

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

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"/>	<input type="text" value="81358.03"/>	<input type="text" value="81358.03"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="75773.13"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="12128.82"/>	<input type="text" value="127858.02"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="87901.95"/>	<input type="text" value="209216.05"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="5500.00"/>	<input type="text" value="126814.10"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="82401.95"/>	<input type="text" value="82401.95"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 09 / 01 / 2015 To: 09 / 30 / 2015

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).....	9296.12	80709.84
(ii) Unitemized	2832.70	47148.18
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	12128.82	127858.02
(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)	12128.82	127858.02
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))..... ▶	12128.82	127858.02
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	12128.82	127858.02

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	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.....	5000.00	95000.00
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	1660.45
(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	1660.45
29. Other Disbursements	500.00	27648.20
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)) ..	5500.00	126814.10
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5500.00	126814.10

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	12128.82	127858.02
34. Total Contribution Refunds (from Line 28(d))	0.00	1660.45
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	12128.82	126197.57
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. MICHAEL HALTER
 Full Name (Last, First, Middle Initial)
 Mailing Address 111 Righters Mill Rd
 City Penn Valley State PA Zip Code 19072-1312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HAHNEMANN UNIVERSITY HOSPITAL Occupation CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **280.00**

Date of Receipt **09 / 19 / 2015**
Transaction ID : A4EED28ED8208486B85C
 Amount of Each Receipt this Period **38.00**
 Payroll Deduction: \$19.00/Bi-Weekly

B. 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 **361.00**

Date of Receipt **09 / 19 / 2015**
Transaction ID : A38ED9E40EEBA4132B2D
 Amount of Each Receipt this Period **38.00**
 Payroll Deduction: \$19.00/Bi-Weekly

C. 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 **741.00**

Date of Receipt **09 / 19 / 2015**
Transaction ID : AC3B44A51B30F48E29F0
 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 7 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. 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 **1539.00**

Date of Receipt **09 / 19 / 2015**
Transaction ID : AAF730E3027C74D3DBB0
 Amount of Each Receipt this Period **192.00**
 Payroll Deduction: \$96.00/Bi-Weekly

B. KEITH PITTS
 Full Name (Last, First, Middle Initial)
 Mailing Address 4441 South Versailles Ave
 City Dallas State TX Zip Code 75205-3012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Tenet Healthcare Corporation Occupation Vice Chairman
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **3648.00**

Date of Receipt **09 / 19 / 2015**
Transaction ID : A7D1CD9C69853423B8D1
 Amount of Each Receipt this Period **384.00**
 Payroll Deduction: \$192.00/Bi-Weekly

C. 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 **722.00**

Date of Receipt **09 / 19 / 2015**
Transaction ID : ABCA24084409544199E2
 Amount of Each Receipt this Period **76.00**
 Payroll Deduction: \$38.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	652.00
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"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 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 ▼
722.00

Date of Receipt
09 / 19 / 2015
Transaction ID : **A0FD8AE5C28734E198E9**

Amount of Each Receipt this Period
76.00

Payroll Deduction: \$38.00/Bi-Weekly

B. 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 ▼
361.00

Date of Receipt
09 / 19 / 2015
Transaction ID : **A76B927850A894223A72**

Amount of Each Receipt this Period
38.00

Payroll Deduction: \$19.00/Bi-Weekly

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

Mailing Address 1643 Rainbow Knls

City Chino Hills State CA Zip Code 91709-4866

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

Name of Employer TENET CALIFORNIA, SANTA ANA OFFICE Occupation SPEC-PRODUCTIVITY PMI SR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt
09 / 19 / 2015
Transaction ID : **A650D923C79884CB8A4A**

Amount of Each Receipt this Period
30.00

Payroll Deduction: \$15.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ▶ 144.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 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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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. 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 **741.00**

Date of Receipt **09 / 19 / 2015**
Transaction ID : ABF6B1730F3C14CDD808
 Amount of Each Receipt this Period **78.00**
 Payroll Deduction: \$39.00/Bi-Weekly

B. 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 **702.00**

Date of Receipt **09 / 19 / 2015**
Transaction ID : A3BE73B9FB79347D9ACA
 Amount of Each Receipt this Period **78.00**
 Payroll Deduction: \$39.00/Bi-Weekly

C. 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 **361.00**

Date of Receipt **09 / 19 / 2015**
Transaction ID : AABC7E89C12A24A6AB05
 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 10 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. BENSON P CHACKO

Mailing Address PO Box 963040

City El Paso State TX Zip Code 79996-3040

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

Name of Employer SIERRA PROVIDENCE EASTSIDE HOSPITAL Occupation DBD-ASSOC ADMINISTRATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **247.00**

