

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. 12FE4M5 TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 1445 Ross Avenue Suite 1400 Dallas TX 75202-2703 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00119354 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 06 / 01 / 2015 through 06 / 30 / 2015

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 07 / 20 / 2015

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="2015"/>		81358.03
(b) Cash on Hand at Beginning of Reporting Period.....	82136.17	
(c) Total Receipts (from Line 19)	13828.82	90595.06
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	95964.99	171953.09
7. Total Disbursements (from Line 31).....	12000.00	87988.10
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	83964.99	83964.99
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

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).....	10484.60	52718.00
(ii) Unitemized	3344.22	37877.06
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	13828.82	90595.06
(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)	13828.82	90595.06
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))..... ▶	13828.82	90595.06
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	13828.82	90595.06

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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	2505.45
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	2505.45
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10500.00	73000.00
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	1584.45
(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	1584.45
29. Other Disbursements	1500.00	10898.20
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)) ..	12000.00	87988.10
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12000.00	87988.10

DETAILED SUMMARY PAGE
of Disbursements

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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)	13828.82	90595.06
34. Total Contribution Refunds (from Line 28(d))	0.00	1584.45
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	13828.82	89010.61
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	2505.45
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	2505.45

**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 48
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. David Siegel
 Full Name (Last, First, Middle Initial)
 Mailing Address 46 Arnold Palmer
 City San Antonio State TX Zip Code 78257-1723
 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 ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 04 / 2015
Transaction ID : AFF3BA2B269A54162A3F
 Amount of Each Receipt this Period
 1000.00

B. THOMAS I RUNKLE
 Full Name (Last, First, Middle Initial)
 Mailing Address 868B N Pennock St
 City Philadelphia State PA Zip Code 19130-1234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HAHNEMANN UNIVERSITY HOSPITAL Occupation DIRECTOR OF OPERATIONS
 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 / 20 / 2015
Transaction ID : AC826BD87FFB449BA9FD
 Amount of Each Receipt this Period
 38.00
 Payroll Deduction: \$19.00/Bi-Weekly

C. STEPHEN D PRESTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 3680 Village Center Ln
 City Hoover State AL Zip Code 35226-6343
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BROOKWOOD MEDICAL CENTER Occupation VP, EXTERNAL AFFAIRS
 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 / 20 / 2015
Transaction ID : AE5DDDF A970DF4151821
 Amount of Each Receipt this Period
 38.00
 Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	1076.00
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 48
	<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. MICHAEL MALONEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 1445 Ross Avenue
 Suite 1400
 City Dallas State TX Zip Code 75202-2703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHCARE CORPORATION Occupation VP, Acquisition and Development
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **247.00**

Date of Receipt **06 / 27 / 2015**
Transaction ID : A01ED88C10B6344FE8D1
 Amount of Each Receipt this Period **38.00**
 Payroll Deduction: \$19.00/Bi-Weekly

B. RUBEN O RODRIGUEZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 6905 Villa Hermosa Dr
 City El Paso State TX Zip Code 79912-2341
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SIERRA PROVIDENCE EASTSIDE HOSPITAL Occupation DIR, PLANT OPERATIONS
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **507.00**

Date of Receipt **06 / 27 / 2015**
Transaction ID : AE3F783CB1FA84FBFB3E
 Amount of Each Receipt this Period **78.00**
 Payroll Deduction: \$39.00/Bi-Weekly

C. JOHN QUINN
 Full Name (Last, First, Middle Initial)
 Mailing Address 1138 Pine Valley Rd
 City Griffin State GA Zip Code 30224-4953
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SPALDING REGIONAL HOSPITAL Occupation CEO
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **494.00**

Date of Receipt **06 / 27 / 2015**
Transaction ID : A910862BBFC524EE5AF4
 Amount of Each Receipt this Period **76.00**
 Payroll Deduction: \$38.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	192.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 48
	<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. REGINALD J. EADIE

Mailing Address 6940 KENNESAW

City Canton	State MI	Zip Code 48187-1283
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FEC ID number of contributing federal political committee. **C**

Name of Employer Detroit Medical Center	Occupation CEO
--	-------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.12**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 27 / 2015

Transaction ID : AAFB2624A0C674727813

Amount of Each Receipt this Period
38.48

Payroll Deduction: \$19.24/Bi-Weekly

Full Name (Last, First, Middle Initial)
B. AUDREY T ANDREWS

Mailing Address 702 Penfolds Ln

City Coppell	State TX	Zip Code 75019-4544
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FEC ID number of contributing federal political committee. **C**

Name of Employer TENET HEALTHCARE CORPORATION	Occupation GENERAL COUNSEL
--	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2496.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 27 / 2015

Transaction ID : A4E4CA13AD75C4230830

Amount of Each Receipt this Period
384.00

Payroll Deduction: \$192.00/Bi-Weekly

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

Mailing Address 391 E Milgeo Ave

City Ripon	State CA	Zip Code 95366-2120
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FEC ID number of contributing federal political committee. **C**

Name of Employer DOCTORS HOSPITAL OF MANTECA	Occupation CEO
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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 / 27 / 2015

Transaction ID : A3E97811BDEDF40838C4

Amount of Each Receipt this Period
78.00

Payroll Deduction: \$39.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	500.48
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 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. DEBORAH DALEY
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 757

City Edgewood State TX Zip Code 75117-0757

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation ASST - ADMINISTRATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
06 / 27 / 2015
Transaction ID : AA69AA4A1CEA644A7959

Amount of Each Receipt this Period 40.00

Payroll Deduction: \$20.00/Bi-Weekly

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

Mailing Address 2 Alato Drive

City Mission Viejo State CA Zip Code 92692-5104

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

Name of Employer Lakewood Medical Center Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 507.00

Date of Receipt
06 / 27 / 2015
Transaction ID : A563620BC1C8246458D8

Amount of Each Receipt this Period 78.00

Payroll Deduction: \$39.00/Bi-Weekly

C. 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 ▼ 1248.00

Date of Receipt
06 / 27 / 2015
Transaction ID : A33A811E79AD04B0887E

Amount of Each Receipt this Period 192.00

Payroll Deduction: \$96.00/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 10 OF 48
	<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. PAMELA DAVIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 5909 LUTHER AVE #2304
 City Dallas State TX Zip Code 75225-5914
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CONIFER Occupation Senior Director, Government Operations
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1248.00**

Date of Receipt **06 / 27 / 2015**
Transaction ID : A1C5CBF1346434B50AB3
 Amount of Each Receipt this Period **192.00**
 Payroll Deduction: \$96.00/Bi-Weekly

