

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2013"/>		118968.39
(b) Cash on Hand at Beginning of Reporting Period.....	112925.01	
(c) Total Receipts (from Line 19)	8319.00	106373.50
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	121244.01	225341.89
7. Total Disbursements (from Line 31).....	6000.00	110097.88
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	115244.01	115244.01
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	7907.30	67396.85
(ii) Unitemized	411.70	36476.65
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	8319.00	103873.50
(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)	8319.00	103873.50
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	2500.00
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))..... ▶	8319.00	106373.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	8319.00	106373.50

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	1180.41
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	1180.41
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3500.00	80750.00
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	390.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	390.00
29. Other Disbursements	2500.00	27777.47
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	6000.00	110097.88
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6000.00	110097.88

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)	8319.00	103873.50
34. Total Contribution Refunds (from Line 28(d))	0.00	390.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	8319.00	103483.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	1180.41
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	1180.41

**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 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

A. STEPHEN W KROUSE
 Full Name (Last, First, Middle Initial)
 Mailing Address 632 Hirst Ave
 City Havertown State PA Zip Code 19083-4126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 ST. CHRISTOPHER'S HOSPITAL FOR CHILDREN CHIEF HR OFFICER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 399.00

Date of Receipt
 10 / 19 / 2013
Transaction ID : AB6CB71DBFDC94F008CF
 Amount of Each Receipt this Period
 38.00
 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 Occupation
 CYPRESS FAIRBANKS MEDICAL CENTER COO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 399.00

Date of Receipt
 10 / 19 / 2013
Transaction ID : AB74E93C93979415F902
 Amount of Each Receipt this Period
 38.00
 Payroll Deduction: \$19.00/Bi-Weekly

C. 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 Occupation
 CYPRESS FAIRBANKS MEDICAL CENTER CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 735.00

Date of Receipt
 10 / 19 / 2013
Transaction ID : A28560B830D6C4613B5A
 Amount of Each Receipt this Period
 70.00
 Payroll Deduction: \$35.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	146.00
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 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 6304 Carmel Falls Ct

City McKinney State TX Zip Code 75070-8768

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

Name of Employer CENTENNIAL MEDICAL CENTER Occupation CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **798.00**

Date of Receipt **10 / 19 / 2013**

Transaction ID : A4FE18EE65DBC4BC7801

Amount of Each Receipt this Period **76.00**

Payroll Deduction: \$38.00/Bi-Weekly

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

Mailing Address 676 Bryn Mahr Ln

City Rockwall State TX Zip Code 75087-6018

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

Name of Employer LAKE POINTE MEDICAL CENTER Occupation CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **819.00**

Date of Receipt **10 / 19 / 2013**

Transaction ID : A4B5ACB63E7784186BC5

Amount of Each Receipt this Period **78.00**

Payroll Deduction: \$39.00/Bi-Weekly

C. CANDACE MARKWITH
Full Name (Last, First, Middle Initial)

Mailing Address 980 Isabella Way

City San Luis Obispo State CA Zip Code 93405-6186

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

Name of Employer SIERRA VISTA REGIONAL MEDICAL CENTER Occupation CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **819.00**

Date of Receipt **10 / 19 / 2013**

Transaction ID : A22B221DF6EA34990AD0

Amount of Each Receipt this Period **78.00**

Payroll Deduction: \$39.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... **232.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 61
	<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. WILLIAM T MOORE
Full Name (Last, First, Middle Initial)

Mailing Address 3014 Castle Pines Dr

City State Zip Code
Duluth GA 30097-2039

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

Name of Employer Occupation
ATLANTA MEDICAL CENTER MARKET CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt
10 / 19 / 2013
Transaction ID : AB03F6E6439D44515BD5

Amount of Each Receipt this Period
40.00

Payroll Deduction: \$20.00/Bi-Weekly

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

Mailing Address 1138 Pine Valley Rd

City State Zip Code
Griffin GA 30224-4953

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

Name of Employer Occupation
SPALDING REGIONAL HOSPITAL CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
798.00