Date of Receipt **09 / 19 / 2015**

Transaction ID : A1DE391089736479882C

Amount of Each Receipt this Period **38.00**

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)
B. STAN V. HOLM

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 ▼ **361.00**

Date of Receipt **09 / 19 / 2015**

Transaction ID : AA70D2EBE7AFD4CD4A4C

Amount of Each Receipt this Period **38.00**

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)
C. SALLY A HURT-STEFFEN

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 ▼ **950.00**

Date of Receipt **09 / 19 / 2015**

Transaction ID : A758435A21F0D4D4E8C1

Amount of Each Receipt this Period **100.00**

Payroll Deduction: \$50.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... **176.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 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. 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 ▼ **361.00**

Date of Receipt **09 / 19 / 2015**

Transaction ID : ADB07D3B5397C457FB03

Amount of Each Receipt this Period **38.00**

Payroll Deduction: \$19.00/Bi-Weekly

B. 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 ▼ **722.00**

Date of Receipt **09 / 19 / 2015**

Transaction ID : ACE1C8ADDCCAF4D7BB3

Amount of Each Receipt this Period **76.00**

Payroll Deduction: \$38.00/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 ▼ **621.00**

Date of Receipt **09 / 19 / 2015**

Transaction ID : A02E737CCBDBA4962A43

Amount of Each Receipt this Period **78.00**

Payroll Deduction: \$39.00/Bi-Weekly

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 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. DANIEL JACKSON
Full Name (Last, First, Middle Initial)

Mailing Address 11041 Heathland Dr

City State Zip Code
Oakton VA 22124-2430

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

Name of Employer Occupation
SIERRA PROVIDENCE EASTSIDE HOSPITAL COO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
361.00

Date of Receipt
09 / 19 / 2015
Transaction ID : AC7029C522C8C4B48951

Amount of Each Receipt this Period
38.00

Payroll Deduction: \$19.00/Bi-Weekly

B. THALIA C. MARTIN
Full Name (Last, First, Middle Initial)

Mailing Address 1445 Ross Avenue Suite 1400

City State Zip Code
Dallas TX 75202-2703

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

Name of Employer Occupation
SIERRA PROVIDENCE EASTSIDE HOSPITAL Market Dir., Quality and Patient Safet

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
361.00

Date of Receipt
09 / 19 / 2015
Transaction ID : AF934338AEC644C02871

Amount of Each Receipt this Period
38.00

Payroll Deduction: \$19.00/Bi-Weekly

C. RUBEN O RODRIGUEZ
Full Name (Last, First, Middle Initial)

Mailing Address 6905 Villa Hermosa Dr

City State Zip Code
El Paso TX 79912-2341

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

Name of Employer Occupation
SIERRA PROVIDENCE EASTSIDE HOSPITAL DIR, PLANT OPERATIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
741.00

Date of Receipt
09 / 19 / 2015
Transaction ID : A9CE2E2C27F17454DAF5

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 13 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. KEN E JORDAN
Full Name (Last, First, Middle Initial)

Mailing Address 67 Sutton Pl E

City State Zip Code
Palm Desert CA 92211-9046

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

Name of Employer Occupation
DESERT REGIONAL MEDICAL CENTER CFO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **361.00**

Date of Receipt
09 / 19 / 2015

Transaction ID : A52EB0D3ED4B7414F98E

Amount of Each Receipt this Period
38.00

Payroll Deduction: \$19.00/Bi-Weekly

B. RICHARD E GLANCEY
Full Name (Last, First, Middle Initial)

Mailing Address 6516 Vasco Way

City State Zip Code
El Paso TX 79912-1709

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

Name of Employer Occupation
SIERRA MEDICAL CENTER DIR, EXTERNAL AFFAIRS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **741.00**

Date of Receipt
09 / 19 / 2015

Transaction ID : A0EE27A9B5A77476A917

Amount of Each Receipt this Period
78.00

Payroll Deduction: \$39.00/Bi-Weekly

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

Mailing Address 7707 N 127th Ave

City State Zip Code
Omaha NE 68142-1723

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

Name of Employer Occupation
JFK Memorial Hospital CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1824.00**

Date of Receipt
09 / 19 / 2015

Transaction ID : A7E949B6460294555B54

Amount of Each Receipt this Period
192.00

Payroll Deduction: \$96.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	308.00
TOTAL This Period (last page this line number only).....▶	

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

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

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

A. 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 ▼ 741.00

Date of Receipt 09 / 19 / 2015
Transaction ID : ACFAB9BFDBB154D17960
 Amount of Each Receipt this Period 78.00
 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 ▼ 361.00

Date of Receipt 09 / 19 / 2015
Transaction ID : AA4957B3771E046C9B68
 Amount of Each Receipt this Period 38.00
 Payroll Deduction: \$19.00/Bi-Weekly

C. 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 ▼ 361.00

Date of Receipt 09 / 19 / 2015
Transaction ID : AAF76C120AE0245788BE
 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 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	<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 ▼ **361.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2015

Transaction ID : AF38D81ABE2454D7E8B6

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/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 ▼ **361.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2015

Transaction ID : A8EA8375EE8B24AF986F

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

C. 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 ▼ **361.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2015

Transaction ID : A58FBAE5E744449DCA48

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: (check only one)	PAGE 16 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