B. STEPHEN W KROUSE
 Full Name (Last, First, Middle Initial)
 Mailing Address 632 Hirst Ave
 City Havertown State PA Zip Code 19083-4126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ST. CHRISTOPHER'S HOSPITAL FOR CHILDRE Occupation CHIEF HR OFFICER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **247.00**

Date of Receipt **06 / 27 / 2015**
Transaction ID : AC662664F56BA485C831
 Amount of Each Receipt this Period **38.00**
 Payroll Deduction: \$19.00/Bi-Weekly

C. LORI HOLMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 7213 ELLIS ROAD
 City Fort Worth State TX Zip Code 76112-4301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHCARE CORPORATION Occupation Manager, Human Resources
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **247.00**

Date of Receipt **06 / 27 / 2015**
Transaction ID : A18A3F245CAA0489083B
 Amount of Each Receipt this Period **38.00**
 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:	PAGE 11 OF 48
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<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. MARY E. CLEARY
Full Name (Last, First, Middle Initial)

Mailing Address 940 Bonnie Brae Place,
City River Forest State IL Zip Code 60305-1512

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation CFO Chicago Market

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **312.00**

Date of Receipt **06 / 27 / 2015**
Transaction ID : AC55AFAB1D6D748E5871

Amount of Each Receipt this Period **78.00**

Payroll Deduction: \$39.00/Bi-Weekly

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

Mailing Address 314 VAILWOOD CT
City Bloomfield Hills State MI Zip Code 48302-1573

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

Name of Employer Tenet Healthcare Corporation Occupation CFO- Northeast Region

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **507.00**

Date of Receipt **06 / 27 / 2015**
Transaction ID : A599D91DF54324674A8C

Amount of Each Receipt this Period **78.00**

Payroll Deduction: \$39.00/Bi-Weekly

C. LARRY M. GOLD
Full Name (Last, First, Middle Initial)

Mailing Address 4348 Karen Lane
City Bloomfield Hills State MI Zip Code 48302-1961

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

Name of Employer Children's Hospital of Michigan Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **247.00**

Date of Receipt **06 / 27 / 2015**
Transaction ID : A343F7518F8624792B5B

Amount of Each Receipt this Period **38.00**

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 12 OF 48
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. KEITH PITTS		Date of Receipt
Mailing Address 4441 South Versailles Ave		<input type="text" value="06"/> / <input type="text" value="27"/> / <input type="text" value="2015"/>
City	State	Zip Code
Dallas	TX	75205-3012
FEC ID number of contributing federal political committee.		Transaction ID : A8FFDA35A8B3D49F7B4F
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="384.00"/>
Name of Employer		Payroll Deduction: \$192.00/Bi-Weekly
Tenet Healthcare Corporation		
Occupation		
Vice Chairman		
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="2496.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. JOHN W. TURNER Jr.		Date of Receipt
Mailing Address 1445 Ross Ave, Suite 1400		<input type="text" value="06"/> / <input type="text" value="27"/> / <input type="text" value="2015"/>
City	State	Zip Code
Dallas	TX	75202-2703
FEC ID number of contributing federal political committee.		Transaction ID : AEE41038786714BADA01
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="78.00"/>
Name of Employer		Payroll Deduction: \$39.00/Bi-Weekly
Tenet Healthcare Corp		
Occupation		
Senior Director, Practice Operations		
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="507.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. JOSEPH J. MULLANY		Date of Receipt
Mailing Address 2169 Tottenham Road		<input type="text" value="06"/> / <input type="text" value="27"/> / <input type="text" value="2015"/>
City	State	Zip Code
Bloomfield Hills	MI	48301-2332
FEC ID number of contributing federal political committee.		Transaction ID : A1FF9E96B324048CB809
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="192.00"/>
Name of Employer		Payroll Deduction: \$96.00/Bi-Weekly
Detroit Medical Center		
Occupation		
CEO		
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1248.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="654.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

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

FOR LINE NUMBER: PAGE 13 OF 48
(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. KENT G CLAYTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 3 Turtle Bay Dr
 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 ▼ 494.00

Date of Receipt 06 / 27 / 2015
Transaction ID : A624535B0C41A4E1B8DF
 Amount of Each Receipt this Period 76.00
 Payroll Deduction: \$38.00/Bi-Weekly

B. ANDREI SORAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 28 Lothrop Street
 City Newtonville State MA Zip Code 02460-1420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Detroit Medical Center Occupation COO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 507.00

Date of Receipt 06 / 27 / 2015
Transaction ID : A29699C50EF67409E9A0
 Amount of Each Receipt this Period 78.00
 Payroll Deduction: \$39.00/Bi-Weekly

C. MARK H BRYAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 7480 Kings Mountain Rd
 City Vestavia State AL Zip Code 35242-2581
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DELRAY MEDICAL CENTER Occupation CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 247.00

Date of Receipt 06 / 27 / 2015
Transaction ID : A18182CC686E946B6B64
 Amount of Each Receipt this Period 38.00
 Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ▶ 192.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 48
	<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. RICHARD D CARTER
Full Name (Last, First, Middle Initial)
Mailing Address 5166 E Lake Blvd

City Birmingham	State AL	Zip Code 35217-3543
--------------------	-------------	------------------------

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

Name of Employer BROOKWOOD MEDICAL CENTER	Occupation CFO
--	-------------------

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 / 27 / 2015
Transaction ID : ADBC952DA1DF441C7BC7

Amount of Each Receipt this Period
38.00

Payroll Deduction: \$19.00/Bi-Weekly

B. MARIO ESTRELL
Full Name (Last, First, Middle Initial)
Mailing Address 2714 Chaparral Dr

City Nacogdoches	State TX	Zip Code 75965-3722
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FEC ID number of contributing federal political committee. **C**

Name of Employer Tenet W2p	Occupation RETIREE
-------------------------------	-----------------------

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 / 27 / 2015
Transaction ID : AF3AE541EF8F2404FAB8

Amount of Each Receipt this Period
38.00

Payroll Deduction: \$19.00/Bi-Weekly

C. FRANK L. MOLINARO
Full Name (Last, First, Middle Initial)
Mailing Address 1445 Ross Avenue
Suite 1400

City Dallas	State TX	Zip Code 75202-2703
----------------	-------------	------------------------

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

Name of Employer Arrowhead Hospital	Occupation CEO
--	-------------------

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 / 27 / 2015
Transaction ID : A0251E682BF634CE38E4

Amount of Each Receipt this Period
78.00

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 15 OF 48
	<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. JAIKUMAR KRISHNASWAMY
 Full Name (Last, First, Middle Initial)
 Mailing Address 13123 Avalange Ct
 City Cypress State TX Zip Code 77429-4913
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CYPRESS FAIRBANKS MEDICAL CENTER Occupation COO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **247.00**