Date of Receipt
10 / 19 / 2013
Transaction ID : A3FE100AB5FAB4DFDB15

Amount of Each Receipt this Period
76.00

Payroll Deduction: \$38.00/Bi-Weekly

C. EDWARD MESCO
Full Name (Last, First, Middle Initial)

Mailing Address 7365 NW 54th St

City State Zip Code
Lauderhill FL 33319-6346

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

Name of Employer Occupation
TENET HEALTHCARE CORPORATION DIR, REG REIMBURSEMENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt
10 / 19 / 2013
Transaction ID : ABC6A80F839E54870879

Amount of Each Receipt this Period
50.00

Payroll Deduction: \$25.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶ 166.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 61
<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. 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 SR DIR, GOVT RELATIONS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1069.00

Date of Receipt 10 / 19 / 2013
Transaction ID : AF777313C3E584A6BA5B

Amount of Each Receipt this Period 78.00

Payroll Deduction: \$39.00/Bi-Weekly

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

Mailing Address 6307 Preston Pkwy

City Dallas State TX Zip Code 75205-1650

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 399.00

Date of Receipt 10 / 19 / 2013
Transaction ID : AB5BA15F4DFD14E2991E

Amount of Each Receipt this Period 38.00

Payroll Deduction: \$19.00/Bi-Weekly

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

Mailing Address 2230 Warner Rd

City Fort Worth State TX Zip Code 76110-1752

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation VP, A&D

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 798.00

Date of Receipt 10 / 19 / 2013
Transaction ID : A4B426B69A6FC42CAB02

Amount of Each Receipt this Period 76.00

Payroll Deduction: \$38.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶ 192.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. DENISE F BERGER		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 19 / 2013
Mailing Address 1504 Country Bend Dr		Transaction ID : A322F2F527657438CADE
City Saint Charles	State MO	Zip Code 63303-2512
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.00	
Name of Employer DES PERES HOSPITAL	Occupation HOSPITAL COMPLIANCE OFF	Payroll Deduction: \$25.00/Bi-Weekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	

Full Name (Last, First, Middle Initial) B. WILLIAM R FREEMAN		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 19 / 2013
Mailing Address 3031 Highland House Villas Ct		Transaction ID : ABE64E70D969C479F8DA
City Arnold	State MO	Zip Code 63010-5623
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 38.00	
Name of Employer DES PERES HOSPITAL	Occupation RN - CLINICAL PRN	Payroll Deduction: \$19.00/Bi-Weekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 399.00	

Full Name (Last, First, Middle Initial) C. JOHN A GRAH		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 19 / 2013
Mailing Address 6104 La Posta Dr		Transaction ID : AB120F090B63748609BA
City El Paso	State TX	Zip Code 79912-1842
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 78.00	
Name of Employer PROVIDENCE MEMORIAL HOSPITAL	Occupation COO	Payroll Deduction: \$39.00/Bi-Weekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 659.00	

SUBTOTAL of Receipts This Page (optional).....▶	166.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 61
	<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. 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 ▼ **399.00**

Date of Receipt **10 / 19 / 2013**

Transaction ID : A547493E5F9444D1487D

Amount of Each Receipt this Period **38.00**

Payroll Deduction: \$19.00/Bi-Weekly

B. RALPH ALEMAN
Full Name (Last, First, Middle Initial)

Mailing Address 528 W 51st St

City Miami Beach State FL Zip Code 33140-2611

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

Name of Employer HIALEAH HOSPITAL Occupation CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **10 / 05 / 2013**

Transaction ID : AAF891BD915204BC0AC7

Amount of Each Receipt this Period **20.00**

Payroll Deduction: \$20.00/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 ▼ **819.00**