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

Mailing Address 13802 Magnolia Manor Dr

City Cypress	State TX	Zip Code 77429-8162
-----------------	-------------	------------------------

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

Name of Employer CYPRESS FAIRBANKS MEDICAL CENTER	Occupation CEO
--	-------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **665.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2015

Transaction ID : AD12463CC43C14ED598E

Amount of Each Receipt this Period

70.00

Payroll Deduction: \$35.00/Bi-Weekly

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

Mailing Address 6304 Carmel Falls Ct

City McKinney	State TX	Zip Code 75070-8768
------------------	-------------	------------------------

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

Name of Employer CENTENNIAL MEDICAL CENTER	Occupation CEO
---	-------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **722.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2015

Transaction ID : A0A31B3F94BE14F31B80

Amount of Each Receipt this Period

76.00

Payroll Deduction: \$38.00/Bi-Weekly

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

Mailing Address 1445 Ross Ave, Suite 1400

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

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

Name of Employer Tenet Healthcare Corp	Occupation Senior Director, Practice Operations
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **741.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2015

Transaction ID : A6DF97C52357048EC823

Amount of Each Receipt this Period

78.00

Payroll Deduction: \$39.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	224.00
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. BARBARA EUSEBIO
Full Name (Last, First, Middle Initial)

Mailing Address 82-814 Pembroke Lane

City Indio State CA Zip Code 92201-9692

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

Name of Employer Tenet Healthcare Corp Occupation CNO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **228.00**

Date of Receipt
 09 / 19 / 2015
Transaction ID : A5DAAD16A2AD44346BD/

Amount of Each Receipt this Period
38.00

Payroll Deduction: \$19.00/Bi-Weekly

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

Mailing Address 10847 LOCHSPRING DRIVE

City Dallas State TX Zip Code 75218-1201

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

Name of Employer Tenet Healthcare Corp Occupation Director, Physician Business Developem

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **361.00**

Date of Receipt
 09 / 19 / 2015
Transaction ID : A0BF1B7A0245B4914BAB

Amount of Each Receipt this Period
38.00

Payroll Deduction: \$19.00/Bi-Weekly

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

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 ▼ **361.00**

Date of Receipt
 09 / 19 / 2015
Transaction ID : AD304E25D2A094EB0B60

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: (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	<input type="checkbox"/> 17

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

A. 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 ▼ **1488.00**

Date of Receipt **09 / 19 / 2015**

Transaction ID : A0DD175ED035E4174954

Amount of Each Receipt this Period **192.00**

Payroll Deduction: \$96.00/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 ▼ **741.00**

Date of Receipt **09 / 19 / 2015**

Transaction ID : A8F3223E5B9B44FF8A2B

Amount of Each Receipt this Period **78.00**

Payroll Deduction: \$39.00/Bi-Weekly

C. 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 ▼ **741.00**

Date of Receipt **09 / 19 / 2015**

Transaction ID : A8298F148E99344FC907

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 19 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. JIMMY K. DUNCAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 1001 Garden View Dr. NE
 Apt 1224
 City Atlanta State GA Zip Code 30319-5824
 Name of Employer ATLANTA MEDICAL CENTER Occupation CHRO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 247.00

Date of Receipt 09 / 19 / 2015
Transaction ID : A7FA874B60920486E8BD
 Amount of Each Receipt this Period 38.00
 Payroll Deduction: \$19.00/Bi-Weekly

B. DOUGLAS BREWER
 Full Name (Last, First, Middle Initial)
 Mailing Address 351 SAWMILL ROAD
 City Dillsburg State PA Zip Code 17019-9582
 Name of Employer ATLANTA MEDICAL CENTER Occupation Director of Business Development
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 741.00

Date of Receipt 09 / 19 / 2015
Transaction ID : A08D1D4A899C14CBF945
 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
 Name of Employer SPALDING REGIONAL HOSPITAL Occupation CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 19 / 2015
Transaction ID : A51B5171E19904D0193A
 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:	PAGE 20 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. 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 ▼
361.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2015

Transaction ID : AFDA2B75E16D644F7BFD

Amount of Each Receipt this Period
38.00

Payroll Deduction: \$19.00/Bi-Weekly

B. 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 ▼
380.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2015

Transaction ID : A8BDE230F73004F10B19

Amount of Each Receipt this Period
40.00

Payroll Deduction: \$20.00/Bi-Weekly

C. 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 ▼
741.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2015

Transaction ID : A5498E2DC9DD6404FA44

Amount of Each Receipt this Period
78.00

Payroll Deduction: \$39.00/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 21 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. JASON P ALEXANDER
 Full Name (Last, First, Middle Initial)
 Mailing Address 7220 WynnrIDGE Dr
 City State Zip Code
 Mobile AL 36695-5500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 EAST COOPER REGIONAL MEDICAL CENTE CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 271.00

Date of Receipt
 09 / 19 / 2015
Transaction ID : A2D3B706C3A56467F88C
 Amount of Each Receipt this Period
 38.00
 Payroll Deduction: \$19.00/Bi-Weekly