Date of Receipt **06 / 27 / 2015**
Transaction ID : AD4459F97EF84439286B
 Amount of Each Receipt this Period **38.00**
 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 / 27 / 2015**
Transaction ID : ADAA702ACBD3D45BC859
 Amount of Each Receipt this Period **38.00**
 Payroll Deduction: \$19.00/Bi-Weekly

C. JASON D. 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 CORPORATION Occupation SENIOR COUNSEL
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **273.00**

Date of Receipt **06 / 27 / 2015**
Transaction ID : A63F0E40B8E094CCE87D
 Amount of Each Receipt this Period **78.00**
 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 16 OF 48
	<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. 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 CORPORATION Occupation VP, IT TECHNOLOGY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **585.00**

Date of Receipt **06 / 27 / 2015**
Transaction ID : A9CDEEA357FE34CA1830
 Amount of Each Receipt this Period **90.00**
 Payroll Deduction: \$45.00/Bi-Weekly

B. JANIE PATTERSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 1403 Crockett Dr
 City Frisco State TX Zip Code 75033-1566
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET PATIENT FINCL SVCS Occupation SVP, REVENUE CYCLE MGMT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **247.00**

Date of Receipt **06 / 27 / 2015**
Transaction ID : A24A0B7A3451B4C76857
 Amount of Each Receipt this Period **38.00**
 Payroll Deduction: \$19.00/Bi-Weekly

C. PAUL D. SLAVIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 508 Forrest Ave
 City Cleburne State TX Zip Code 76033-5345
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHCARE CORPORATION Occupation VP COMPENSATION BENEFITS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **247.00**

Date of Receipt **06 / 27 / 2015**
Transaction ID : A81C3683D873742F183D
 Amount of Each Receipt this Period **38.00**
 Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... **166.00**
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 48
	<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. MONICA C VARGAS
Full Name (Last, First, Middle Initial)

Mailing Address 4017 Flamingo Dr

City El Paso	State TX	Zip Code 79902-1313
-----------------	-------------	------------------------

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

Name of Employer SIERRA PROVIDENCE EASTSIDE HOSPITAL	Occupation COO
---	-------------------

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	/	27	/	2015

Transaction ID : A26A9F9F7EA2B492B8C9

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

B. TREVOR FETTER
Full Name (Last, First, Middle Initial)

Mailing Address 3821 Beverly Dr

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 ▼ **4329.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2015

Transaction ID : A2F37E902E756462F83B

Amount of Each Receipt this Period

666.00

Payroll Deduction: \$333.00/Bi-Weekly

C. PATRICK J. MALONEY
Full Name (Last, First, Middle Initial)

Mailing Address 581 S ARLINGTON AVE

City Elmhurst	State IL	Zip Code 60126-4040
------------------	-------------	------------------------

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

Name of Employer West Suburban Hospital	Occupation CEO
--	-------------------

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	/	27	/	2015

Transaction ID : AB00478076FCA48C69CD

Amount of Each Receipt this Period

78.00

Payroll Deduction: \$39.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	782.00
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 48
	<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. JASON E EVANS
Full Name (Last, First, Middle Initial)

Mailing Address 676 Bryn Mahr Ln

City Rockwall State TX Zip Code 75087-6018

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

Name of Employer LAKE POINTE MEDICAL CENTER Occupation CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 507.00

Date of Receipt 06 / 27 / 2015
Transaction ID : AB7D811E3E1D84C37922

Amount of Each Receipt this Period 78.00

Payroll Deduction: \$39.00/Bi-Weekly

B. ERIK G. WEXLER
Full Name (Last, First, Middle Initial)

Mailing Address 110 STUART ST, UNIT 25E

City Boston State MA Zip Code 02116-5675

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

Name of Employer Tenet Healthcare Corp Occupation CEO, Northeast Region

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 507.00

Date of Receipt 06 / 27 / 2015
Transaction ID : A817C56969DD54CDEBF2

Amount of Each Receipt this Period 78.00

Payroll Deduction: \$39.00/Bi-Weekly

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

Mailing Address 3806 Harlan Dr

City Sachse State TX Zip Code 75048-1912

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation SR DIR, BUSINESS DEV

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 247.00

Date of Receipt 06 / 27 / 2015
Transaction ID : A5925B44B16224ECFAAF

Amount of Each Receipt this Period 38.00

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 19 OF 48
	<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 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 ▼ 494.00

Date of Receipt 06 / 27 / 2015
Transaction ID : AAF2A049D2D514EADA39

Amount of Each Receipt this Period 76.00

Payroll Deduction: \$38.00/Bi-Weekly

B. KENNETH F SUTHERLAND
Full Name (Last, First, Middle Initial)

Mailing Address 102 Wilmington Ct

City Southlake State TX Zip Code 76092-8492

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation VP, CONSTRUCTION & DESIG

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 494.00

Date of Receipt 06 / 27 / 2015
Transaction ID : A31E5F793387D4521956

Amount of Each Receipt this Period 76.00

Payroll Deduction: \$38.00/Bi-Weekly

C. MICHAEL J KING
Full Name (Last, First, Middle Initial)

Mailing Address 2713 Stuyvesant Cir

City Modesto State CA Zip Code 95356-0337

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

Name of Employer DOCTORS MEDICAL CENTER-MODESTO Occupation COO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 247.00

Date of Receipt 06 / 27 / 2015
Transaction ID : A21B8AAA112EC4A19B89

Amount of Each Receipt this Period 38.00

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ▶ 190.00

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 48
	<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 Dallas State TX Zip Code 75219-3005

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation VP, Marketing and Business Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **247.00**

Date of Receipt **06 / 27 / 2015**

Transaction ID : A0A163928E0E84D409F3

Amount of Each Receipt this Period **38.00**

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)
B. ALAN R CASON

Mailing Address 255 Evernia St Apt 1503

City West Palm Bch State FL Zip Code 33401-5691

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

Name of Employer Pinnacle M.S.O Occupation VP & CEO MIDTOWN IMAGING

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **247.00**

Date of Receipt **06 / 27 / 2015**

Transaction ID : A2FE7524270BD4AA99F9

Amount of Each Receipt this Period **38.00**

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)
C. JOE D THOMASON

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 ▼ **494.00**

Date of Receipt **06 / 27 / 2015**

Transaction ID : A7B3B9B6494F347AEAB3

Amount of Each Receipt this Period **76.00**

Payroll Deduction: \$38.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... **152.00**

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 48
	<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. BRITT REYNOLDS

Mailing Address 3201 Wentwood Dr

City Dallas State TX Zip Code 75225-4845

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

Name of Employer **TENET HEALTHCARE CORPORATION** Occupation **PRESIDENT OF HOSPITAL OPERATIONS**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1249.95**