Date of Receipt **10 / 19 / 2013**

Transaction ID : ADC514C15EB164F94994

Amount of Each Receipt this Period **78.00**

Payroll Deduction: \$39.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	136.00
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 61
	<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. ROB FINNEGAN		Date of Receipt
Mailing Address 2804 Carriage Trl		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2013"/>
City	State	Zip Code
McKinney	TX	75070-4306
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : AB88CB526306C40358E3
Name of Employer	Occupation	Amount of Each Receipt this Period
TENET HEALTHCARE CORPORATION	SR DIR, FINANCE ASC	<input type="text" value="38.00"/>
Receipt For:	Aggregate Year-to-Date ▼	Payroll Deduction: \$19.00/Bi-Weekly
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="399.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. AUDREY T ANDREWS		Date of Receipt
Mailing Address 702 Penfolds Ln		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2013"/>
City	State	Zip Code
Coppell	TX	75019-4544
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : AD26553982040412AB37
Name of Employer	Occupation	Amount of Each Receipt this Period
TENET HEALTHCARE CORPORATION	GENERAL COUNSEL	<input type="text" value="384.00"/>
Receipt For:	Aggregate Year-to-Date ▼	Payroll Deduction: \$192.00/Bi-Weekly
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="4032.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. KELVIN A BAGGETT		Date of Receipt
Mailing Address 6453 Tulip Ln		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2013"/>
City	State	Zip Code
Dallas	TX	75230-4148
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : A33C46D7C1A2042218A6
Name of Employer	Occupation	Amount of Each Receipt this Period
TENET HEALTHCARE CORPORATION	SVP, CHIEF MEDICAL OFCR	<input type="text" value="78.00"/>
Receipt For:	Aggregate Year-to-Date ▼	Payroll Deduction: \$39.00/Bi-Weekly
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="819.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="500.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 61
	<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. JOHN TILLY
Full Name (Last, First, Middle Initial)

Mailing Address 1221 Wentwood Dr

City Irving State TX Zip Code 75061-4456

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1575.00

Date of Receipt 10 / 19 / 2013
Transaction ID : **A14664B3D18C8475DB64**

Amount of Each Receipt this Period 150.00

Payroll Deduction: \$75.00/Bi-Weekly

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

Mailing Address 3803 Stockton Ln

City Dallas State TX Zip Code 75287-4919

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation DIR, RELOCATION

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt 10 / 19 / 2013
Transaction ID : **A337CF98D67084480B69**

Amount of Each Receipt this Period 40.00

Payroll Deduction: \$20.00/Bi-Weekly

C. MICHAEL S HONGOLA
Full Name (Last, First, Middle Initial)

Mailing Address 6704 Westmont Dr

City Colleyville State TX Zip Code 76034-7263

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation VP, INFO SYSTEMS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt 10 / 19 / 2013
Transaction ID : **A506518C19EBF438FA56**

Amount of Each Receipt this Period 40.00

Payroll Deduction: \$20.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ▶ 230.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 61
	<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

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

Mailing Address 3610 Edgewater St

City Dallas	State TX	Zip Code 75205-4317
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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 ▼
2016.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2013

Transaction ID : AD3B0AA79FDCC49B0BD:

Amount of Each Receipt this Period
192.00

Payroll Deduction: \$96.00/Bi-Weekly

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

Mailing Address 3975 Stockton Ln

City Dallas	State TX	Zip Code 75287-4921
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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 ▼
399.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2013

Transaction ID : A400FD6BC651245AA845

Amount of Each Receipt this Period
38.00

Payroll Deduction: \$19.00/Bi-Weekly

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

Mailing Address 401 N Church St

City McKinney	State TX	Zip Code 75069-3854
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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 ▼
945.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2013

Transaction ID : A6296781CFBD24ADE84C

Amount of Each Receipt this Period
90.00

Payroll Deduction: \$45.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	320.00
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 61
	<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. ELIZABETH JOHNSON
Full Name (Last, First, Middle Initial)

Mailing Address 3302 Marsh Ln

City Grapevine State TX Zip Code 76051-6828

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

Name of Employer: TENET HEALTHCARE CORPORATION
Occupation: VP, APPLIED CLINICAL INF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **798.00**