B. MARK P LISA
 Full Name (Last, First, Middle Initial)
 Mailing Address 391 E Milgeo Ave
 City State Zip Code
 Ripon CA 95366-2120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 DOCTORS HOSPITAL OF MANTECA CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 741.00

Date of Receipt
 09 / 19 / 2015
Transaction ID : ABAE3A0F162BD449394A
 Amount of Each Receipt this Period
 78.00
 Payroll Deduction: \$39.00/Bi-Weekly

C. ENRIQUE MARTINEZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 1445 Ross Avenue
 Suite 1400
 City State Zip Code
 Dallas TX 75202-2703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 PROVIDENCE MEMORIAL HOSPITAL CMO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 361.00

Date of Receipt
 09 / 19 / 2015
Transaction ID : AFFA09B6510D0431E9E6
 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 22 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

A. 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 ▼ **361.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2015

Transaction ID : A9C752CF911774128BBF

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/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 ▼ **741.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2015

Transaction ID : A67DACEAEB9894A85956

Amount of Each Receipt this Period

78.00

Payroll Deduction: \$39.00/Bi-Weekly

C. BARRY LEFFLER
Full Name (Last, First, Middle Initial)

Mailing Address 4123 WYCLIFF AVE

City Dallas	State TX	Zip Code 75219-3005
----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **361.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2015

Transaction ID : ADB9F705DCCD649DDA2C

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 23 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. 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 ▼ 1824.00

Date of Receipt 09 / 19 / 2015
Transaction ID : A3727C7FCC3784DF990C

Amount of Each Receipt this Period 192.00

Payroll Deduction: \$96.00/Bi-Weekly

B. CRAIG C ARMIN
Full Name (Last, First, Middle Initial)

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 ▼ 760.00

Date of Receipt 09 / 19 / 2015
Transaction ID : A6A5B92528BB6429D9D6

Amount of Each Receipt this Period 80.00

Payroll Deduction: \$40.00/Bi-Weekly

C. 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 ▼ 361.00

Date of Receipt 09 / 19 / 2015
Transaction ID : AAD6466FBC09E4C56A5B

Amount of Each Receipt this Period 38.00

Payroll Deduction: \$19.00/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 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	

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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 ▼ 361.00

Date of Receipt 09 / 19 / 2015
Transaction ID : A0E4C6583D2EA4D309E0

Amount of Each Receipt this Period 38.00

Payroll Deduction: \$19.00/Bi-Weekly

B. RODNEY A REASONER
Full Name (Last, First, Middle Initial)

Mailing Address 1960 Mary Lee Ln

City Allen State TX Zip Code 75002-8528

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation VP, FINANCE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 19 / 2015
Transaction ID : A06F8B7F9F02E4C9A963

Amount of Each Receipt this Period 76.00

Payroll Deduction: \$38.00/Bi-Weekly

C. 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 ▼ 1824.00

Date of Receipt 09 / 19 / 2015
Transaction ID : A0930E08E039C4DF5B3C

Amount of Each Receipt this Period 192.00

Payroll Deduction: \$96.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ▶ 306.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 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. WESLEY CHICK
 Full Name (Last, First, Middle Initial)
 Mailing Address 1445 Ross Ave #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 AVP, Managed Care
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **351.00**

Date of Receipt **09 / 19 / 2015**
Transaction ID : AF6C6085155B143FDB3A
 Amount of Each Receipt this Period **78.00**
 Payroll Deduction: \$39.00/Bi-Weekly

B. AUDREY T ANDREWS
 Full Name (Last, First, Middle Initial)
 Mailing Address 702 Penfolds Ln
 City Coppell State TX Zip Code 75019-4544
 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 **3648.00**

Date of Receipt **09 / 19 / 2015**
Transaction ID : AD24CD2786F2C4DF8A67
 Amount of Each Receipt this Period **384.00**
 Payroll Deduction: \$192.00/Bi-Weekly

C. JEREMY CLARK
 Full Name (Last, First, Middle Initial)
 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 **480.00**

Date of Receipt **09 / 19 / 2015**
Transaction ID : ADBF9FE289B7F4D04BA0
 Amount of Each Receipt this Period **80.00**
 Payroll Deduction: \$40.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	542.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 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. KELVIN A BAGGETT
 Full Name (Last, First, Middle Initial)
 Mailing Address 6453 Tulip Ln
 City Dallas State TX Zip Code 75230-4148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHCARE CORPORATION Occupation SVP, CHIEF MEDICAL OFCR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 741.00

Date of Receipt 09 / 19 / 2015
Transaction ID : A104130646AE34DB598A
 Amount of Each Receipt this Period 78.00
 Payroll Deduction: \$39.00/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, GOV'T RELATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 741.00

Date of Receipt 09 / 19 / 2015
Transaction ID : A389A3C19C59149E9A66
 Amount of Each Receipt this Period 78.00
 Payroll Deduction: \$39.00/Bi-Weekly