Date of Receipt **06 / 27 / 2015**

Transaction ID : ACFA0D87766054EFEACC

Amount of Each Receipt this Period **192.30**

Payroll Deduction: \$96.15/Bi-Weekly

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

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 Corp** Occupation **Director, Physician Business Developem**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **247.00**

Date of Receipt **06 / 27 / 2015**

Transaction ID : ADAFCE59258954015AF9

Amount of Each Receipt this Period **38.00**

Payroll Deduction: \$19.00/Bi-Weekly

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

Mailing Address 7935 East Dr Apt 901

City North Bay Village State FL Zip Code 33141-3693

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 / 27 / 2015**

Transaction ID : A560A8E5C29794F958EB

Amount of Each Receipt this Period **76.00**

Payroll Deduction: \$38.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	306.30
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 48
	<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. LERRY CROCKER
 Full Name (Last, First, Middle Initial)
 Mailing Address 2386 Liledoun Rd
 City State Zip Code
 Taylorsville NC 28681-8892
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 FRYE REGIONAL MEDICAL CENTER CNO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1248.00

Date of Receipt
 06 / 27 / 2015
Transaction ID : A967F25D33364F1289A
 Amount of Each Receipt this Period
 192.00
 Payroll Deduction: \$96.00/Bi-Weekly

B. TERRY WHEELER
 Full Name (Last, First, Middle Initial)
 Mailing Address 13802 Magnolia Manor Dr
 City State Zip Code
 Cypress TX 77429-8162
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CYPRESS FAIRBANKS MEDICAL CENTER CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 455.00

Date of Receipt
 06 / 27 / 2015
Transaction ID : A2296424994A041D1A40
 Amount of Each Receipt this Period
 70.00
 Payroll Deduction: \$35.00/Bi-Weekly

C. CONRAD MALLET
 Full Name (Last, First, Middle Initial)
 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
 Detroit Medical Center Chief Administrative Officer
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.11

Date of Receipt
 06 / 27 / 2015
Transaction ID : A0B66F2BDA97F441191A
 Amount of Each Receipt this Period
 76.94
 Payroll Deduction: \$38.47/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	338.94
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 23 OF 48
(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. ALTA A. GORDON
 Full Name (Last, First, Middle Initial)
 Mailing Address 30014 GARDENIA LN
 City Southfield State MI Zip Code 48076-2091
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Detroit Medical Center Occupation CNO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.11

Date of Receipt 06 / 27 / 2015
Transaction ID : A5F8204FFD7CD4019AC3
 Amount of Each Receipt this Period 76.94
 Payroll Deduction: \$38.47/Bi-Weekly

B. KEN E JORDAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 67 Sutton Pl E
 City Palm Desert State CA Zip Code 92211-9046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DESERT REGIONAL MEDICAL CENTER Occupation CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 247.00

Date of Receipt 06 / 27 / 2015
Transaction ID : A0632024C43B34CFBACA
 Amount of Each Receipt this Period 38.00
 Payroll Deduction: \$19.00/Bi-Weekly

C. STEPHEN M MOONEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 4619 Briar Oaks Cir
 City Dallas State TX Zip Code 75287-7503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CONIFER Occupation PRESIDENT, CONIFER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 507.00

Date of Receipt 06 / 27 / 2015
Transaction ID : A0D73CB9074874700BFE
 Amount of Each Receipt this Period 78.00
 Payroll Deduction: \$39.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ▶ 192.94
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 48
	<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. ALBERT BARROCAS
 Full Name (Last, First, Middle Initial)
 Mailing Address 4050 Spalding Dr
 City Atlanta State GA Zip Code 30350-1100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SOUTH FULTON MEDICAL CENTER Occupation CHIEF MEDICAL OFFICER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **247.00**

Date of Receipt **06 / 27 / 2015**
Transaction ID : A939DBF894F8745CEA6A
 Amount of Each Receipt this Period **38.00**
 Payroll Deduction: \$19.00/Bi-Weekly

B. STAN V. HOLM
 Full Name (Last, First, Middle Initial)
 Mailing Address 1445 Ross Avenue Suite 1400
 City Dallas State TX Zip Code 75202-2703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer West Valley Hospital Occupation CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **247.00**

Date of Receipt **06 / 27 / 2015**
Transaction ID : A0386D106B2FA489C82C
 Amount of Each Receipt this Period **38.00**
 Payroll Deduction: \$19.00/Bi-Weekly

C. EDWARD MESCO
 Full Name (Last, First, Middle Initial)
 Mailing Address 7365 NW 54th St
 City Lauderhill State FL Zip Code 33319-6346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHCARE CORPORATION Occupation DIR, REG REIMBURSEMENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **325.00**

Date of Receipt **06 / 27 / 2015**
Transaction ID : A1ED993AD576C442F8CF
 Amount of Each Receipt this Period **50.00**
 Payroll Deduction: \$25.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... **126.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 48
	<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. CATHRYN H FRASER
 Full Name (Last, First, Middle Initial)
 Mailing Address 272 Enclaves Ct
 City Coppel 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 **1248.00**

Date of Receipt **06 / 27 / 2015**
Transaction ID : A2CA734196F6E4190BF6
 Amount of Each Receipt this Period **192.00**
 Payroll Deduction: \$96.00/Bi-Weekly

B. COREY L DAVISON
 Full Name (Last, First, Middle Initial)
 Mailing Address 2700 Crepe Myrtle Dr
 City Flower Mound State TX Zip Code 75028-3617
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHCARE CORPORATION Occupation VP, GOVT RELATIONS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **507.00**

Date of Receipt **06 / 27 / 2015**
Transaction ID : A4952F18A30114DD1B3A
 Amount of Each Receipt this Period **78.00**
 Payroll Deduction: \$39.00/Bi-Weekly

