

**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"/>		81358.03
(b) Cash on Hand at Beginning of Reporting Period.....	82401.95	
(c) Total Receipts (from Line 19)	18148.79	146006.81
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	100550.74	227364.84
7. Total Disbursements (from Line 31).....	9500.00	136314.10
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	91050.74	91050.74
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 10 / 01 / 2015 To: 10 / 31 / 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).....	16420.88	97130.72
(ii) Unitemized	1727.91	48876.09
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	18148.79	146006.81
(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)	18148.79	146006.81
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))..... ▶	18148.79	146006.81
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	18148.79	146006.81

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	2505.45
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	2505.45
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	8500.00	103500.00
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	1000.00	28648.20
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)) ..	9500.00	136314.10
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	9500.00	136314.10

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)	18148.79	146006.81
34. Total Contribution Refunds (from Line 28(d))	0.00	1660.45
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	18148.79	144346.36
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 75
	<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. ANIL JAIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 62 Governors Way
 City Brentwood State TN Zip Code 37027-8927
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHCARE CORPORATION Occupation Interim CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 304.00

Date of Receipt 10 / 31 / 2015
Transaction ID : A679B2063AA0B4271B23
 Amount of Each Receipt this Period 57.00
 Payroll Deduction: \$19.00/Bi-Weekly

B. 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 ▼ 418.00

Date of Receipt 10 / 31 / 2015
Transaction ID : A1CFB14D0433A4CB0B8F
 Amount of Each Receipt this Period 57.00
 Payroll Deduction: \$19.00/Bi-Weekly

C. EDWARD MESCO
 Full Name (Last, First, Middle Initial)
 Mailing Address 7365 NW 54th St
 City Lauderhill State FL Zip Code 33319-6346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHCARE CORPORATION Occupation DIR, REG REIMBURSEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 10 / 31 / 2015
Transaction ID : A0D4AD98A7D444C5F96D
 Amount of Each Receipt this Period 75.00
 Payroll Deduction: \$25.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	189.00
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 75
	<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. 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 ▼ 418.00

Date of Receipt 10 / 31 / 2015
Transaction ID : A76BCE178FE704135986
 Amount of Each Receipt this Period 57.00
 Payroll Deduction: \$19.00/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 ▼ 4224.00

Date of Receipt 10 / 31 / 2015
Transaction ID : A7A87CB3366DF46ACA15
 Amount of Each Receipt this Period 576.00
 Payroll Deduction: \$192.00/Bi-Weekly

C. 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 ▼ 326.91

Date of Receipt 10 / 31 / 2015
Transaction ID : AF8B44CEED9F34010ACD
 Amount of Each Receipt this Period 57.69
 Payroll Deduction: \$19.23/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	690.69
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 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. THOMAS WOLF
Full Name (Last, First, Middle Initial)
Mailing Address 2613 Millington 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 352.00

Date of Receipt 10 / 31 / 2015
Transaction ID : **A4B2DC72A03C7406F95F**
Amount of Each Receipt this Period 48.00
Payroll Deduction: \$16.00/Bi-Weekly

B. DOUGLAS BREWER
Full Name (Last, First, Middle Initial)
Mailing Address 351 SAWMILL ROAD
City Dillsburg State PA Zip Code 17019-9582
FEC ID number of contributing federal political committee. **C**
Name of Employer ATLANTA MEDICAL CENTER Occupation Director of Business Development
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 858.00

Date of Receipt 10 / 31 / 2015
Transaction ID : **A3EEEF8794DB49A28A4**
Amount of Each Receipt this Period 117.00
Payroll Deduction: \$39.00/Bi-Weekly

C. 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 846.34

Date of Receipt 10 / 31 / 2015
Transaction ID : **AFD206CBE47374291B7C**
Amount of Each Receipt this Period 115.41
Payroll Deduction: \$38.47/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	280.41
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 75
	<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. 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 ▼ 2112.00

Date of Receipt 10 / 31 / 2015
Transaction ID : A17EB8856D2CF4231A1B

Amount of Each Receipt this Period 288.00

Payroll Deduction: \$96.00/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 ▼ 418.00

Date of Receipt 10 / 31 / 2015
Transaction ID : A7C9DCE594B7149E7932

Amount of Each Receipt this Period 57.00

Payroll Deduction: \$19.00/Bi-Weekly

C. 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 ▼ 323.51

Date of Receipt 10 / 31 / 2015
Transaction ID : A82B7998215E64D5F8BD

Amount of Each Receipt this Period 57.09

Payroll Deduction: \$19.03/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ▶ 402.09

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 10 OF 75
	(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. PAUL D. SLAVIN
Full Name (Last, First, Middle Initial)

Mailing Address 508 Forrest Ave

City Cleburne	State TX	Zip Code 76033-5345
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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 ▼ **418.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2015

Transaction ID : A6FE11A71FAC54A49B83

Amount of Each Receipt this Period

57.00

Payroll Deduction: \$19.00/Bi-Weekly

B. ELIZABETH JOHNSON
Full Name (Last, First, Middle Initial)

Mailing Address 3302 Marsh Ln

City Grapevine	State TX	Zip Code 76051-6828
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FEC ID number of contributing federal political committee. **C**

Name of Employer TENET HEALTHCARE CORPORATION	Occupation VP, APPLIED CLINICAL INF
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **836.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2015

Transaction ID : A4877A89C6EF3483ABF7

Amount of Each Receipt this Period

114.00

Payroll Deduction: \$38.00/Bi-Weekly

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

Mailing Address 102 Wilmington Ct

City Southlake	State TX	Zip Code 76092-8492
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FEC ID number of contributing federal political committee. **C**

Name of Employer TENET HEALTHCARE CORPORATION	Occupation VP, CONSTRUCTION & DESIG
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **836.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2015

Transaction ID : A991FD14E92F74733BD9

Amount of Each Receipt this Period

114.00

Payroll Deduction: \$38.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	285.00
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 75
	<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. 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 **770.00**

Date of Receipt **10 / 31 / 2015**
Transaction ID : A4F1BA35074084180AD4
 Amount of Each Receipt this Period **105.00**
 Payroll Deduction: \$35.00/Bi-Weekly

B. KEN E JORDAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 67 Sutton Pl E
 City Palm Desert State CA Zip Code 92211-9046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DESERT REGIONAL MEDICAL CENTER Occupation CFO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **418.00**

Date of Receipt **10 / 31 / 2015**
Transaction ID : A71EE9E2396EE4AB895A
 Amount of Each Receipt this Period **57.00**
 Payroll Deduction: \$19.00/Bi-Weekly

C. 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 **858.00**

Date of Receipt **10 / 31 / 2015**
Transaction ID : AE52A6818DE324763A30
 Amount of Each Receipt this Period **117.00**
 Payroll Deduction: \$39.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	279.00
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 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. JASON 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 ▼ **328.00**

Date of Receipt
10 / 31 / 2015

Transaction ID : A187E8640583940AAA90

Amount of Each Receipt this Period
57.00

Payroll Deduction: \$19.00/Bi-Weekly

B. MARY E. CLEARY
Full Name (Last, First, Middle Initial)

Mailing Address 940 Bonnie Brae Place,

City State Zip Code
River Forest IL 60305-1512

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

Name of Employer Occupation
TENET HEALTHCARE CORPORATION CFO Chicago Market

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **663.00**

Date of Receipt
10 / 31 / 2015

Transaction ID : A34B267F4EC61406B903

Amount of Each Receipt this Period
117.00

Payroll Deduction: \$39.00/Bi-Weekly

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

Mailing Address 6307 Preston Pkwy

City State Zip Code
Dallas TX 75205-1650

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

Name of Employer Occupation
TENET HEALTHCARE CORPORATION VP & DEPUTY GNRL COUNSEL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **418.00**

Date of Receipt
10 / 31 / 2015

Transaction ID : ACD30D8FEBE2C478AB8E

Amount of Each Receipt this Period
57.00

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... **231.00**

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 75
	<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. 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 ▼ **418.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2015
Transaction ID : A9AA63A2A863140ACBC4

Amount of Each Receipt this Period
57.00

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 ▼ **418.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2015
Transaction ID : AFA0FBA9EB9E9483C88E

Amount of Each Receipt this Period
57.00

Payroll Deduction: \$19.00/Bi-Weekly

C. 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 ▼ **418.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2015
Transaction ID : AD2C273ABC27D4737B5F

Amount of Each Receipt this Period
57.00

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	171.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 75
	<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. 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 **418.00**

Date of Receipt **10 / 31 / 2015**
Transaction ID : A97947C597FF1470A907
 Amount of Each Receipt this Period **57.00**
 Payroll Deduction: \$19.00/Bi-Weekly

B. HAROLD K. BANDY
 Full Name (Last, First, Middle Initial)
 Mailing Address 9004 OLD SMRYNA RD
 City Brentwood State TN Zip Code 37027-6058
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Tenet Healthcare Corp Occupation Senior Director, IS Architecture
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1776.00**

Date of Receipt **10 / 31 / 2015**
Transaction ID : A322293E57FF84C27BF8
 Amount of Each Receipt this Period **288.00**
 Payroll Deduction: \$96.00/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 **836.00**

Date of Receipt **10 / 31 / 2015**
Transaction ID : A1B5F4ABE72EE477DA30
 Amount of Each Receipt this Period **114.00**
 Payroll Deduction: \$38.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... **459.00**
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 75
<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. 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 ▼ **880.00**