C. PAUL A CASTANON
 Full Name (Last, First, Middle Initial)
 Mailing Address 6307 Preston Pkwy
 City Dallas State TX Zip Code 75205-1650
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHCARE CORPORATION Occupation VP & DEPUTY GNRL COUNSEL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 19 / 2015
Transaction ID : A246D6551977B4838A85
 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 27 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. VANESSA BENAVIDES
Full Name (Last, First, Middle Initial)

Mailing Address 3818 Cedar Spr
101-32

City Dallas State TX Zip Code 75219-0000

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation CORP COMPLIANCE OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **741.00**

Date of Receipt **09 / 19 / 2015**

Transaction ID : A6EDA83F5167D4A269DD

Amount of Each Receipt this Period **78.00**

Payroll Deduction: \$39.00/Bi-Weekly

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

Mailing Address 3717 Herwol Ave

City Waco State TX Zip Code 76710-7218

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation SR DIR, COMPLNCE POLICY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **741.00**

Date of Receipt **09 / 19 / 2015**

Transaction ID : A67637A15D8504258AB6

Amount of Each Receipt this Period **78.00**

Payroll Deduction: \$39.00/Bi-Weekly

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

Mailing Address 401 N Church St

City McKinney State TX Zip Code 75069-3854

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation VP, IT TECHNOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **855.00**

Date of Receipt **09 / 19 / 2015**

Transaction ID : A3B69D8B0EA43407DACE

Amount of Each Receipt this Period **90.00**

Payroll Deduction: \$45.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	246.00
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

A. 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 ▼ **361.00**

Date of Receipt **09 / 19 / 2015**

Transaction ID : A0575F0F91810433F815

Amount of Each Receipt this Period **38.00**

Payroll Deduction: \$19.00/Bi-Weekly

B. 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 ▼ **380.00**

Date of Receipt **09 / 19 / 2015**

Transaction ID : A5A54117EF2C6490E90D

Amount of Each Receipt this Period **40.00**

Payroll Deduction: \$20.00/Bi-Weekly

C. 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 ▼ **722.00**

Date of Receipt **09 / 19 / 2015**

Transaction ID : AD132A8A7B5994A89B32

Amount of Each Receipt this Period **76.00**

Payroll Deduction: \$38.00/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 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. 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 ▼ **546.00**

Date of Receipt **09 / 19 / 2015**

Transaction ID : AF6D442179A76457DBB5

Amount of Each Receipt this Period **78.00**

Payroll Deduction: \$39.00/Bi-Weekly

B. 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 ▼ **316.00**

Date of Receipt **09 / 19 / 2015**

Transaction ID : A55F6580F49F740B5B0D

Amount of Each Receipt this Period **38.00**

Payroll Deduction: \$19.00/Bi-Weekly

C. MARIO ESTRELL
Full Name (Last, First, Middle Initial)

Mailing Address 2714 Chaparral Dr

City Nacogdoches State TX Zip Code 75965-3722

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 ▼ **361.00**

Date of Receipt **09 / 19 / 2015**

Transaction ID : A57E02087FBCD42C497F

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 30 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. 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 ▼ **361.00**

Date of Receipt **09 / 19 / 2015**

Transaction ID : A00498FFC5D48435AA38

Amount of Each Receipt this Period **38.00**

Payroll Deduction: \$19.00/Bi-Weekly

B. DANIEL WALDMANN
Full Name (Last, First, Middle Initial)

Mailing Address 1111 N Montclair Ave

City Dallas State TX Zip Code 75208-3520

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation VP, GOVERNMENT RELATIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1824.00**

Date of Receipt **09 / 19 / 2015**

Transaction ID : AC10A1A83EB914EABB46

Amount of Each Receipt this Period **192.00**

Payroll Deduction: \$96.00/Bi-Weekly

C. 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 ▼ **380.00**

Date of Receipt **09 / 19 / 2015**

Transaction ID : AAAA0CD5448974FC5A2E

Amount of Each Receipt this Period **40.00**

Payroll Deduction: \$20.00/Bi-Weekly

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 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. JOHN RODRIGUES
 Full Name (Last, First, Middle Initial)
 Mailing Address 805 Bonnie Ct.
 City State Zip Code
 Allen TX 75002-3622
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 TENET HEALTHCARE CORPORATION Director of Client Services
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 228.00

Date of Receipt
 09 / 19 / 2015
Transaction ID : A44C98EBC235244EEA3B
 Amount of Each Receipt this Period
 38.00
 Payroll Deduction: \$19.00/Bi-Weekly

B. ANIL JAIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 62 Governors Way
 City State Zip Code
 Brentwood TN 37027-8927
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 TENET HEALTHCARE CORPORATION Interim CFO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 247.00

Date of Receipt
 09 / 19 / 2015
Transaction ID : A12367F6551764F97BEB
 Amount of Each Receipt this Period
 38.00
 Payroll Deduction: \$19.00/Bi-Weekly