C. DOUGLAS E RABE
 Full Name (Last, First, Middle Initial)
 Mailing Address 7746 Eagle Trl
 City Dallas State TX Zip Code 75238-4115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHCARE CORPORATION Occupation VP, TAXATION
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt **06 / 27 / 2015**
Transaction ID : ABCE530C9B6AA4CAAB21
 Amount of Each Receipt this Period **40.00**
 Payroll Deduction: \$20.00/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:	PAGE 26 OF 48
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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. GARY L HONTS JR.			Date of Receipt MM / DD / YYYY 06 / 27 / 2015 Transaction ID : A6AE657A5F75844E08C8
Mailing Address 7707 N 127th Ave			Amount of Each Receipt this Period 192.00
City Omaha	State NE	Zip Code 68142-1723	Payroll Deduction: \$96.00/Bi-Weekly
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 1248.00	
Name of Employer JFK Memorial Hospital	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. GARY K RUFF			Date of Receipt MM / DD / YYYY 06 / 27 / 2015 Transaction ID : A1C7673133C5A4D28927
Mailing Address 714 Kent Ct			Amount of Each Receipt this Period 192.00
City Southlake	State TX	Zip Code 76092-8868	Payroll Deduction: \$96.00/Bi-Weekly
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 1248.00	
Name of Employer TENET HEALTHCARE CORPORATION	Occupation SVP, PHYSICIAN RESOURCES		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. VANESSA BENAVIDES			Date of Receipt MM / DD / YYYY 06 / 27 / 2015 Transaction ID : A47C01E1445414E179B7
Mailing Address 3818 Cedar Spr # 101-32			Amount of Each Receipt this Period 78.00
City Dallas	State TX	Zip Code 75219-0000	Payroll Deduction: \$39.00/Bi-Weekly
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 507.00	
Name of Employer TENET HEALTHCARE CORPORATION	Occupation CORP COMPLIANCE OFFICER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

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 27 OF 48
	<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. WILLIAM T MOORE
 Full Name (Last, First, Middle Initial)
 Mailing Address 3014 Castle Pines Dr
 City Duluth State GA Zip Code 30097-2039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ATLANTA MEDICAL CENTER Occupation MARKET CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 27 / 2015
Transaction ID : A56D682B571CA4B408A7
 Amount of Each Receipt this Period 40.00
 Payroll Deduction: \$20.00/Bi-Weekly

B. TIM ADAMS
 Full Name (Last, First, Middle Initial)
 Mailing Address 2408 University Club Dr
 City Austin State TX Zip Code 78732-2052
 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 ▼ 1248.00

Date of Receipt 06 / 27 / 2015
Transaction ID : AE591E3EC38914A8D9E9
 Amount of Each Receipt this Period 192.00
 Payroll Deduction: \$96.00/Bi-Weekly

C. THALIA C. MARTIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 1445 Ross Avenue Suite 1400
 City Dallas State TX Zip Code 75202-2703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SIERRA PROVIDENCE EASTSIDE HOSPITAL Occupation Market Dir., Quality and Patient Safet
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 247.00

Date of Receipt 06 / 27 / 2015
Transaction ID : A30FE3E82AC1645559B4
 Amount of Each Receipt this Period 38.00
 Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	270.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 48
	<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. LUANNE M. EWALD

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 Detroit Medical Center Occupation Director of Business Development

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **500.11**

Date of Receipt **06 / 27 / 2015**

Transaction ID : ADA066C2C9E7E4C99A53

Amount of Each Receipt this Period **76.94**

Payroll Deduction: \$38.47/Bi-Weekly

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

Mailing Address 2411 N Hall St Apt 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 ▼ **260.00**

Date of Receipt **06 / 27 / 2015**

Transaction ID : A8C94A18CB7C945FDA6D

Amount of Each Receipt this Period **40.00**

Payroll Deduction: \$20.00/Bi-Weekly

Full Name (Last, First, Middle Initial)
C. ROBERT B SHAPPLEY

Mailing Address 1043 Humphrey Oaks Cir

City Memphis State TN Zip Code 38120-2626

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

Name of Employer SAINT FRANCIS HOSPITAL Occupation ASSOC. ADMINISTRATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **247.00**

Date of Receipt **06 / 27 / 2015**

Transaction ID : A37BFD2FE57EE42B5A61

Amount of Each Receipt this Period **38.00**

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... **154.94**

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 48
	<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. DOUGLAS BREWER
Full Name (Last, First, Middle Initial)

Mailing Address 351 SAWMILL ROAD

City Dillsburg State PA Zip Code 17019-9582

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

Name of Employer ATLANTA MEDICAL CENTER Occupation Director of Business Development

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **507.00**

Date of Receipt **06 / 27 / 2015**

Transaction ID : A683AE5F15AEE4E96864

Amount of Each Receipt this Period **78.00**

Payroll Deduction: \$39.00/Bi-Weekly

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

Mailing Address 1445 Ross Avenue Suite 1400

City Dallas State TX Zip Code 75202-2703

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

Name of Employer HOUSTON NORTHWEST MEDICAL CENTER Occupation CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **507.00**

Date of Receipt **06 / 27 / 2015**

Transaction ID : A929E553229C643C0814

Amount of Each Receipt this Period **78.00**

Payroll Deduction: \$39.00/Bi-Weekly

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

Mailing Address 981 Patrician Ct

City McKinney State TX Zip Code 75069-8781

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

Name of Employer CONIFER Occupation SVP & CFO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt **06 / 27 / 2015**

Transaction ID : A24431084C58C400A952

Amount of Each Receipt this Period **50.00**

Payroll Deduction: \$25.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... **206.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 48
	<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. IRIS A. TAYLOR
 Full Name (Last, First, Middle Initial)
 Mailing Address 549 Fiske Drive
 City Detroit State MI Zip Code 48214-2988
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Detroit Receiving Hospital Occupation: CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **468.00**

Date of Receipt: 06 / 27 / 2015
Transaction ID : A22F33E76892744F1A7E
 Amount of Each Receipt this Period: **78.00**
 Payroll Deduction: \$39.00/Bi-Weekly

B. DANIEL JACKSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 11041 Heathland Dr
 City Oakton State VA Zip Code 22124-2430
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: SIERRA PROVIDENCE EASTSIDE HOSPITAL Occupation: COO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **247.00**

Date of Receipt: 06 / 27 / 2015
Transaction ID : A15DEFB7D3F9F4BE1B0D
 Amount of Each Receipt this Period: **38.00**
 Payroll Deduction: \$19.00/Bi-Weekly

C. ELIZABETH JOHNSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 3302 Marsh Ln
 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 **494.00**

Date of Receipt: 06 / 27 / 2015
Transaction ID : A3FF293CDF629450B929
 Amount of Each Receipt this Period: **76.00**
 Payroll Deduction: \$38.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	192.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 48
	<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. ROB FINNEGAN
Full Name (Last, First, Middle Initial)
Mailing Address 2804 Carriage Trl
City McKinney State TX Zip Code 75070-4306
FEC ID number of contributing federal political committee. **C**
Name of Employer TENET HEALTHCARE CORPORATION Occupation SR DIR, FINANCE ASC
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **247.00**

Date of Receipt **06 / 27 / 2015**
Transaction ID : A0A38E8125BAF4E09B48
Amount of Each Receipt this Period **38.00**
Payroll Deduction: \$19.00/Bi-Weekly