Date of Receipt **10 / 31 / 2015**

Transaction ID : ADE98C1271FB44E25B37

Amount of Each Receipt this Period **120.00**

Payroll Deduction: \$40.00/Bi-Weekly

B. 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 ▼ **418.00**

Date of Receipt **10 / 31 / 2015**

Transaction ID : A35665DC3AB2C4E7DA06

Amount of Each Receipt this Period **57.00**

Payroll Deduction: \$19.00/Bi-Weekly

C. 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 ▼ **418.00**

Date of Receipt **10 / 31 / 2015**

Transaction ID : A8665056B28E5415B809

Amount of Each Receipt this Period **57.00**

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... **234.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 75
	<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. 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 **780.00**

Date of Receipt **10 / 31 / 2015**
Transaction ID : A3AD5790309C74868AFB
 Amount of Each Receipt this Period **117.00**
 Payroll Deduction: \$39.00/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 **418.00**

Date of Receipt **10 / 31 / 2015**
Transaction ID : A7C5CD587389C4E39977
 Amount of Each Receipt this Period **57.00**
 Payroll Deduction: \$19.00/Bi-Weekly

C. RODNEY A REASONER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1960 Mary Lee Ln
 City Allen State TX Zip Code 75002-8528
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHCARE CORPORATION Occupation VP, FINANCE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **836.00**

Date of Receipt **10 / 31 / 2015**
Transaction ID : AB62F83820CF3418EADF
 Amount of Each Receipt this Period **114.00**
 Payroll Deduction: \$38.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	288.00
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 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. TERESA L HUSKEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 4333 Pershing Ave
 City Ft Worth State TX Zip Code 76107-4243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: TENET HEALTHCARE CORPORATION Occupation: SR DIR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2112.00**

Date of Receipt: 10 / 31 / 2015
Transaction ID : AD1CEF65AA8CE41788C6
 Amount of Each Receipt this Period: **288.00**
 Payroll Deduction: \$96.00/Bi-Weekly

B. SALLY A HURT-STEFFEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 712 Waltham Ct
 City El Paso State TX Zip Code 79922-2128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: SIERRA PROVIDENCE EASTSIDE HOSPITAL Occupation: CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1100.00**

Date of Receipt: 10 / 31 / 2015
Transaction ID : A61A05D5EDD714FBCA60
 Amount of Each Receipt this Period: **150.00**
 Payroll Deduction: \$50.00/Bi-Weekly

C. 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 **858.00**

Date of Receipt: 10 / 31 / 2015
Transaction ID : A4E3812E79C7044C29A7
 Amount of Each Receipt this Period: **117.00**
 Payroll Deduction: \$39.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	555.00
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 75
	<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. MANUEL LINARES

Mailing Address 7935 East Dr
Apt 901

City North Bay Village State FL Zip Code 33141-3693

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

Name of Employer NORTH SHORE MEDICAL CENTER Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
836.00

Date of Receipt
10 / 31 / 2015
Transaction ID : A035A21A9D1FE4BD48AA

Amount of Each Receipt this Period
114.00

Payroll Deduction: \$38.00/Bi-Weekly

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

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 ▼
858.00

Date of Receipt
10 / 31 / 2015
Transaction ID : AA7CF0A7E294B453A95B

Amount of Each Receipt this Period
117.00

Payroll Deduction: \$39.00/Bi-Weekly

Full Name (Last, First, Middle Initial)
C. CEZAR L QUIAMBAO

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 ▼
373.00

Date of Receipt
10 / 31 / 2015
Transaction ID : A6484AF48753D4676913

Amount of Each Receipt this Period
57.00

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	288.00
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 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. BENSON P CHACKO
Full Name (Last, First, Middle Initial)

Mailing Address 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 ▼ **304.00**

Date of Receipt **10 / 31 / 2015**

Transaction ID : AEB5846B0D07A482A89A

Amount of Each Receipt this Period **57.00**

Payroll Deduction: \$19.00/Bi-Weekly

B. JOSEFA M KOLODZIECZYK
Full Name (Last, First, Middle Initial)

Mailing Address 424 Westwood Rd

City West Palm Beach State FL Zip Code 33401-7934

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

Name of Employer PALM BEACH GARDENS MEDICAL CENTER Occupation CONTROLLER 2

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt **10 / 31 / 2015**

Transaction ID : A32D37C27E1EB487ABBE

Amount of Each Receipt this Period **30.00**

Payroll Deduction: \$10.00/Bi-Weekly

C. JOHN RODRIGUES
Full Name (Last, First, Middle Initial)

Mailing Address 805 Bonnie Ct.

City Allen State TX Zip Code 75002-3622

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation Director of Client Services

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **285.00**

Date of Receipt **10 / 31 / 2015**

Transaction ID : A4E7D0163EC5F45A8B60

Amount of Each Receipt this Period **57.00**

Payroll Deduction: \$19.00/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:	PAGE 20 OF 75
	(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. 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 **364.00**

Date of Receipt **10 / 31 / 2015**
Transaction ID : A456189A3B23441D4966
 Amount of Each Receipt this Period **57.00**
 Payroll Deduction: \$19.00/Bi-Weekly

B. 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 **337.00**

Date of Receipt **10 / 31 / 2015**
Transaction ID : A5A7E2CAEC7CF4C25AD3
 Amount of Each Receipt this Period **57.00**
 Payroll Deduction: \$19.00/Bi-Weekly

C. 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 **2112.00**

Date of Receipt **10 / 31 / 2015**
Transaction ID : AECE1D1D63A614A219A8
 Amount of Each Receipt this Period **288.00**
 Payroll Deduction: \$96.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	402.00
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 75
	<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. AUDREY T ANDREWS
 Full Name (Last, First, Middle Initial)
 Mailing Address 702 Penfolds Ln
 City Coppel 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 **4224.00**

Date of Receipt **10 / 31 / 2015**
Transaction ID : A4C2ED965A7214302AA4
 Amount of Each Receipt this Period **576.00**
 Payroll Deduction: \$192.00/Bi-Weekly

B. 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 **418.00**

Date of Receipt **10 / 31 / 2015**
Transaction ID : A0A81E945E69D4C37A4A
 Amount of Each Receipt this Period **57.00**
 Payroll Deduction: \$19.00/Bi-Weekly

C. JOHN QUINN
 Full Name (Last, First, Middle Initial)
 Mailing Address 1138 Pine Valley Rd
 City Griffin State GA Zip Code 30224-4953
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SPALDING REGIONAL HOSPITAL Occupation CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **836.00**

Date of Receipt **10 / 31 / 2015**
Transaction ID : A1A6D9ECAD25046D2996
 Amount of Each Receipt this Period **114.00**
 Payroll Deduction: \$38.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... **747.00**
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 75
	<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. 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 ▼ **418.00**

Date of Receipt **10 / 31 / 2015**

Transaction ID : AEC9B00D5B5E14CA1A89

Amount of Each Receipt this Period **57.00**

Payroll Deduction: \$19.00/Bi-Weekly

B. 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 ▼ **330.00**

Date of Receipt **10 / 31 / 2015**

Transaction ID : AAAB7329BF1DD4EB8A26

Amount of Each Receipt this Period **45.00**

Payroll Deduction: \$15.00/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 ▼ **600.00**

Date of Receipt **10 / 31 / 2015**

Transaction ID : A30FE6058792943EFA00

Amount of Each Receipt this Period **120.00**

Payroll Deduction: \$40.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... **222.00**

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 75
	<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. 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 **418.00**

Date of Receipt **10 / 31 / 2015**
Transaction ID : A5DAED75209D140C58CC
 Amount of Each Receipt this Period **57.00**
 Payroll Deduction: \$19.00/Bi-Weekly

B. 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
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ATLANTA MEDICAL CENTER Occupation CHRO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **304.00**

Date of Receipt **10 / 31 / 2015**
Transaction ID : A35087DFE3214424989B
 Amount of Each Receipt this Period **57.00**
 Payroll Deduction: \$19.00/Bi-Weekly

C. 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 **836.00**

Date of Receipt **10 / 31 / 2015**
Transaction ID : A92D51EE412C742FD9AD
 Amount of Each Receipt this Period **114.00**
 Payroll Deduction: \$38.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	228.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Mailing Address 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 ▼ **418.00**

Date of Receipt **10 / 31 / 2015**

Transaction ID : A1808C605B4254B0FBE2

Amount of Each Receipt this Period **57.00**

Payroll Deduction: \$19.00/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 ▼ **846.34**

Date of Receipt **10 / 31 / 2015**

Transaction ID : A5330D67F53FE4AB2B25

Amount of Each Receipt this Period **115.41**

Payroll Deduction: \$38.47/Bi-Weekly

C. DOUGLAS E RABE
Full Name (Last, First, Middle Initial)

Mailing Address 7746 Eagle Trl

City Dallas State TX Zip Code 75238-4115

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation VP, TAXATION

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **535.00**

Date of Receipt **10 / 31 / 2015**

Transaction ID : ADD19A60DAE6745DEAFB

Amount of Each Receipt this Period **117.00**

Payroll Deduction: \$39.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... **289.41**

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 75
	<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. 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 ▼ **858.00**