C. KENNETH F SUTHERLAND
 Full Name (Last, First, Middle Initial)
 Mailing Address 102 Wilmington Ct
 City State Zip Code
 Southlake TX 76092-8492
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 TENET HEALTHCARE CORPORATION VP, CONSTRUCTION & DESIG
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 722.00

Date of Receipt
 09 / 19 / 2015
Transaction ID : A9F5C8308369349DB955
 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 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	<input type="checkbox"/> 17

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

A. LEONARD DEONARINE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1129 Wishing Well Ct
 City Cedar Hill State TX Zip Code 75104-8255
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHCARE CORPORATION Occupation DIR, BUSINESS CONTINUITY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **307.00**

Date of Receipt **09 / 19 / 2015**
Transaction ID : A0CE9C06BBD6E49FEBB4
 Amount of Each Receipt this Period **38.00**
 Payroll Deduction: \$19.00/Bi-Weekly

B. 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 **475.00**

Date of Receipt **09 / 19 / 2015**
Transaction ID : A64B67ED9D1AF4FA783F
 Amount of Each Receipt this Period **50.00**
 Payroll Deduction: \$25.00/Bi-Weekly

C. GARY K RUFF
 Full Name (Last, First, Middle Initial)
 Mailing Address 714 Kent Ct
 City Southlake State TX Zip Code 76092-8868
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHCARE CORPORATION Occupation SVP, PHYSICIAN RESOURCES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1824.00**

Date of Receipt **09 / 19 / 2015**
Transaction ID : AAFE5D62CCA204ED89AA
 Amount of Each Receipt this Period **192.00**
 Payroll Deduction: \$96.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... **280.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 33 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

A. 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 **304.00**

Date of Receipt 09 / 19 / 2015
Transaction ID : A49E6E18CFB8E45028F2
Amount of Each Receipt this Period **32.00**
Payroll Deduction: \$16.00/Bi-Weekly

B. JEREMY D FALKE
Full Name (Last, First, Middle Initial)
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 **361.00**

Date of Receipt 09 / 19 / 2015
Transaction ID : A160C19B6CEFE4BFDA53
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 **361.00**

Date of Receipt 09 / 19 / 2015
Transaction ID : A90C8B4794EFD401986C
Amount of Each Receipt this Period **38.00**
Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... **108.00**
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"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

A. RUSTY MCNEW
Full Name (Last, First, Middle Initial)
Mailing Address 3141 Lovers Lane
City Dallas State TX Zip Code 75225-7720
FEC ID number of contributing federal political committee. **C**
Name of Employer TENET HEALTHCARE CORPORATION Occupation Regional CNO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **266.42**

Date of Receipt **09 / 19 / 2015**
Transaction ID : A5E4176046C094E77A9D
Amount of Each Receipt this Period **38.06**
Payroll Deduction: \$19.03/Bi-Weekly

B. 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 **722.00**

Date of Receipt **09 / 19 / 2015**
Transaction ID : AEC15B3C2A17D4EAD876
Amount of Each Receipt this Period **76.00**
Payroll Deduction: \$38.00/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 **475.00**

Date of Receipt **09 / 19 / 2015**
Transaction ID : A2F6A7BF6A19E49F2872
Amount of Each Receipt this Period **50.00**
Payroll Deduction: \$25.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... **164.06**
TOTAL This Period (last page this line number only).....

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

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

FOR LINE NUMBER: PAGE 35 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. 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 ▼ **380.00**

Date of Receipt **09 / 19 / 2015**
Transaction ID : A2C76C1AFBAAE42FD974
 Amount of Each Receipt this Period **40.00**
 Payroll Deduction: \$20.00/Bi-Weekly

B. 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 ▼ **418.00**

Date of Receipt **09 / 19 / 2015**
Transaction ID : AFDA6FC1C2C0F4654A95
 Amount of Each Receipt this Period **78.00**
 Payroll Deduction: \$39.00/Bi-Weekly

C. MICHAEL K BURTNETT
 Full Name (Last, First, Middle Initial)
 Mailing Address 1131 N Edgefield Ave
 City Dallas State TX Zip Code 75208-3624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHCARE CORPORATION Occupation VP, OUTPATIENT SERVICES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **722.00**

Date of Receipt **09 / 19 / 2015**
Transaction ID : A10A4E8EC2AEC42EB919
 Amount of Each Receipt this Period **76.00**
 Payroll Deduction: \$38.00/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 36 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 ▼ **1824.00**

Date of Receipt **09 / 19 / 2015**

Transaction ID : A0C2E8CBA571D40E4AE1

Amount of Each Receipt this Period **192.00**

Payroll Deduction: \$96.00/Bi-Weekly

B. 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 ▼ **507.00**

Date of Receipt **09 / 19 / 2015**

Transaction ID : A7DBF540B41304922BC1

Amount of Each Receipt this Period **78.00**

Payroll Deduction: \$39.00/Bi-Weekly

C. CONLEY S CERVANTES
Full Name (Last, First, Middle Initial)

Mailing Address 819 Cambridge Manor Ln

City Coppel State TX Zip Code 75019-6105

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation SR DIR, MANAGED CARE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **228.00**

