRUCTION & DESIG  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 266.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2012  
**Transaction ID : PR839152227544**  
 Amount of Each Receipt this Period  
 76.00  
 P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 228.00  
**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 20 OF 23
	<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. AUDREY T ANDREWS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 702 PENFOLDS  
 City COPPELL State TX Zip Code 75019-4544  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer TENET HEALTHCARE CORPORATION Occupation SVP, CHIEF COMPL OFFICER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1344.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR840566927544**  
 Amount of Each Receipt this Period 384.00  
 P/R Deduction (\$192.00 Bi-Weekly)

**B. DREW P KAHN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16015 KEMPTON PARK  
 City SPRING State TX Zip Code 77379-6730  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer TENET HEALTHCARE CORPORATION Occupation VP, REGIONAL OPERATIONS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 266.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR840590427544**  
 Amount of Each Receipt this Period 76.00  
 P/R Deduction (\$38.00 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 CORPORATION Occupation VP, CLINICAL SYSTEMS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR840924627544**  
 Amount of Each Receipt this Period 80.00  
 P/R Deduction (\$40.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 540.00  
**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 23
	<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. TREVOR FETTER**  
Full Name (Last, First, Middle Initial)

Mailing Address 3821 BEVERLY DRIVE

City DALLAS State TX Zip Code 75205-2807

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation CEO AND PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2331.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR841482527544**

Amount of Each Receipt this Period 666.00

P/R Deduction (\$333.00 Bi-Weekly)

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

Mailing Address 1221 WENTWOOD

City IRVING State TX Zip Code 75061-4456

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation VP & ASST GENERAL COUNSE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR842232427544**

Amount of Each Receipt this Period 150.00

P/R Deduction (\$75.00 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 CORPORATION Occupation VP, APPLIED CLINICAL INF

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 266.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR842373127544**

Amount of Each Receipt this Period 76.00

P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional).....▶ 892.00

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

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

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

FOR LINE NUMBER: PAGE 22 OF 23  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

Full Name (Last, First, Middle Initial)  
**A. MANUEL LINARES**

Mailing Address 7935 EAST DRIVE#901

City NORTH BAY VILLAGE      State FL      Zip Code 33141-3687

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 ▼  
266.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 31 / 2012  
**Transaction ID : PR844477227544**

Amount of Each Receipt this Period  
76.00

P/R Deduction (\$38.00 Bi-Weekly)

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

Mailing Address 5412 GLENSHIRE DR

City PLANO      State TX      Zip Code 75093-2800

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

Name of Employer TENET HEALTHCARE CORPORATION      Occupation SR DIR, CORP COMMUN

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 31 / 2012  
**Transaction ID : PR844644427544**

Amount of Each Receipt this Period  
100.00

P/R Deduction (\$50.00 Bi-Weekly)

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

Mailing Address 3013 GOLF CREST LANE

City WOODSTOCK      State GA      Zip Code 30189-8197

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

Name of Employer SOUTH FULTON MEDICAL CENTER      Occupation CEO

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
266.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 31 / 2012  
**Transaction ID : PR849790227544**

Amount of Each Receipt this Period  
76.00

P/R Deduction (\$38.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	252.00
<b>TOTAL</b> This Period (last page this line number only).....▶	6666.00

**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. Texans for a Progressive Senate**

Mailing Address 328 Massachusetts Avenue NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
2012 Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
03 / 26 / 2012

Transaction ID : 34559603

Amount of Each Disbursement this Period

1000.00

2012 Contribution

Full Name (Last, First, Middle Initial)

**B. American Hospital Association PAC**

Mailing Address 325 7th Street, NW  
Suite 700

City Washington State DC Zip Code 20004

Purpose of Disbursement  
2012 Contribution

011

Candidate Name

**American Hospital Association PAC**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
03 / 26 / 2012

Transaction ID : 34559609

Amount of Each Disbursement this Period

5000.00

2012 Contribution

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

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

6000.00

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

6000.00