Date of Receipt **10 / 31 / 2015**

Transaction ID : A6A7DD746DCEC4CADAD

Amount of Each Receipt this Period **117.00**

Payroll Deduction: \$39.00/Bi-Weekly

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

Mailing Address 6905 Villa Hermosa Dr

City El Paso State TX Zip Code 79912-2341

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **858.00**

Date of Receipt **10 / 31 / 2015**

Transaction ID : AF647294C439C4C2389C

Amount of Each Receipt this Period **117.00**

Payroll Deduction: \$39.00/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 ▼ **418.00**

Date of Receipt **10 / 31 / 2015**

Transaction ID : A8C642BA7350B4668AB6

Amount of Each Receipt this Period **57.00**

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ▶ **291.00**

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 75
	<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. 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 ▼ **858.00**

Date of Receipt **10 / 31 / 2015**

Transaction ID : ABF5884A3CE404BE0BB8

Amount of Each Receipt this Period **117.00**

Payroll Deduction: \$39.00/Bi-Weekly

B. 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 ▼ **836.00**

Date of Receipt **10 / 31 / 2015**

Transaction ID : A46603E7DDEC04CA787A

Amount of Each Receipt this Period **114.00**

Payroll Deduction: \$38.00/Bi-Weekly

C. 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 ▼ **440.00**

Date of Receipt **10 / 31 / 2015**

Transaction ID : A598375971B064FE0A38

Amount of Each Receipt this Period **60.00**

Payroll Deduction: \$20.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... **291.00**

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 75
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	<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. 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 ▼ **440.00**

Date of Receipt **10 / 31 / 2015**

Transaction ID : AE70E0A7FB6AB4B90A77

Amount of Each Receipt this Period **60.00**

Payroll Deduction: \$20.00/Bi-Weekly

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

Mailing Address 401 N Church St

City McKinney State TX Zip Code 75069-3854

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation VP, IT TECHNOLOGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **990.00**

Date of Receipt **10 / 31 / 2015**

Transaction ID : AB678BE5F45AA4745A46

Amount of Each Receipt this Period **135.00**

Payroll Deduction: \$45.00/Bi-Weekly

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

Mailing Address 1445 Ross Avenue Suite 1400

City Dallas State TX Zip Code 75202-2703

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **418.00**

Date of Receipt **10 / 31 / 2015**

Transaction ID : ABDE80CC64C99466F96A

Amount of Each Receipt this Period **57.00**

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... **252.00**

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 75
	<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. MICHELE SZKOLNICKI
 Full Name (Last, First, Middle Initial)
 Mailing Address 308 Foulke Lane
 City Springfield State PA Zip Code 19064-1109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHCARE CORPORATION Occupation Director, Market Outpatient Services
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **247.00**

Date of Receipt **10 / 31 / 2015**
Transaction ID : A68080353BEB64C50BFE
 Amount of Each Receipt this Period **57.00**
 Payroll Deduction: \$19.00/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 **858.00**

Date of Receipt **10 / 31 / 2015**
Transaction ID : A6707638A6A49494C881
 Amount of Each Receipt this Period **117.00**
 Payroll Deduction: \$39.00/Bi-Weekly

C. 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 **858.00**

Date of Receipt **10 / 31 / 2015**
Transaction ID : A765F326A9A4C4618970
 Amount of Each Receipt this Period **117.00**
 Payroll Deduction: \$39.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	291.00
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 75
	<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. WESLEY CHICK

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 ▼
468.00

Date of Receipt
10 / 31 / 2015
Transaction ID : A773B50A699794394AAF

Amount of Each Receipt this Period
117.00

Payroll Deduction: \$39.00/Bi-Weekly

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

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 ▼
858.00

Date of Receipt
10 / 31 / 2015
Transaction ID : A5A12B199AF8B4EE6B0C

Amount of Each Receipt this Period
117.00

Payroll Deduction: \$39.00/Bi-Weekly

Full Name (Last, First, Middle Initial)
C. DAVID L ARCHER

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 ▼
2112.00

Date of Receipt
10 / 31 / 2015
Transaction ID : AC2CB8DD5094B494DFCF

Amount of Each Receipt this Period
288.00

Payroll Deduction: \$96.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ▶ 522.00

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 75
	<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. 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 **2112.00**

Date of Receipt **10 / 31 / 2015**
Transaction ID : A52FE10DA39704A2D80D
 Amount of Each Receipt this Period **288.00**
 Payroll Deduction: \$96.00/Bi-Weekly

B. KAREN R FOWLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 8306 Turquoise St
 City El Paso State TX Zip Code 79904-2513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PROVIDENCE MEMORIAL HOSPITAL Occupation ASST VP NURSING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **418.00**

Date of Receipt **10 / 31 / 2015**
Transaction ID : A16849E23F1D046C6816
 Amount of Each Receipt this Period **57.00**
 Payroll Deduction: \$19.00/Bi-Weekly

C. LORI HOLMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 7213 ELLIS ROAD
 City Fort Worth State TX Zip Code 76112-4301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHCARE CORPORATION Occupation Manager, Human Resources
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **418.00**

Date of Receipt **10 / 31 / 2015**
Transaction ID : A27304E19E42446D1836
 Amount of Each Receipt this Period **57.00**
 Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	402.00
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 75
	<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. ENRIQUE MARTINEZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 1445 Ross Avenue
 Suite 1400
 City Dallas State TX Zip Code 75202-2703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PROVIDENCE MEMORIAL HOSPITAL Occupation CMO
 Receipt For: Primary General Other (specify)

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2015
Transaction ID : A363A778A56794232B96
 Amount of Each Receipt this Period
 57.00
 Payroll Deduction: \$19.00/Bi-Weekly
 Aggregate Year-to-Date ▼
 418.00

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)

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2015
Transaction ID : AE9689454B3D14391AA9
 Amount of Each Receipt this Period
 117.00
 Payroll Deduction: \$39.00/Bi-Weekly
 Aggregate Year-to-Date ▼
 858.00

C. 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)

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2015
Transaction ID : A40FD1F9839CE4340B0A
 Amount of Each Receipt this Period
 288.00
 Payroll Deduction: \$96.00/Bi-Weekly
 Aggregate Year-to-Date ▼
 1827.00

SUBTOTAL of Receipts This Page (optional).....▶	462.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 32 OF 75
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. 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 ▼
418.00

Date of Receipt
10 / 31 / 2015
Transaction ID : AA08C899B149744C6BDE

Amount of Each Receipt this Period
57.00

Payroll Deduction: \$19.00/Bi-Weekly

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

Mailing Address 3806 Harlan Dr

City State Zip Code
Sachse TX 75048-1912

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
418.00

Date of Receipt
10 / 31 / 2015
Transaction ID : A243FBDEC11494FEBAD4

Amount of Each Receipt this Period
57.00

Payroll Deduction: \$19.00/Bi-Weekly

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

Mailing Address 5909 LUTHER AVE #2304

City State Zip Code
Dallas TX 75225-5914

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

Name of Employer Occupation
CONIFER Senior Director, Government Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2112.00

Date of Receipt
10 / 31 / 2015
Transaction ID : A0D31A68277B04882A5D

Amount of Each Receipt this Period
288.00

Payroll Deduction: \$96.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	402.00
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 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. DAVID W BORDOFSKE
Full Name (Last, First, Middle Initial)

Mailing Address 5001 Ashland Belle 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 ▼ **880.00**

Date of Receipt **10 / 31 / 2015**

Transaction ID : A1737579E328840E89CF

Amount of Each Receipt this Period **120.00**

Payroll Deduction: \$40.00/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 ▼ **836.00**

Date of Receipt **10 / 31 / 2015**

Transaction ID : A08F68EB700C84BC3950

Amount of Each Receipt this Period **114.00**

Payroll Deduction: \$38.00/Bi-Weekly

C. 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 ▼ **418.00**

Date of Receipt **10 / 31 / 2015**

Transaction ID : A68E36A605F3B471C870

Amount of Each Receipt this Period **57.00**

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ▶ **291.00**

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 75
	<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 ▼ 2115.30

Date of Receipt 10 / 31 / 2015
Transaction ID : A42B3BD02D1EB409D93E

Amount of Each Receipt this Period 288.45

Payroll Deduction: \$96.15/Bi-Weekly

B. 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 ▼ 418.00

Date of Receipt 10 / 31 / 2015
Transaction ID : AF364A2E181B34A888D3

Amount of Each Receipt this Period 57.00

Payroll Deduction: \$19.00/Bi-Weekly

C. 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 ▼ 507.00

Date of Receipt 10 / 31 / 2015
Transaction ID : AA56B29FE8D63403FA8A

Amount of Each Receipt this Period 117.00

Payroll Deduction: \$39.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ▶ 462.45

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 75
	<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. LISA A. SMITH
Full Name (Last, First, Middle Initial)

Mailing Address 25418 Twister Trail

City Spring State TX Zip Code 77373-7657

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

Name of Employer CONIFER Occupation Director MECS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 247.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2015

Transaction ID : ADF3008F3C04545A1815

Amount of Each Receipt this Period 57.00

Payroll Deduction: \$19.00/Bi-Weekly

B. 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 ▼ 418.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2015

Transaction ID : A0505AD2B4FB3461F931

Amount of Each Receipt this Period 57.00

Payroll Deduction: \$19.00/Bi-Weekly

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

Mailing Address 3080 Canterbury Dr

City Boca Raton State FL Zip Code 33434

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation REGIONAL CMO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 418.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2015

Transaction ID : A3EAF83B7C09B4965863

Amount of Each Receipt this Period 57.00

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	171.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 75
	<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 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 **2112.00**