Date of Receipt **09 / 19 / 2015**

Transaction ID : A80C5CAF64F2B42C8911

Amount of Each Receipt this Period **24.00**

Payroll Deduction: \$12.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... **294.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 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. BRITT REYNOLDS
Full Name (Last, First, Middle Initial)
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 **1826.85**

Date of Receipt **09 / 19 / 2015**
Transaction ID : ACE2E304DF11043BCA0E
Amount of Each Receipt this Period **192.30**
Payroll Deduction: \$96.15/Bi-Weekly

B. ANDREAS M GRAF
Full Name (Last, First, Middle Initial)
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 **361.00**

Date of Receipt **09 / 19 / 2015**
Transaction ID : A0E130F447CD74D98A78
Amount of Each Receipt this Period **38.00**
Payroll Deduction: \$19.00/Bi-Weekly

C. 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 **361.00**

Date of Receipt **09 / 19 / 2015**
Transaction ID : A0D6E05E4650D4051944
Amount of Each Receipt this Period **38.00**
Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	268.30
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 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	

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

A. MARK F. ROBERTS
Full Name (Last, First, Middle Initial)

Mailing Address 13047 W. Estero Lane

City Litchfield Park State AZ Zip Code 85340-5576

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation PMI Senior Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt 09 / 19 / 2015
Transaction ID : A7B285D0A8A2246B4A7D

Amount of Each Receipt this Period 78.00

Payroll Deduction: \$39.00/Bi-Weekly

B. 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 ▼ 361.00

Date of Receipt 09 / 19 / 2015
Transaction ID : A3BDC7EB4CC34450495E

Amount of Each Receipt this Period 38.00

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 ▼ 760.00

Date of Receipt 09 / 19 / 2015
Transaction ID : A54231D7DAF2D4086AB7

Amount of Each Receipt this Period 80.00

Payroll Deduction: \$40.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ▶ 196.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 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. REGINALD J. EADIE
 Full Name (Last, First, Middle Initial)
 Mailing Address 6940 KENNESAW
 City Canton State MI Zip Code 48187-1283
 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 **365.56**

Date of Receipt: 09 / 19 / 2015
Transaction ID : A111BAB07807D4A689B4
 Amount of Each Receipt this Period: **38.48**
 Payroll Deduction: \$19.24/Bi-Weekly

B. LERRYN CROCKER
 Full Name (Last, First, Middle Initial)
 Mailing Address 2386 Liledoun Rd
 City Taylorsville State NC Zip Code 28681-8892
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: FRYE REGIONAL MEDICAL CENTER Occupation: CNO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1824.00**

Date of Receipt: 09 / 19 / 2015
Transaction ID : A2709F254A8784D9BA04
 Amount of Each Receipt this Period: **192.00**
 Payroll Deduction: \$96.00/Bi-Weekly

C. JOSEPH J. MULLANY
 Full Name (Last, First, Middle Initial)
 Mailing Address 2169 Tottenham Road
 City Bloomfield Hills State MI Zip Code 48301-2332
 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 **1824.00**

Date of Receipt: 09 / 19 / 2015
Transaction ID : AF05BC70E02A847B58B9
 Amount of Each Receipt this Period: **192.00**
 Payroll Deduction: \$96.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	422.48
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 40 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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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. 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 ▼ 741.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2015
Transaction ID : A40912F33C1E944A1A23
 Amount of Each Receipt this Period 78.00
 Payroll Deduction: \$39.00/Bi-Weekly

B. CONRAD MALLETT
 Full Name (Last, First, Middle Initial)
 Mailing Address 19386 Cumberland Way
 City Detroit State MI Zip Code 48203-1456
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Detroit Medical Center Occupation Chief Administrative Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 730.93

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2015
Transaction ID : A635A0B4E8F0E44E6973
 Amount of Each Receipt this Period 76.94
 Payroll Deduction: \$38.47/Bi-Weekly

C. DAVID L ARCHER
 Full Name (Last, First, Middle Initial)
 Mailing Address 2594 Hocksett Cv
 City Germantown State TN Zip Code 38139-6655
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SAINT FRANCIS HOSPITAL Occupation MARKET CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1824.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2015
Transaction ID : AAB79FA9789C846F3BE6
 Amount of Each Receipt this Period 192.00
 Payroll Deduction: \$96.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	346.94
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 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. KATHLEEN TREGAR
Full Name (Last, First, Middle Initial)

Mailing Address 1445 Ross Ave
#1400

City Dallas State TX Zip Code 75202-2703

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

Name of Employer Mission Trail Baptist Health System Occupation CNO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 351.00

Date of Receipt 09 / 19 / 2015
Transaction ID : A8001FAD4E8E349D8BB9

Amount of Each Receipt this Period 78.00

Payroll Deduction: \$39.00/Bi-Weekly

B. LORI HOLMAN
Full Name (Last, First, Middle Initial)

Mailing Address 7213 ELLIS ROAD

City Fort Worth State TX Zip Code 76112-4301

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation Manager, Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 19 / 2015
Transaction ID : AAE244748A54C4E2494D