B. 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 CORPORATION Occupation DIR, RELOCATION
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **260.00**

Date of Receipt **06 / 27 / 2015**
Transaction ID : A0973192400414818839
Amount of Each Receipt this Period **40.00**
Payroll Deduction: \$20.00/Bi-Weekly

C. MICHAEL S HONGOLA
Full Name (Last, First, Middle Initial)
Mailing Address 6704 Westmont Dr
City Colleyville State TX Zip Code 76034-7263
FEC ID number of contributing federal political committee. **C**
Name of Employer TENET HEALTHCARE CORPORATION Occupation VP, INFO SYSTEMS
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **260.00**

Date of Receipt **06 / 27 / 2015**
Transaction ID : A1CD0853E8435483FAD0
Amount of Each Receipt this Period **40.00**
Payroll Deduction: \$20.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... **118.00**
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 48
	<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 CORPORATION Occupation VP & ASST GENERAL COUNSE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **247.00**

Date of Receipt **06 / 27 / 2015**
Transaction ID : AFB6D5A0B77C6460C809
 Amount of Each Receipt this Period **38.00**
 Payroll Deduction: \$19.00/Bi-Weekly

B. ENRIQUE MARTINEZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 1445 Ross Avenue Suite 1400
 City Dallas State TX Zip Code 75202-2703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PROVIDENCE MEMORIAL HOSPITAL Occupation CMO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **247.00**

Date of Receipt **06 / 27 / 2015**
Transaction ID : A27FACBE1607843E7A90
 Amount of Each Receipt this Period **38.00**
 Payroll Deduction: \$19.00/Bi-Weekly

C. PHILLIP SOWA
 Full Name (Last, First, Middle Initial)
 Mailing Address 4909 Laclede Ave Apt 805
 City Saint Louis State MO Zip Code 63108-1446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SAINT LOUIS UNIVERSITY HOSPITAL Occupation CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **507.00**

Date of Receipt **06 / 27 / 2015**
Transaction ID : A68FD650135974707957
 Amount of Each Receipt this Period **78.00**
 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 33 OF 48
	<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. CRAIG C ARMIN

Mailing Address 23510 Berdon St

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, GOVT PROGRAMS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **520.00**

Date of Receipt: **06 / 27 / 2015**

Transaction ID : ACC2EA280F270464CA11

Amount of Each Receipt this Period: **80.00**

Payroll Deduction: \$40.00/Bi-Weekly

Full Name (Last, First, Middle Initial)
B. ANDREAS M GRAF

Mailing Address 3975 Stockton Ln

City Dallas State TX Zip Code 75287-4921

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

Name of Employer: TENET HEALTHCARE CORPORATION
Occupation: MGR, TRAVEL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **247.00**

Date of Receipt: **06 / 27 / 2015**

Transaction ID : AC34971222C994FD0B4C

Amount of Each Receipt this Period: **38.00**

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)
C. PAUL A CASTANON

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 CORPORATION
Occupation: VP & DEPUTY GNRL COUNSEL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **247.00**

Date of Receipt: **06 / 27 / 2015**

Transaction ID : A428C3AAF06ED480CA36

Amount of Each Receipt this Period: **38.00**

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 34 OF 48
	<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. MARK R. MONTONEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 1234 Potter Lane
 City Gallatin State TN Zip Code 37066-7499
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Tenet Healthcare Corporation Occupation CMO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 963.00

Date of Receipt 06 / 27 / 2015
Transaction ID : A0F4DCACE42F7481B8CD
 Amount of Each Receipt this Period 192.00
 Payroll Deduction: \$96.00/Bi-Weekly

B. ROBERT HOEFER
 Full Name (Last, First, Middle Initial)
 Mailing Address 11216 Hermitage Hill Place
 City Saint Louis State MO Zip Code 63131-3322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer St. Louis University Hospital Occupation COO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 507.00

Date of Receipt 06 / 27 / 2015
Transaction ID : A2D1BB77A462244E0905
 Amount of Each Receipt this Period 78.00
 Payroll Deduction: \$39.00/Bi-Weekly

C. DENISE F BERGER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1504 Country Bend Dr
 City Saint Charles State MO Zip Code 63303-2512
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DES PERES HOSPITAL Occupation HOSPITAL COMPLIANCE OFF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 507.00

Date of Receipt 06 / 27 / 2015
Transaction ID : A404B1C217C8E4F5D99B
 Amount of Each Receipt this Period 78.00
 Payroll Deduction: \$39.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	348.00
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 48
	<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. KEITH STANHILL
 Full Name (Last, First, Middle Initial)
 Mailing Address 10423 REDMOND DRIVE
 City Cordova State TN Zip Code 38016-5436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer St. Francis-Equicare Occupation CHIEF HR OFFICER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **247.00**

Date of Receipt **06 / 27 / 2015**
Transaction ID : AAF424790E0044A15B3B
 Amount of Each Receipt this Period **38.00**
 Payroll Deduction: \$19.00/Bi-Weekly

B. HAROLD K. BANDY
 Full Name (Last, First, Middle Initial)
 Mailing Address 9004 OLD SMRYNA RD
 City Brentwood State TN Zip Code 37027-6058
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Tenet Healthcare Corp Occupation Senior Director, IS Architecture
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **912.00**

Date of Receipt **06 / 27 / 2015**
Transaction ID : A67A6E71BDC004C22B4E
 Amount of Each Receipt this Period **192.00**
 Payroll Deduction: \$96.00/Bi-Weekly

C. LINDA K MERCIER
 Full Name (Last, First, Middle Initial)
 Mailing Address 14 Columbia Crest Pl
 City Spring State TX Zip Code 77382-1334
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HOUSTON NW MEDICAL CENTER Occupation CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **429.00**

Date of Receipt **06 / 27 / 2015**
Transaction ID : A90DD7E74162444F28EB
 Amount of Each Receipt this Period **78.00**
 Payroll Deduction: \$39.00/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 36 OF 48
	<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. NORMA A ZERINGUE
 Full Name (Last, First, Middle Initial)
 Mailing Address 5757 Southwestern Blvd
 City Dallas State TX Zip Code 75209-3437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CONIFER Occupation SVP, STRATEGY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **247.00**

Date of Receipt **06 / 27 / 2015**
Transaction ID : ACC78AFC4FC3443C1BF0
 Amount of Each Receipt this Period **38.00**
 Payroll Deduction: \$19.00/Bi-Weekly

B. KAREN R FOWLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 8306 Turquoise St
 City El Paso State TX Zip Code 79904-2513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PROVIDENCE MEMORIAL HOSPITAL Occupation ASST VP NURSING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **247.00**