Date of Receipt **10 / 31 / 2015**
Transaction ID : A3C3263E10C5E43D8810
 Amount of Each Receipt this Period **288.00**
 Payroll Deduction: \$96.00/Bi-Weekly

B. 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 **2112.00**

Date of Receipt **10 / 31 / 2015**
Transaction ID : AFE090309A43547FCB67
 Amount of Each Receipt this Period **288.00**
 Payroll Deduction: \$96.00/Bi-Weekly

C. 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 **418.00**

Date of Receipt **10 / 31 / 2015**
Transaction ID : A4AB27304B01543D9B16
 Amount of Each Receipt this Period **57.00**
 Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	633.00
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 75
	<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. STAN V. HOLM
Full Name (Last, First, Middle Initial)

Mailing Address 1445 Ross Avenue
Suite 1400

City Dallas State TX Zip Code 75202-2703

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

Name of Employer West Valley Hospital Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 418.00

Date of Receipt 10 / 31 / 2015
Transaction ID : A20C92CBE8C1F41E2B0A

Amount of Each Receipt this Period 57.00

Payroll Deduction: \$19.00/Bi-Weekly

B. 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 ▼ 418.00

Date of Receipt 10 / 31 / 2015
Transaction ID : A1F90DD7609064A5284B

Amount of Each Receipt this Period 57.00

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 ▼ 858.00

Date of Receipt 10 / 31 / 2015
Transaction ID : AF6F77B85536A4BFEA46

Amount of Each Receipt this Period 117.00

Payroll Deduction: \$39.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ▶ 231.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 75
	<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
 Name of Employer Detroit Medical Center Occupation CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.28

Date of Receipt 10 / 31 / 2015
Transaction ID : A69E18BC88FE24236BB0
 Amount of Each Receipt this Period 57.72
 Payroll Deduction: \$19.24/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
 Name of Employer MacNeal Hospital Occupation CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 418.00

Date of Receipt 10 / 31 / 2015
Transaction ID : A25FE02B4EFF64F53948
 Amount of Each Receipt this Period 57.00
 Payroll Deduction: \$19.00/Bi-Weekly

C. IRIS A. TAYLOR
 Full Name (Last, First, Middle Initial)
 Mailing Address 549 Fiske Drive
 City Detroit State MI Zip Code 48214-2988
 Name of Employer Detroit Receiving Hospital Occupation CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 819.00

Date of Receipt 10 / 31 / 2015
Transaction ID : A9ED070C236784C5C80B
 Amount of Each Receipt this Period 117.00
 Payroll Deduction: \$39.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	231.72
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 75
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. GARY L HONTS JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 7707 N 127th Ave
 City Omaha State NE Zip Code 68142-1723
 FEC ID number of contributing federal political committee. **C**
 Name of Employer JFK Memorial Hospital Occupation CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2112.00

Date of Receipt 10 / 31 / 2015
Transaction ID : A6567FDE330134E5F856
 Amount of Each Receipt this Period 288.00
 Payroll Deduction: \$96.00/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 ▼ 418.00

Date of Receipt 10 / 31 / 2015
Transaction ID : ACFE2925E213E449FA5B
 Amount of Each Receipt this Period 57.00
 Payroll Deduction: \$19.00/Bi-Weekly

C. FRANK L. MOLINARO
 Full Name (Last, First, Middle Initial)
 Mailing Address 1445 Ross Avenue Suite 1400
 City Dallas State TX Zip Code 75202-2703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Arrowhead Hospital Occupation CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 858.00

Date of Receipt 10 / 31 / 2015
Transaction ID : A7CF9F52633994933ACB
 Amount of Each Receipt this Period 117.00
 Payroll Deduction: \$39.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	462.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Mailing Address 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 ▼ 858.00

Date of Receipt 10 / 31 / 2015
Transaction ID : A9B8223D2E6844E95ABD

Amount of Each Receipt this Period 117.00

Payroll Deduction: \$39.00/Bi-Weekly

B. 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 ▼ 440.00

Date of Receipt 10 / 31 / 2015
Transaction ID : A0EBD2AF7A9924B59A3D

Amount of Each Receipt this Period 60.00

Payroll Deduction: \$20.00/Bi-Weekly

C. SHELLEY GILES
Full Name (Last, First, Middle Initial)

Mailing Address 3803 Stockton Ln

City Dallas State TX Zip Code 75287-4919

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation DIR, RELOCATION

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt 10 / 31 / 2015
Transaction ID : A6116A32CFB664C228F9

Amount of Each Receipt this Period 60.00

Payroll Deduction: \$20.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ▶ 237.00

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 41 OF 75
(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. NORMA A ZERINGUE
 Full Name (Last, First, Middle Initial)
 Mailing Address 5757 Southwestern Blvd
 City Dallas State TX Zip Code 75209-3437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CONIFER Occupation SVP, STRATEGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 418.00

Date of Receipt 10 / 31 / 2015
Transaction ID : AEC132A24BEFF4327AE8
 Amount of Each Receipt this Period 57.00
 Payroll Deduction: \$19.00/Bi-Weekly

B. DANIEL M KARNUTA
 Full Name (Last, First, Middle Initial)
 Mailing Address 981 Patrician Ct
 City McKinney State TX Zip Code 75069-8781
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CONIFER Occupation SVP & CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 640.00

Date of Receipt 10 / 31 / 2015
Transaction ID : AD52DED6F73E74621867
 Amount of Each Receipt this Period 105.00
 Payroll Deduction: \$35.00/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 ▼ 550.00

Date of Receipt 10 / 31 / 2015
Transaction ID : A46D4A60F280C4327A13
 Amount of Each Receipt this Period 75.00
 Payroll Deduction: \$25.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ▶ 237.00
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 75
	<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"/>	<input type="checkbox"/> 17

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

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

Mailing Address 819 Cambridge Manor Ln

City Coppell	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 ▼ **264.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2015

Transaction ID : AFF084DD671AD40F799E

Amount of Each Receipt this Period

6	5	4	3	2	1	0	.	0	0
									36.00

Payroll Deduction: \$12.00/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 ▼ **624.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2015

Transaction ID : A9B7B3030F4714A459A5

Amount of Each Receipt this Period

6	5	4	3	2	1	0	.	0	0
									117.00

Payroll Deduction: \$39.00/Bi-Weekly

C. 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 ▼ **418.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2015

Transaction ID : A78F2CD2E53A04499814

Amount of Each Receipt this Period

6	5	4	3	2	1	0	.	0	0
									57.00

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	210.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 75
	<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. 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 ▼ **836.00**

Date of Receipt **10 / 31 / 2015**

Transaction ID : A9305DCC91A1144379CE

Amount of Each Receipt this Period **114.00**

Payroll Deduction: \$38.00/Bi-Weekly

B. 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 ▼ **738.00**

Date of Receipt **10 / 31 / 2015**

Transaction ID : A8976890AFE214562937

Amount of Each Receipt this Period **117.00**

Payroll Deduction: \$39.00/Bi-Weekly

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

Mailing Address 391 E Milgeo Ave

City Ripon State CA Zip Code 95366-2120

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

Name of Employer DOCTORS HOSPITAL OF MANTECA Occupation CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **858.00**

Date of Receipt **10 / 31 / 2015**

Transaction ID : A7EA011547A194566A66

Amount of Each Receipt this Period **117.00**

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 44 OF 75
	<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. 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 ▼ **418.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2015

Transaction ID : A9B8946F1D0834603881

Amount of Each Receipt this Period

Amount	2015
	57.00

Payroll Deduction: \$19.00/Bi-Weekly

B. BARBARA EUSEBIO
Full Name (Last, First, Middle Initial)

Mailing Address 82-814 Pembroke Lane

City Indio	State CA	Zip Code 92201-9692
---------------	-------------	------------------------

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

Name of Employer Tenet Healthcare Corp	Occupation CNO
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **285.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2015

Transaction ID : A62C7F8D3F3284E5B895

Amount of Each Receipt this Period

Amount	2015
	57.00

Payroll Deduction: \$19.00/Bi-Weekly

C. KATHLEEN TREGEAR
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 ▼ **468.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2015

Transaction ID : A202733FEEDF34189AED

Amount of Each Receipt this Period

Amount	2015
	117.00

Payroll Deduction: \$39.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	231.00
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 75
	<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. LERRY CROCKER
 Full Name (Last, First, Middle Initial)
 Mailing Address 2386 Liledoun Rd
 City State Zip Code
 Taylorsville NC 28681-8892
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 FRYE REGIONAL MEDICAL CENTER CNO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2112.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2015
Transaction ID : A50EBBF556C39445E823
 Amount of Each Receipt this Period
 288.00
 Payroll Deduction: \$96.00/Bi-Weekly

B. ALTA A. GORDON
 Full Name (Last, First, Middle Initial)
 Mailing Address 30014 GARDENIA LN
 City State Zip Code
 Southfield MI 48076-2091
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Detroit Medical Center CNO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 769.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 03 / 2015
Transaction ID : ADFFB9B8ABCD8432D96E
 Amount of Each Receipt this Period
 38.47
 Payroll Deduction: \$38.47/Bi-Weekly

C. 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 ▼
 858.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2015
Transaction ID : AFE62D095A24B445CB3C
 Amount of Each Receipt this Period
 117.00
 Payroll Deduction: \$39.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	443.47
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 75
	<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. 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 ▼ 858.00