Amount of Each Receipt this Period 38.00

Payroll Deduction: \$19.00/Bi-Weekly

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

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 ▼ 361.00

Date of Receipt 09 / 19 / 2015
Transaction ID : AC69F7EDEDAAE4C2BAE1

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 42 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. LUANNE M. EWALD
 Full Name (Last, First, Middle Initial)
 Mailing Address 232 MIDLAND BLVD
 City Royal Oak State MI Zip Code 48073-2670
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Detroit Medical Center Occupation Director of Business Development
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 730.93

Date of Receipt 09 / 19 / 2015
Transaction ID : AB4E2E15AF12A4448B7E
 Amount of Each Receipt this Period 76.94
 Payroll Deduction: \$38.47/Bi-Weekly

B. DAVID M. KATZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 363 St. Clair
 City Grosse Pointe State MI Zip Code 48230-1501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Detroit Medical Center Occupation Senior VP, Community Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 269.22

Date of Receipt 09 / 19 / 2015
Transaction ID : A2DC88F93397C455B968
 Amount of Each Receipt this Period 38.46
 Payroll Deduction: \$19.23/Bi-Weekly

C. 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 ▼ 730.93

Date of Receipt 09 / 19 / 2015
Transaction ID : A5D10631F6F1C461F90E
 Amount of Each Receipt this Period 76.94
 Payroll Deduction: \$38.47/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	192.34
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"/> 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. 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)

Date of Receipt 09 / 19 / 2015
Transaction ID : ACE07A38346944862953
 Amount of Each Receipt this Period 70.00
 Payroll Deduction: \$35.00/Bi-Weekly
 Aggregate Year-to-Date 535.00

B. 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)

Date of Receipt 09 / 19 / 2015
Transaction ID : A114E6FF7C7BE4C3A91F
 Amount of Each Receipt this Period 38.00
 Payroll Deduction: \$19.00/Bi-Weekly
 Aggregate Year-to-Date 361.00

C. 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)

Date of Receipt 09 / 19 / 2015
Transaction ID : A335A70CEF5FB43BDBA6
 Amount of Each Receipt this Period 192.00
 Payroll Deduction: \$96.00/Bi-Weekly
 Aggregate Year-to-Date 1824.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 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. 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 **361.00**

Date of Receipt **09 / 19 / 2015**
Transaction ID : A8F760E1CF5F645A5A78
 Amount of Each Receipt this Period **38.00**
 Payroll Deduction: \$19.00/Bi-Weekly

B. DAWN CASTRO
 Full Name (Last, First, Middle Initial)
 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 **361.00**

Date of Receipt **09 / 19 / 2015**
Transaction ID : AD8824F40134B4E31997
 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 **741.00**

Date of Receipt **09 / 19 / 2015**
Transaction ID : A1BF23FB48AB64E82998
 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 45 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. 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 ▼ **663.00**

Date of Receipt **09 / 19 / 2015**

Transaction ID : AF2D10A5315DE42A9A22

Amount of Each Receipt this Period **78.00**

Payroll Deduction: \$39.00/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 ▼ **361.00**

Date of Receipt **09 / 19 / 2015**

Transaction ID : A8F7FB4EA894E4AAAAA8D

Amount of Each Receipt this Period **38.00**

Payroll Deduction: \$19.00/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 ▼ **741.00**

Date of Receipt **09 / 19 / 2015**

Transaction ID : A0B2C39B3A7B4461BBD9

Amount of Each Receipt this Period **78.00**

Payroll Deduction: \$39.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	194.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 46 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. 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 ▼
741.00

Date of Receipt
09 / 19 / 2015
Transaction ID : A1095AF83C2034416B54

Amount of Each Receipt this Period
78.00

Payroll Deduction: \$39.00/Bi-Weekly

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 ▼
380.00

Date of Receipt
09 / 26 / 2015
Transaction ID : AA0492F74C9B04559918

Amount of Each Receipt this Period
38.00

Payroll Deduction: \$19.00/Bi-Weekly

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).....▶	116.00
TOTAL This Period (last page this line number only).....▶	9296.12

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. Friends Of Schumer

Mailing Address 509 Madison Ave Suite 1902

City New York State NY Zip Code 10022-5523

Purpose of Disbursement
2016 Primary

Candidate Name

Sen. Charles E. Schumer

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NY District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	17	/	2015

Transaction ID : B0206AFE40AD4476EA6B

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

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
	/		/	

Amount of Each Disbursement this Period

--

C.

Full Name (Last, First, Middle Initial)

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
	/		/	

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)..... ▶

5000.00

5000.00

**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. Republican Party of New Mexico

Mailing Address 5150 A San Francisco NE

City Albuquerque State NM Zip Code 87109-4640

Purpose of Disbursement
2015 Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼
Other2015

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 17 / 2015

Transaction ID : B63489FAAD26F4F5183E

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B.

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 / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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 / 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)..... ▶

500.00

500.00