Date of Receipt **06 / 27 / 2015**
Transaction ID : AA451E14EFA404FCB9DD
 Amount of Each Receipt this Period **38.00**
 Payroll Deduction: \$19.00/Bi-Weekly

C. DAVID KATZIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 3080 Canterbury Dr
 City Boca Raton State FL Zip Code 33434
 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 **247.00**

Date of Receipt **06 / 27 / 2015**
Transaction ID : ACFE242220C19496190D
 Amount of Each Receipt this Period **38.00**
 Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... **114.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 37 OF 48
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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 PHILLIPS
Full Name (Last, First, Middle Initial)

Mailing Address 1445 Ross Avenue
Suite 1400

City Dallas State TX Zip Code 75202-2703

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

Name of Employer FLORIDA MEDICAL CENTER Occupation CNO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 247.00

Date of Receipt
06 / 27 / 2015
Transaction ID : **AF5C1472AAF7542E0AFB**

Amount of Each Receipt this Period 38.00

Payroll Deduction: \$19.00/Bi-Weekly

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

Mailing Address 3507 Munstead Trl

City Frisco State TX Zip Code 75033-1166

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

Name of Employer CONIFER Occupation SVP, HOSPITAL OPS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 247.00

Date of Receipt
06 / 27 / 2015
Transaction ID : **AB9C5A178CCEC4DF8B5F**

Amount of Each Receipt this Period 38.00

Payroll Deduction: \$19.00/Bi-Weekly

C. MR COLLIN O LEMAISTRE
Full Name (Last, First, Middle Initial)

Mailing Address 288 Boulder Ln

City Nacogdoches State TX Zip Code 75965-7006

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

Name of Employer NACOGDOCHES MEDICAL CENTER Occupation COO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 387.00

Date of Receipt
06 / 27 / 2015
Transaction ID : **A98F4226BB3F6411B975**

Amount of Each Receipt this Period 78.00

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 38 OF 48
	<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. RODNEY A REASONER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1960 Mary Lee Ln
 City State Zip Code
 Allen TX 75002-8528
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 TENET HEALTHCARE CORPORATION VP, FINANCE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 494.00

Date of Receipt
 06 / 27 / 2015
Transaction ID : A2AAD411F26E5446B9F0
 Amount of Each Receipt this Period
 76.00
 Payroll Deduction: \$38.00/Bi-Weekly

B. KELVIN A BAGGETT
 Full Name (Last, First, Middle Initial)
 Mailing Address 6453 Tulip Ln
 City State Zip Code
 Dallas TX 75230-4148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 TENET HEALTHCARE CORPORATION SVP, CHIEF MEDICAL OFCR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 507.00

Date of Receipt
 06 / 27 / 2015
Transaction ID : A5038BDC30B3A40789BF
 Amount of Each Receipt this Period
 78.00
 Payroll Deduction: \$39.00/Bi-Weekly

C. DAVID L ARCHER
 Full Name (Last, First, Middle Initial)
 Mailing Address 2594 Hocksett Cv
 City State Zip Code
 Germantown TN 38139-6655
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SAINT FRANCIS HOSPITAL MARKET CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1248.00

Date of Receipt
 06 / 27 / 2015
Transaction ID : A3FB587D686C04D7FAA4
 Amount of Each Receipt this Period
 192.00
 Payroll Deduction: \$96.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	346.00
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 39 OF 48
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. 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 **494.00**

Date of Receipt **06 / 27 / 2015**
Transaction ID : A9FAAA934203146DA881
Amount of Each Receipt this Period **76.00**
Payroll Deduction: \$38.00/Bi-Weekly

B. JEFFREY H. DAWKINS
Full Name (Last, First, Middle Initial)
Mailing Address 29116 Bradmoor Court
City Farmington Hills State MI Zip Code 48334-3261
FEC ID number of contributing federal political committee. **C**
Name of Employer Sinai Grace Hospital Occupation COO
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **228.00**

Date of Receipt **06 / 13 / 2015**
Transaction ID : A099C5A31E40F48549BB
Amount of Each Receipt this Period **19.00**
Payroll Deduction: \$19.00/Bi-Weekly

C. DAVID W BORDOFSKE
Full Name (Last, First, Middle Initial)
Mailing Address 5001 Ashland Belle Ln
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 **520.00**

Date of Receipt **06 / 27 / 2015**
Transaction ID : A321036371EBF4731BF4
Amount of Each Receipt this Period **80.00**
Payroll Deduction: \$40.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... **175.00**
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 40 OF 48
(check only one)

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

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

Full Name (Last, First, Middle Initial)
A. ALVIN W JOSEPHS

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 ▼ **507.00**

Date of Receipt **06 / 27 / 2015**

Transaction ID : AE0F7102658C948A09A5

Amount of Each Receipt this Period **78.00**

Payroll Deduction: \$39.00/Bi-Weekly

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

Mailing Address 15408 Fox Meadow Ln

City Frisco State TX Zip Code 75035-3671

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

Name of Employer CONIFER Occupation VP CLIENT DELIVERY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **247.00**

Date of Receipt **06 / 27 / 2015**

Transaction ID : A75C7838A78884592810

Amount of Each Receipt this Period **38.00**

Payroll Deduction: \$19.00/Bi-Weekly

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

Mailing Address 18726 Olive St

City Omaha State NE Zip Code 68136-1229

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation DIR, STRTGIC OPS, ANLYS & REPORTING

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **247.00**

Date of Receipt **06 / 27 / 2015**

Transaction ID : A156EBB3691A648A38A1

Amount of Each Receipt this Period **38.00**

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 41 OF 48
	<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 6516 Vasco Way

City El Paso	State TX	Zip Code 79912-1709
-----------------	-------------	------------------------

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

Name of Employer SIERRA MEDICAL CENTER	Occupation DIR, EXTERNAL AFFAIRS
---	-------------------------------------

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 / 27 / 2015
Transaction ID : AE8D927EF7050402EBD5

Amount of Each Receipt this Period
 87.00

Payroll Deduction: \$39.00/Bi-Weekly

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

Mailing Address 11226 POINTE CT

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 / 27 / 2015
Transaction ID : A6ED5D9C46BE14AE699C

Amount of Each Receipt this Period
 38.00

Payroll Deduction: \$19.00/Bi-Weekly

C. DINA L DUNN
Full Name (Last, First, Middle Initial)

Mailing Address 3717 Cherry Ridge Dr

City Frisco	State TX	Zip Code 75033-1328
----------------	-------------	------------------------

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

Name of Employer TENET HEALTHCARE CORPORATION	Occupation VP, HR HOSPITAL OPS
--	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 27 / 2015
Transaction ID : A6FA519DDD7384522B41