Date of Receipt 10 / 31 / 2015
Transaction ID : A158A7E13E76C42269BD
 Amount of Each Receipt this Period 117.00
 Payroll Deduction: \$39.00/Bi-Weekly

B. ANDREI SORAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 28 Lothrop Street
 City Newtonville State MA Zip Code 02460-1420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Detroit Medical Center Occupation COO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 858.00

Date of Receipt 10 / 31 / 2015
Transaction ID : AE5712B2712B44114AEA
 Amount of Each Receipt this Period 117.00
 Payroll Deduction: \$39.00/Bi-Weekly

C. RAYMOND J FOSTER
 Full Name (Last, First, Middle Initial)
 Mailing Address 68220 Concepcion Rd
 City Cathedral City State CA Zip Code 92234-3657
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DESERT REGIONAL MEDICAL CENTER Occupation DIR-IMAGING SERVICES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 24 / 2015
Transaction ID : A73E0800553174F8C9E4
 Amount of Each Receipt this Period 20.00
 Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	254.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 75
	<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. SHEENA D. JOHNSON
Full Name (Last, First, Middle Initial)
Mailing Address 4573 Pennhurst St
City Philadelphia State PA Zip Code 19124-3825
FEC ID number of contributing federal political committee. **C**
Name of Employer HAHNEMANN UNIVERSITY HOSPITAL Occupation Radiology Diagnostic Tech
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **220.00**

Date of Receipt **10 / 24 / 2015**
Transaction ID : AF1094CCB21E74D78804
Amount of Each Receipt this Period **20.00**
Payroll Deduction: \$10.00/Bi-Weekly

B. JANE E HAMILTON
Full Name (Last, First, Middle Initial)
Mailing Address 8050 Royal Saint Georges Ln
City Duluth State GA Zip Code 30097-1647
FEC ID number of contributing federal political committee. **C**
Name of Employer ATLANTA MEDICAL CENTER Occupation DIR, SURGICAL SVCS
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **220.00**

Date of Receipt **10 / 24 / 2015**
Transaction ID : A822E8D8A384547ADA7E
Amount of Each Receipt this Period **20.00**
Payroll Deduction: \$10.00/Bi-Weekly

C. RYAN D. LEE
Full Name (Last, First, Middle Initial)
Mailing Address 24 Bridle Path Ln
City Bluffton State SC Zip Code 29910-7600
FEC ID number of contributing federal political committee. **C**
Name of Employer COASTAL CAROLINA MEDICAL CENTER Occupation Director, Physicians Services
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **220.00**

Date of Receipt **10 / 24 / 2015**
Transaction ID : AE5CF82BD0244480AA3A
Amount of Each Receipt this Period **20.00**
Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... **60.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 75
	<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. JORGE DIAZ

Mailing Address 1350 SW 122nd Ave
Apt 221

City Miami State FL Zip Code 33184-2864

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

Name of Employer Occupation
CORAL GABLES HOSPITAL DIR, CARDIOPULMONARY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
10 / 24 / 2015
Transaction ID : A6BE6B87081504B98A22

Amount of Each Receipt this Period
200.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)
B. ALFRED SCHULS

Mailing Address 5017 Prosperity Ridge Rd

City Charlotte State NC Zip Code 28269-1538

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

Name of Employer Occupation
PIEDMONT MEDICAL CENTER DIR, CARDIOVASCULAR SVCS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
10 / 24 / 2015
Transaction ID : A63E2D1E8AA2A4D339AC

Amount of Each Receipt this Period
200.00

Payroll Deduction: \$10.00/Bi-Weekly

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

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 Occupation
HAHNEMANN UNIVERSITY HOSPITAL DIRECTOR OF OPERATIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
418.00

Date of Receipt
10 / 24 / 2015
Transaction ID : A0B5A990A6117443F8F3

Amount of Each Receipt this Period
38.00

Payroll Deduction: \$19.00/Bi-Weekly

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 49 OF 75
	(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. LINDA M. BENDER
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 JFK Memorial Hospital Occupation Director, Business Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
10 / 31 / 2015
Transaction ID : A5392FB0B738240FF9F1

Amount of Each Receipt this Period
30.00

Payroll Deduction: \$10.00/Bi-Weekly

B. CHAD W LAND
Full Name (Last, First, Middle Initial)

Mailing Address 215 Durango Dr

City Trophy Club State TX Zip Code 76262-5294

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation MGR, AUDIT SVCS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
10 / 31 / 2015
Transaction ID : A9AC0B41A5EC140E0811

Amount of Each Receipt this Period
30.00

Payroll Deduction: \$10.00/Bi-Weekly

C. FELITA A CARTER
Full Name (Last, First, Middle Initial)

Mailing Address 290 E Plantation Dr

City Sharpsburg State GA Zip Code 30277-1958

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation DIR, MGD CARE ECONOMICS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
10 / 31 / 2015
Transaction ID : AE62A6F8B1FD74B9F891

Amount of Each Receipt this Period
30.00

Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	90.00
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 50 OF 75
	<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. INEZ VARGAS
Full Name (Last, First, Middle Initial)

Mailing Address 1219 Cherry Spring Dr

City Houston State TX Zip Code 77038-2117

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

Name of Employer TENET PATIENT FINCL SVCS Occupation DIR, REV CYCLE MGMT II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2015
Transaction ID : A0C56EC246133417C942

Amount of Each Receipt this Period 30.00

Payroll Deduction: \$10.00/Bi-Weekly

B. CURTIS M. PERRYMAN
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 Director, C&D

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2015
Transaction ID : A0016ECD6A59D4C53B07

Amount of Each Receipt this Period 30.00

Payroll Deduction: \$10.00/Bi-Weekly

C. SHERRI MOORE
Full Name (Last, First, Middle Initial)

Mailing Address 10989 County Road 59

City Celina State TX Zip Code 75009-2280

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation MGR, HUMAN RESOURCES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2015
Transaction ID : A0929623D2C704BFA8C7

Amount of Each Receipt this Period 30.00

Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00

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 51 OF 75
	<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. ROBERT D COKER
Full Name (Last, First, Middle Initial)

Mailing Address 7505 Dana Ln

City North Richland Hills State TX Zip Code 76182-4551

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation SR DIR, QUALITY MGT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2015
Transaction ID : A68F48CD479764A789CD

Amount of Each Receipt this Period 30.00

Payroll Deduction: \$10.00/Bi-Weekly

B. MICHAEL A KENDRICK
Full Name (Last, First, Middle Initial)

Mailing Address 1535 Lovell Lndg

City Columbia State IL Zip Code 62236-2857

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

Name of Employer DES PERES HOSPITAL Occupation COO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2015
Transaction ID : AC7409DA6669142D58AB

Amount of Each Receipt this Period 30.00

Payroll Deduction: \$10.00/Bi-Weekly

C. HANK D IRICK JR.
Full Name (Last, First, Middle Initial)

Mailing Address 3305 Elam Ct

City Plano State TX Zip Code 75093-8087

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation SR DIR, COST REPORTING

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2015
Transaction ID : A2DAB684479434FE7B6F

Amount of Each Receipt this Period 30.00

Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00

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 52 OF 75
	<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. HOAI-SON L NGUYEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 303 Prince Albert Ct
 City Richardson State TX Zip Code 75081-5059
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHCARE CORPORATION Occupation DIR, IS HR/PR & RPT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **220.00**

Date of Receipt **10 / 31 / 2015**
Transaction ID : A74B0BBAC3A064A36859
 Amount of Each Receipt this Period **30.00**
 Payroll Deduction: \$10.00/Bi-Weekly

B. MARK L ATTEBERRY
 Full Name (Last, First, Middle Initial)
 Mailing Address RR 4 Box 76F
 City Shelbyville State IL Zip Code 62565-8664
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHCARE CORPORATION Occupation MGR, PROJECT C&D II
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **220.00**

Date of Receipt **10 / 31 / 2015**
Transaction ID : A75E06B867DD24B459A2
 Amount of Each Receipt this Period **30.00**
 Payroll Deduction: \$10.00/Bi-Weekly

C. KIM C PULLIAM
 Full Name (Last, First, Middle Initial)
 Mailing Address 3016 Duplex Rd
 City Spring Hill State TN Zip Code 37174-9216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHCARE CORPORATION Occupation DIR, C&D
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **220.00**

Date of Receipt **10 / 31 / 2015**
Transaction ID : ACB7E42839CEA4E25BB7
 Amount of Each Receipt this Period **30.00**
 Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	90.00
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 53 OF 75
	<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"/>	<input type="checkbox"/> 17

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

A. ANTHONY BAIRD
Full Name (Last, First, Middle Initial)

Mailing Address 4940 Pikes Peak Dr

City El Paso	State TX	Zip Code 79904-2023
-----------------	-------------	------------------------

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

Name of Employer PROVIDENCE MEMORIAL HOSPITAL	Occupation ADMIN DIR DCQI
--	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2015

Transaction ID : A77C193E2D9D34BE1A1C

Amount of Each Receipt this Period
30.00

Payroll Deduction: \$10.00/Bi-Weekly

B. NANCY FOSTER
Full Name (Last, First, Middle Initial)

Mailing Address 9603 Forest Ridge Cir

City Davie	State FL	Zip Code 33328-6791
---------------	-------------	------------------------

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 ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2015

Transaction ID : A0412D0787B57484E8E0

Amount of Each Receipt this Period
30.00

Payroll Deduction: \$10.00/Bi-Weekly

C. MARVIS E. PRICE
Full Name (Last, First, Middle Initial)

Mailing Address 421 Sunrise Way

City Juno Beach	State FL	Zip Code 33408-2044
--------------------	-------------	------------------------

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

Name of Employer PALM BEACH GARDENS MEDICAL CENTER	Occupation Chief Nursing Officer
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2015

Transaction ID : A08EA5A757F834A99972

Amount of Each Receipt this Period
30.00

Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	90.00
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 54 OF 75
	<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. ERIC M DELGADO
 Full Name (Last, First, Middle Initial)
 Mailing Address 4734 Briercrest Ave
 City Lakewood State CA Zip Code 90713-2312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHCARE CORPORATION Occupation DIR, REGIONAL FINANCE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **220.00**

Date of Receipt **10 / 31 / 2015**
Transaction ID : A6FA0AFF028714D8399B
 Amount of Each Receipt this Period **30.00**
 Payroll Deduction: \$10.00/Bi-Weekly

B. RICHARD B LEE
 Full Name (Last, First, Middle Initial)
 Mailing Address 925 Penshore Ter
 City Glendale State CA Zip Code 91207-1113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHCARE CORPORATION Occupation DIR, PROPERTY TAX
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **220.00**

Date of Receipt **10 / 31 / 2015**
Transaction ID : A3E906018A6194C4F931
 Amount of Each Receipt this Period **30.00**
 Payroll Deduction: \$10.00/Bi-Weekly

C. PAUL SMITH
 Full Name (Last, First, Middle Initial)
 Mailing Address 24 Willow Oak Ln
 City Saint Louis State MO Zip Code 63122-4714
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHCARE CORPORATION Occupation SR DIR, OUTPT STRATG DEV
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **220.00**

Date of Receipt **10 / 31 / 2015**
Transaction ID : AA97FCBB083EC4FCDAE3
 Amount of Each Receipt this Period **30.00**
 Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... **90.00**
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 55 OF 75
	<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. MOISES PADILLA
 Full Name (Last, First, Middle Initial)
 Mailing Address 450 NE 5th St
 Unit 251
 City Ft Lauderdale State FL Zip Code 33301-3461
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET PATIENT FINCL SVCS Occupation DIR, PA MARKET
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **220.00**

Date of Receipt **10 / 31 / 2015**
Transaction ID : A8AC61EB5A56C463EA56
 Amount of Each Receipt this Period **30.00**
 Payroll Deduction: \$10.00/Bi-Weekly

B. CAROL HAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 4417 Knollview Dr
 City Plano State TX Zip Code 75024-4303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHCARE CORPORATION Occupation MGR, MANAGED CARE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **220.00**

Date of Receipt **10 / 31 / 2015**
Transaction ID : A0E58F4C8A0E94FC09B2
 Amount of Each Receipt this Period **30.00**
 Payroll Deduction: \$10.00/Bi-Weekly

C. GREGORY P. NAGENGAST
 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 CONIFER Occupation Senior Director, Regional Operations
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **220.00**

Date of Receipt **10 / 31 / 2015**
Transaction ID : A59E0DB4FAFA34C74B47
 Amount of Each Receipt this Period **30.00**
 Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	90.00
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 56 OF 75
	<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. LYNNE SCROGGINS
 Full Name (Last, First, Middle Initial)
 Mailing Address 3777 Peachtree Rd NE
 Apt 632
 City Atlanta State GA Zip Code 30319-5209
 Name of Employer ATLANTA MEDICAL CENTER Occupation ASSOCIATE ADMINISTRATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2015
Transaction ID : A9E1A21CC9CCA4E78A9C
 Amount of Each Receipt this Period 30.00
 Payroll Deduction: \$10.00/Bi-Weekly

B. MARCUS CANO
 Full Name (Last, First, Middle Initial)
 Mailing Address 7008 GRANERO DR
 City El Paso State TX Zip Code 79912-2818
 Name of Employer SIERRA PROVIDENCE EASTSIDE HOSPITAL Occupation Marketing Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2015
Transaction ID : AC079358FA3B64B5FADD
 Amount of Each Receipt this Period 30.00
 Payroll Deduction: \$10.00/Bi-Weekly

C. KIMBERLY P BROWN
 Full Name (Last, First, Middle Initial)
 Mailing Address 2634 Forest Pebble
 City San Antonio State TX Zip Code 78232-4141
 Name of Employer TENET HEALTHCARE CORPORATION Occupation SR DIR, COMPLIANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2015
Transaction ID : A9CF17D436B814B5596E
 Amount of Each Receipt this Period 30.00
 Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	90.00
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 57 OF 75
	<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. SAMUEL G HARRIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 933 Havenhurst Dr
 City West Hollywood State CA Zip Code 90046-6919
 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 ▼ 220.00

Date of Receipt 10 / 31 / 2015
Transaction ID : AE44E3679DB404E76949
 Amount of Each Receipt this Period 30.00
 Payroll Deduction: \$10.00/Bi-Weekly

B. BRIAN L. SEHER
 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 Market CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2015
Transaction ID : A0F250E98AB4B4494B92
 Amount of Each Receipt this Period 30.00
 Payroll Deduction: \$10.00/Bi-Weekly

C. WILLIAM M LOWES
 Full Name (Last, First, Middle Initial)
 Mailing Address 428 Tribal Woods Rd
 City Collierville State TN Zip Code 38017-3404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SAINT FRANCIS HOSPITAL-BARTLETT Occupation DBD-ASSOC ADMINISTRATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2015
Transaction ID : A3CA3F2A6C1114FECBEB
 Amount of Each Receipt this Period 30.00
 Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	90.00
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 58 OF 75
	<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. WAYNE E COBB
 Full Name (Last, First, Middle Initial)
 Mailing Address 4001 Orchid Ln
 City Mansfield State TX Zip Code 76063-5577
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHCARE CORPORATION Occupation MGR, TAX
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **220.00**

Date of Receipt 10 / 31 / 2015
Transaction ID : A60096C6A31C14CC6A44
 Amount of Each Receipt this Period **30.00**
 Payroll Deduction: \$10.00/Bi-Weekly

B. ALLEN C POSTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 7055 Orchard Vw
 City Edmond State OK Zip Code 73025-1743
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHCARE CORPORATION Occupation DIR, REG PHYS DEVELOPMNT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **220.00**

Date of Receipt 10 / 31 / 2015
Transaction ID : A8573D1B0A6F44350885
 Amount of Each Receipt this Period **30.00**
 Payroll Deduction: \$10.00/Bi-Weekly

C. JULIE K DIPPEL
 Full Name (Last, First, Middle Initial)
 Mailing Address 3706 Ash Glen Dr
 City Spring State TX Zip Code 77388-4154
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHCARE CORPORATION Occupation DIR, ORG LEARNING & DEV
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **220.00**

Date of Receipt 10 / 31 / 2015
Transaction ID : AACF61FA30C3D4C609E4
 Amount of Each Receipt this Period **30.00**
 Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	90.00
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 59 OF 75
	(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. CHARLES R HARBISON JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 4009 Inspiration Cir
 City Carrollton State TX Zip Code 75010-6418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHCARE CORPORATION Occupation DIR, FINANCE A&D
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **220.00**

Date of Receipt **10 / 31 / 2015**
Transaction ID : A72E0DC51A496459E995
 Amount of Each Receipt this Period **30.00**
 Payroll Deduction: \$10.00/Bi-Weekly

B. CORDELIA BARBERA
 Full Name (Last, First, Middle Initial)
 Mailing Address 1200 Cheyenne Dr
 City Desoto State TX Zip Code 75115-7778
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHCARE CORPORATION Occupation DIR, APPLIED CLIN INFO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **220.00**

Date of Receipt **10 / 31 / 2015**
Transaction ID : ABA62171D9E9D4BD6845
 Amount of Each Receipt this Period **30.00**
 Payroll Deduction: \$10.00/Bi-Weekly

C. TIMOTHY RAPER
 Full Name (Last, First, Middle Initial)
 Mailing Address 2333 Salisbury Ct
 City Lewisville State TX Zip Code 75056-5644
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHCARE CORPORATION Occupation DIR, AVIATION
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **220.00**

Date of Receipt **10 / 31 / 2015**
Transaction ID : A21A2C7694CA141B0B65
 Amount of Each Receipt this Period **30.00**
 Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	90.00
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 60 OF 75
	<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. EDWIN BODE
Full Name (Last, First, Middle Initial)
Mailing Address 9597 Gotten Way
City Germantown State TN Zip Code 38139-5657
FEC ID number of contributing federal political committee. **C**
Name of Employer SAINT FRANCIS HOSPITAL Occupation CFO
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **220.00**

Date of Receipt **10 / 31 / 2015**
Transaction ID : AED11C3DBD6F247438FB
Amount of Each Receipt this Period **30.00**
Payroll Deduction: \$10.00/Bi-Weekly

B. SANDRA HILL
Full Name (Last, First, Middle Initial)
Mailing Address 2008 Haversham Dr
City Flower Mound State TX Zip Code 75022-8440
FEC ID number of contributing federal political committee. **C**
Name of Employer TENET HEALTHCARE CORPORATION Occupation DIR, DOC & TRAINING
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **220.00**