Amount of Each Receipt this Period
 50.00

Payroll Deduction: \$25.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	166.00
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 48
	<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. SALLY A HURT-STEFFEN
 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 SIERRA PROVIDENCE EASTSIDE HOSPITAL Occupation CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **650.00**

Date of Receipt **06 / 27 / 2015**
Transaction ID : A23D3C4C7776E42FB8F9
 Amount of Each Receipt this Period **100.00**
 Payroll Deduction: \$50.00/Bi-Weekly

B. JOHN A GRAH
 Full Name (Last, First, Middle Initial)
 Mailing Address 6104 La Posta Dr
 City El Paso State TX Zip Code 79912-1842
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PROVIDENCE MEMORIAL HOSPITAL Occupation COO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **507.00**

Date of Receipt **06 / 27 / 2015**
Transaction ID : AE774075A234D429B93D
 Amount of Each Receipt this Period **78.00**
 Payroll Deduction: \$39.00/Bi-Weekly

C. TYLER MURPHY
 Full Name (Last, First, Middle Initial)
 Mailing Address 108 Londonberry Ter
 City Southlake State TX Zip Code 76092-7321
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHCARE CORPORATION Occupation VP AND TREASURER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **247.00**

Date of Receipt **06 / 27 / 2015**
Transaction ID : A7CCB530961FB45B3977
 Amount of Each Receipt this Period **38.00**
 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 43 OF 48
	<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. TERESA L HUSKEY
Full Name (Last, First, Middle Initial)

Mailing Address 4333 Pershing Ave

City Ft Worth State TX Zip Code 76107-4243

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

Name of Employer: TENET HEALTHCARE CORPORATION
Occupation: SR DIR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1248.00

Date of Receipt: 06 / 27 / 2015
Transaction ID : A1D4FD1410E414EAD8C6

Amount of Each Receipt this Period: 192.00

Payroll Deduction: \$96.00/Bi-Weekly

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

Mailing Address 21521 Turtledove St

City Trabuco Canyon State CA Zip Code 92679-3486

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 / 27 / 2015
Transaction ID : A8E9BCBF397B3401D964

Amount of Each Receipt this Period: 76.00

Payroll Deduction: \$38.00/Bi-Weekly

C. THOMAS WOLF
Full Name (Last, First, Middle Initial)

Mailing Address 2613 Millington Dr

City Plano State TX Zip Code 75093-3560

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

Name of Employer: TENET HEALTHCARE CORPORATION
Occupation: MGR, REIMBURSEMENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 208.00

Date of Receipt: 06 / 27 / 2015
Transaction ID : ADD211ED4D23E4428B85

Amount of Each Receipt this Period: 32.00

Payroll Deduction: \$16.00/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: PAGE 44 OF 48
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. CEZAR L QUIAMBAO
Full Name (Last, First, Middle Initial)
Mailing Address 845 Brisa Del Mar Dr
City El Paso State TX Zip Code 79912-1513
FEC ID number of contributing federal political committee. **C**
Name of Employer PROVIDENCE MEMORIAL HOSPITAL Occupation DIR, RESPIRATORY SVCS
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **202.00**

Date of Receipt **06 / 27 / 2015**
Transaction ID : A86D5A608B34146E1927
Amount of Each Receipt this Period **38.00**
Payroll Deduction: \$19.00/Bi-Weekly

B.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date

Date of Receipt
Amount of Each Receipt this Period

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date

Date of Receipt
Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....	38.00
TOTAL This Period (last page this line number only).....	10484.60

**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. LEVIN FOR CONGRESS

Mailing Address PO BOX 37

City ROSEVILLE State MI Zip Code 48066

Purpose of Disbursement
2016 Primary

Candidate Name

Sander M Levin

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

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2015

Transaction ID : **BB3F07C07C21E43DEABB**

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. SWALWELL FOR CONGRESS

Mailing Address P.O. BOX 2847

City Dublin State CA Zip Code 94568-0847

Purpose of Disbursement
2016 Primary

Candidate Name

Eric Michael Swalwell

Office Sought: House
 Senate
 President
State: CA District: 15

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 15 / 2015

Transaction ID : **B0BE09D45C5C54E31B92**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. GALLEGO FOR ARIZONA

Mailing Address PO BOX 1710

City PHOENIX State AZ Zip Code 85001

Purpose of Disbursement
2016 Primary

Candidate Name

Ruben Gallego

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

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2015

Transaction ID : **BE177CE329F1E4CE7B8D**

Amount of Each Disbursement this Period

1500.00

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

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

4000.00

**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. Brenda Lawrence for Congress

Mailing Address 29207 Southfield Road

City Southfield State MI Zip Code 48076-1922

Purpose of Disbursement
2016 Primary

Candidate Name

Brenda Lawrence

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: MI District: 14

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	3		2	0	1	5

Transaction ID : **B9E87EE90733742639B1**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. GRAHAM FOR CONGRESS

Mailing Address PO BOX 310

City TALLAHASSEE State FL Zip Code 32302

Purpose of Disbursement
2016 Primary

Candidate Name

Gwen Graham

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: FL District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	5

Transaction ID : **B8FB6A507DC1C4EE8A40**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. LOIS FRANKEL FOR CONGRESS

Mailing Address PO BOX 812421

City Boca Raton State FL Zip Code 33481-2421

Purpose of Disbursement
2016 Primary

Candidate Name

Lois J Frankel

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: FL District: 22

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	1		2	0	1	5

Transaction ID : **B6AC5C2387A7F4F0DA5E**

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0

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

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

4	5	0	0	0	0	0	0	0	0

0	0	0	0	0	0	0	0	0	0

**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
2016 Primary

Candidate Name

Raul Ruiz

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: CA District: 36

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

Transaction ID : B621E7406716541EE902

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Ted Deutch For Congress Committee

Mailing Address 7777 Glades Road, Suite 100

City Boca Raton State FL Zip Code 33434-4150

Purpose of Disbursement
2016 Primary

Candidate Name

Rep. Ted E. Deutch

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: FL District: 19

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

Transaction ID : B944F56BCE3954F64AE6

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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

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

2000.00

10500.00

**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 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 checked="" 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. Committee to Elect Nate Gentry

Mailing Address 3716 Andrew Drive NE

City Albuquerque State NM Zip Code 87110-1327

Purpose of Disbursement
2016 Primary

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 15 / 2015

Transaction ID : BE2CD1B3E3D8140FB88E

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Doug Miller Campaign

Mailing Address P.O. Box 312037

City New Braunfels State TX Zip Code 78131-2037

Purpose of Disbursement
2016 Primary

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 25 / 2015

Transaction ID : B8C2B1FF7BD654FC2884

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

1500.00

1500.00