Date of Receipt **10 / 31 / 2015**
Transaction ID : A8EE48F46536842E6A77
Amount of Each Receipt this Period **30.00**
Payroll Deduction: \$10.00/Bi-Weekly

C. BRUCE MEARS
Full Name (Last, First, Middle Initial)
Mailing Address 10312 Arvin Hill Rd
City Aubrey State TX Zip Code 76227-6847
FEC ID number of contributing federal political committee. **C**
Name of Employer TENET HEALTHCARE CORPORATION Occupation SR DIR, IS OPERATIONS
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **220.00**

Date of Receipt **10 / 31 / 2015**
Transaction ID : AB3F1CC73C39B4FAEBB8
Amount of Each Receipt this Period **30.00**
Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... **90.00**
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 61 OF 75
	<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. GLORIA M LOERA
 Full Name (Last, First, Middle Initial)
 Mailing Address 3061 Snowy Point Dr
 City El Paso State TX Zip Code 79938-5401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SIERRA PROVIDENCE EASTSIDE HOSPITAL Occupation DIR, NURSING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **220.00**

Date of Receipt **10 / 31 / 2015**
Transaction ID : AEE50508AF977404491A
 Amount of Each Receipt this Period **30.00**
 Payroll Deduction: \$10.00/Bi-Weekly

B. ROBERTA STEWART
 Full Name (Last, First, Middle Initial)
 Mailing Address 27291 Calle De La Rosa
 City San Juan Capo State CA Zip Code 92675-1873
 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 **220.00**

Date of Receipt **10 / 31 / 2015**
Transaction ID : A692001E7C5214AE3AF4
 Amount of Each Receipt this Period **30.00**
 Payroll Deduction: \$10.00/Bi-Weekly

C. SAMUEL ROTH
 Full Name (Last, First, Middle Initial)
 Mailing Address 4365 Greenleaf Ct
 City Concord State CA Zip Code 94518-1941
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHCARE CORPORATION Occupation DIRECTOR GOVERNMENT RELATIONS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **220.00**

Date of Receipt **10 / 31 / 2015**
Transaction ID : A2B5555B1E66C4BCDAB9
 Amount of Each Receipt this Period **30.00**
 Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	90.00
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 62 OF 75
(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. BRADLEY S TALBERT
 Full Name (Last, First, Middle Initial)
 Mailing Address 16 Paddocks Blvd
 City State Zip Code
 Hilton Head SC 29926-3507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HILTON HEAD HOSPITAL COO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2015
Transaction ID : AE1BA23CC8C244EEE83B
 Amount of Each Receipt this Period
 30.00
 Payroll Deduction: \$10.00/Bi-Weekly

B. SUZANNE R. WHITE
 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
 TENET HEALTHCARE CORPORATION Regional Chief Medical Officer
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2015
Transaction ID : A5AC94A00F8044A4D8DF
 Amount of Each Receipt this Period
 30.00
 Payroll Deduction: \$10.00/Bi-Weekly

C. GEORGE PIETRI
 Full Name (Last, First, Middle Initial)
 Mailing Address 2908 Lighthouse Dr
 City State Zip Code
 Denton TX 76210-0094
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 TENET HEALTHCARE CORPORATION MGR, REIMBURSEMENT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2015
Transaction ID : AB596A64FF7E74313851
 Amount of Each Receipt this Period
 30.00
 Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00
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 63 OF 75
	(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
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		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. JACK HARARI
Full Name (Last, First, Middle Initial)

Mailing Address 501 Lido Dr

City Fort Lauderdale State FL Zip Code 33301-2537

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

Name of Employer WEST BOCA MEDICAL CENTER Occupation CHIEF MEDICAL OFFICER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2015
Transaction ID : A261999DDB7EE4735A00

Amount of Each Receipt this Period 30.00

Payroll Deduction: \$10.00/Bi-Weekly

B. JOETTA REETZ
Full Name (Last, First, Middle Initial)

Mailing Address 5209 Glen Canyon Rd

City Fort Worth State TX Zip Code 76137-4105

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation MGR FINC PLN & ANAL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2015
Transaction ID : AB9B006E2BB44405DB4D

Amount of Each Receipt this Period 30.00

Payroll Deduction: \$10.00/Bi-Weekly

C. MARGARET PERREIRA
Full Name (Last, First, Middle Initial)

Mailing Address 2972 Harrow Rd

City Spring Hill State FL Zip Code 34608-4429

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation SR SPEC, CLINICAL PMI

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 228.00

Date of Receipt 10 / 31 / 2015
Transaction ID : AC7BE5DEB42754D28A83

Amount of Each Receipt this Period 57.00

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ▶ 117.00

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 64 OF 75
	<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. JUDITH STIMSON-RUSIN
Full Name (Last, First, Middle Initial)
Mailing Address 11807 Littlestone Ct
City West Palm Beach State FL Zip Code 33412-1621
FEC ID number of contributing federal political committee. **C**
Name of Employer PALM BEACH GARDENS MEDICAL CENTER Occupation CFO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **220.00**

Date of Receipt **10 / 31 / 2015**
Transaction ID : AAFF2B66D8C004615AC5
Amount of Each Receipt this Period **30.00**
Payroll Deduction: \$10.00/Bi-Weekly

B. JOSEPH A DESANTIS
Full Name (Last, First, Middle Initial)
Mailing Address 201 W Lancaster Ave Unit 413
City Ft Worth State TX Zip Code 76102-6669
FEC ID number of contributing federal political committee. **C**
Name of Employer TENET HEALTHCARE CORPORATION Occupation DIR, EXECUTIVE OFFICE
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **220.00**

Date of Receipt **10 / 31 / 2015**
Transaction ID : A4179EBE9CFA94B04A01
Amount of Each Receipt this Period **30.00**
Payroll Deduction: \$10.00/Bi-Weekly

C. SANDRA C HOLMAN
Full Name (Last, First, Middle Initial)
Mailing Address 3874 Heatherbrook Trl
City Vale State NC Zip Code 28168-9570
FEC ID number of contributing federal political committee. **C**
Name of Employer FRYE REGIONAL MEDICAL CENTER Occupation DIR, RADIOLOGY
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **220.00**

Date of Receipt **10 / 31 / 2015**
Transaction ID : A0DA3141711E54528B4F
Amount of Each Receipt this Period **30.00**
Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... **90.00**
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 65 OF 75
	<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. GARRY L GAUSE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1150 Lake Colony Ln
 City Vestavia State AL Zip Code 35242-7423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 BROOKWOOD MEDICAL CENTER CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2015
Transaction ID : A92C54D4448B54787B9E
 Amount of Each Receipt this Period 30.00
 Payroll Deduction: \$10.00/Bi-Weekly

B. JANIS THAYER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1735 Crimson Ter
 City Brentwood State CA Zip Code 94513-2618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 TENET HEALTHCARE CORPORATION SR DIR, LABOR RELATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2015
Transaction ID : AFB718A79A19D4495B70
 Amount of Each Receipt this Period 30.00
 Payroll Deduction: \$10.00/Bi-Weekly

C. MICHAEL N. LANE
 Full Name (Last, First, Middle Initial)
 Mailing Address 5125 Ocean Bluff Ct
 City Seaside State CA Zip Code 93955-6526
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 TWIN CITIES COMMUNITY HOSPITAL COO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2015
Transaction ID : AC97815EBA4084F59B3A
 Amount of Each Receipt this Period 30.00
 Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	90.00
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 66 OF 75
	<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. WEBB COCHRAN
Full Name (Last, First, Middle Initial)

Mailing Address 3961 St Claire Ct

City	State	Zip Code
Atlanta	GA	30319

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

Name of Employer	Occupation
TENET HEALTHCARE CORPORATION	DIR, GOVT RELATIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	17	/	2015

Transaction ID : AB55DB7394FDB4A6E8B2

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

B. JUAN M. FRESQUEZ JR
Full Name (Last, First, Middle Initial)

Mailing Address 22527 MIRAMAR CREST DR

City	State	Zip Code
Tomball	TX	77375-4751

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

Name of Employer	Occupation
HOUSTON NORTHWEST MEDICAL CENTER	COO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2015

Transaction ID : A6130D8746AA64829B01

Amount of Each Receipt this Period

30.00

Payroll Deduction: \$10.00/Bi-Weekly

C. CYNTHIA Z BECKMAN
Full Name (Last, First, Middle Initial)

Mailing Address 1811 N Park Towne Pl

City	State	Zip Code
Philadelphia	PA	19130

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

Name of Employer	Occupation
TENET HEALTHCARE CORPORATION	MGR, LITIGATION

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2015

Transaction ID : A06759BF17C0C4A5AB34

Amount of Each Receipt this Period

30.00

Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	80.00
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 67 OF 75
	<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. BRANDON MAY
 Full Name (Last, First, Middle Initial)
 Mailing Address 3824 TIERRA CHISUM DR
 City El Paso State TX Zip Code 79938-5358
 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 ▼ 220.00

Date of Receipt 10 / 31 / 2015
Transaction ID : A938BEE0324354BB2962
 Amount of Each Receipt this Period 30.00
 Payroll Deduction: \$10.00/Bi-Weekly

B. KARIMA BENTOUNSI
 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 Weiss Memorial Hospital Occupation COO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2015
Transaction ID : A59861B6E23884E32BEE
 Amount of Each Receipt this Period 30.00
 Payroll Deduction: \$10.00/Bi-Weekly

C. SHARON OXENDALE
 Full Name (Last, First, Middle Initial)
 Mailing Address 5627 S THURLOW ST
 City Hinsdale State IL Zip Code 60521-5154
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MacNeal Hospital Occupation COO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2015
Transaction ID : A6082E5379588445BA5F
 Amount of Each Receipt this Period 30.00
 Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	90.00
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 68 OF 75
	<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. DEBORAH J. LEBLANC
 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 Sinai Grace Hospital Occupation CNO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 211.86

Date of Receipt 10 / 31 / 2015
Transaction ID : AD4E8D58D20B04A75A0E
 Amount of Each Receipt this Period 28.89
 Payroll Deduction: \$9.63/Bi-Weekly

B. ASHLEY M. VONNIDA
 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 COASTAL CAROLINA MEDICAL CENTER Occupation CNO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2015
Transaction ID : AAC8F00AC6B7242FCAB8
 Amount of Each Receipt this Period 30.00
 Payroll Deduction: \$10.00/Bi-Weekly

C. KEVIN J. CARACCIOLO
 Full Name (Last, First, Middle Initial)
 Mailing Address 3360 Burns Rd.
 City Palm Beach Gardens State FL Zip Code 33410-4323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PALM BEACH GARDENS MEDICAL CENTER Occupation CHIEF HR OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2015
Transaction ID : A90A4659797E64C02AAD
 Amount of Each Receipt this Period 30.00
 Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	88.89
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 69 OF 75
	<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 BECK
Full Name (Last, First, Middle Initial)
Mailing Address 107 Waterman

City Irvine	State CA	Zip Code 92602-1654
----------------	-------------	------------------------

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

Name of Employer TENET HEALTHCARE CORPORATION	Occupation DIR, C&D - WESTERN DIV
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2015

Transaction ID : A08070ABABE4C49D3877

Amount of Each Receipt this Period

30.00

Payroll Deduction: \$10.00/Bi-Weekly

B. SUELLEN SMITH
Full Name (Last, First, Middle Initial)
Mailing Address 84 Tierra Vista Rd

City Paso Robles	State CA	Zip Code 93446-9702
---------------------	-------------	------------------------

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

Name of Employer TENET HEALTHCARE CORPORATION	Occupation SR DIR, PMI TEAM LEADER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2015

Transaction ID : AB147D7178E914B7B88B

Amount of Each Receipt this Period

30.00

Payroll Deduction: \$10.00/Bi-Weekly

C. JULIE R. EBERTING
Full Name (Last, First, Middle Initial)
Mailing Address 3700 HUECO VALLEY #1902

City El Paso	State TX	Zip Code 79938-5427
-----------------	-------------	------------------------

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

Name of Employer SIERRA PROVIDENCE EASTSIDE HOSPITAL	Occupation Director of Imaging Services
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2015

Transaction ID : A2F1FC6A3D7AA4F5EB57

Amount of Each Receipt this Period

30.00

Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	90.00
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 70 OF 75
	<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. PATRICIA DURAN
Full Name (Last, First, Middle Initial)
Mailing Address 8017 Bowen Rd
City El Paso State TX Zip Code 79915-4701
FEC ID number of contributing federal political committee. **C**
Name of Employer SIERRA PROVIDENCE EASTSIDE HOSPITAL Occupation CNO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **210.00**

Date of Receipt **10 / 31 / 2015**
Transaction ID : AF040C5C3771D42B8B8D
Amount of Each Receipt this Period **15.00**
Payroll Deduction: \$5.00/Bi-Weekly

B. JOSEPH A. DESCHRYVER
Full Name (Last, First, Middle Initial)
Mailing Address 4990 HACIENDA AVE
City San Luis Obispo State CA Zip Code 93401-7971
FEC ID number of contributing federal political committee. **C**
Name of Employer SIERRA VISTA REGIONAL MEDICAL CENTER Occupation CEO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **220.00**

Date of Receipt **10 / 31 / 2015**
Transaction ID : A32BA86BA282D4356B2D
Amount of Each Receipt this Period **30.00**
Payroll Deduction: \$10.00/Bi-Weekly

C. PAULA AUTRY
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 Sinai Grace Hospital Occupation CEO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **211.86**

Date of Receipt **10 / 31 / 2015**
Transaction ID : AA927C24A925D4B0C87A
Amount of Each Receipt this Period **28.89**
Payroll Deduction: \$9.63/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... **73.89**
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 71 OF 75
	<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. NANCY LUTTRULL-KITT
Full Name (Last, First, Middle Initial)

Mailing Address 9530 Deodar St

City Rancho Cucamonga State CA Zip Code 91737-3547

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

Name of Employer TENET PATIENT FINCL SVCS Occupation DIR, REV CYCLE MGMT II

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2015
Transaction ID : ADD479F177DFC40BBB4A

Amount of Each Receipt this Period 30.00

Payroll Deduction: \$10.00/Bi-Weekly

B. WILLIAM L. LANTZY
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 DMC Huron Valley Sinai Hospital Occupation CFO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2015
Transaction ID : AFEF829D71B75493B994

Amount of Each Receipt this Period 30.00

Payroll Deduction: \$10.00/Bi-Weekly

C. AMANDA C. DYLE
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 COASTAL CAROLINA MEDICAL CENTER Occupation CFO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2015
Transaction ID : AB365A2F3FAAE4BFEAB6

Amount of Each Receipt this Period 30.00

Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00

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 72 OF 75
	(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. GLORIA J WALKER-LARKINS
 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 Detroit Medical Center Occupation CFO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **220.00**

Date of Receipt **10 / 31 / 2015**
Transaction ID : AAC3C7D0D1F6A4532995
 Amount of Each Receipt this Period **30.00**
 Payroll Deduction: \$10.00/Bi-Weekly

B. RUDOLPH F. MALEK
 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 NACOGDOCHES MEDICAL CENTER Occupation CFO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **220.00**

Date of Receipt **10 / 31 / 2015**
Transaction ID : A0CE8A8DA8F134AFCBA4
 Amount of Each Receipt this Period **30.00**
 Payroll Deduction: \$10.00/Bi-Weekly

C. PATRICIA J. HOSKIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 3336 South Channel Drive
 City Harsens Island State MI Zip Code 48028-9548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Detroit Medical Center Occupation VP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **211.64**

Date of Receipt **10 / 31 / 2015**
Transaction ID : ACE8B4E0534BF4DA2B04
 Amount of Each Receipt this Period **28.86**
 Payroll Deduction: \$9.62/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	88.86
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 73 OF 75
	<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. TIMOTHY MENTON
Full Name (Last, First, Middle Initial)

Mailing Address 3700 East South Street

City Lakewood State CA Zip Code 90712-1419

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

Name of Employer LAKEWOOD REGIONAL MEDICAL CENTER Occupation CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 288.00

Date of Receipt 10 / 31 / 2015
Transaction ID : A90756C5D6A4844D6B33

Amount of Each Receipt this Period 288.00

Payroll Deduction: \$96.00/Bi-Weekly

B. TARA C. JONES
Full Name (Last, First, Middle Initial)

Mailing Address 5959 Park Ave.

City Memphis State TN Zip Code 38119-5200

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

Name of Employer St. Francis Hospital Occupation DIRECTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 209.00

Date of Receipt 10 / 31 / 2015
Transaction ID : ACB4E4C3FC1B1421DA1A

Amount of Each Receipt this Period 57.00

Payroll Deduction: \$19.00/Bi-Weekly

C. WEBB COCHRAN
Full Name (Last, First, Middle Initial)

Mailing Address 3961 St Claire Ct

City Atlanta State GA Zip Code 30319

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation DIR, GOVT RELATIONS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 249.00

Date of Receipt 10 / 31 / 2015
Transaction ID : AB58777334B2E4211A3B

Amount of Each Receipt this Period 39.00

Payroll Deduction: \$39.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	384.00
TOTAL This Period (last page this line number only).....▶	16420.88

**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. Charles Boustany Jr Md For Congress Inc

Mailing Address Post Office Box 80126

City Lafayette State LA Zip Code 70598-0126

Purpose of Disbursement
2016 Primary

Candidate Name

Rep. Charles W. Boustany Jr.

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

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 07 / 2015

Transaction ID : B211A4A345A6946F3B47

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. COMSTOCK FOR CONGRESS

Mailing Address PO BOX 831

City MC LEAN State VA Zip Code 22101

Purpose of Disbursement
2016 Primary

Candidate Name

Barbara J Comstock

Office Sought: House
 Senate
 President
State: VA District: 10

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 07 / 2015

Transaction ID : B1B180E10C2FF4E9781B

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C. Friends Of Roy Blunt

Mailing Address PO Box 50100

City Springfield State MO Zip Code 65805-0100

Purpose of Disbursement
2016 General

Candidate Name

Sen. Roy Blunt

Office Sought: House
 Senate
 President
State: MO District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 29 / 2015

Transaction ID : BBE25185131D844559A2

Amount of Each Disbursement this Period

5000.00

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

8500.00

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

8500.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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. Texans for Greg Abbott

Mailing Address 504 Lavaca Street

City Austin State TX Zip Code 78701-2900

Purpose of Disbursement
2018 Primary

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2018
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 29 / 2015

Transaction ID : BA5A0DFC6CC47493B99C

Amount of Each Disbursement this Period

1000.00

Category/
Type

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

Category/
Type

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

Category/
Type

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

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

1000.00

1000.00