Date of Receipt: 10 / 19 / 2013
Transaction ID : AD5DA634579D9474DBA9

Amount of Each Receipt this Period: **76.00**

Payroll Deduction: \$38.00/Bi-Weekly

B. 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 ▼ **525.00**

Date of Receipt: 10 / 19 / 2013
Transaction ID : AC1D3D6D3932A4BA4AD8

Amount of Each Receipt this Period: **50.00**

Payroll Deduction: \$25.00/Bi-Weekly

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

Mailing Address 2613 Millington Dr

City Plano State TX Zip Code 75093-3560

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **336.00**

Date of Receipt: 10 / 19 / 2013
Transaction ID : AEE165507E3D24CF98CC

Amount of Each Receipt this Period: **32.00**

Payroll Deduction: \$16.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	158.00
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 61
	<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
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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 ▼
2016.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2013

Transaction ID : AC5D608E3DDAB4D469B7

Amount of Each Receipt this Period
192.00

Payroll Deduction: \$96.00/Bi-Weekly

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

Mailing Address 7746 Eagle Trl

City Dallas	State TX	Zip Code 75238-4115
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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 ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2013

Transaction ID : A40B023D3CEC9437AA25

Amount of Each Receipt this Period
40.00

Payroll Deduction: \$20.00/Bi-Weekly

C. MARITA COVARRUBIAS
Full Name (Last, First, Middle Initial)

Mailing Address 7115 Wildgrove Ave

City Dallas	State TX	Zip Code 75214-3841
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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 ▼
399.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2013

Transaction ID : A1D5FC7FA5A1B45F2BA4

Amount of Each Receipt this Period
38.00

Payroll Deduction: \$19.00/Bi-Weekly

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

A. CATHRYN H FRASER
 Full Name (Last, First, Middle Initial)
 Mailing Address 272 Enclaves Ct
 City Coppel State TX Zip Code 75019-2125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHCARE CORPORATION Occupation SVP, HUMAN RESOURCES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2016.00**

Date of Receipt **10 / 19 / 2013**
Transaction ID : A310203D7CA8140D5A8B
 Amount of Each Receipt this Period **192.00**
 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 REGION MEDICAL CENTER Occupation CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **399.00**

Date of Receipt **10 / 19 / 2013**
Transaction ID : A82DC57310C194C95ABB
 Amount of Each Receipt this Period **38.00**
 Payroll Deduction: \$19.00/Bi-Weekly

C. RICHARD E GLANCEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 6516 Vasco Way
 City El Paso State TX Zip Code 79912-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SIERRA MEDICAL CENTER Occupation DIR, EXTERNAL AFFAIRS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **819.00**

Date of Receipt **10 / 19 / 2013**
Transaction ID : A60B4CB742DA341CEA8C
 Amount of Each Receipt this Period **78.00**
 Payroll Deduction: \$39.00/Bi-Weekly

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 61
	<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. 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 ▼ **819.00**

Date of Receipt **10 / 19 / 2013**

Transaction ID : AC8558F656519469E884

Amount of Each Receipt this Period **78.00**

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 HEALTHSYSTEM-TEXAS Occupation ASST - ADMINISTRATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt **10 / 19 / 2013**

Transaction ID : A13D6B9E8E71745F38E5

Amount of Each Receipt this Period **40.00**

Payroll Deduction: \$20.00/Bi-Weekly

C. LEA D FOURKILLER
Full Name (Last, First, Middle Initial)

Mailing Address 13219 George St

City Dallas State TX Zip Code 75234-5206

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

Name of Employer CONIFER Occupation VP & CHIEF COMP OFFICER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **924.00**

Date of Receipt **10 / 19 / 2013**

Transaction ID : AD822A5647D594CD692C

Amount of Each Receipt this Period **88.00**

Payroll Deduction: \$44.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	206.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. DANIEL 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 ▼ 525.00

Date of Receipt 10 / 19 / 2013
Transaction ID : A7A3B59F0B2724574980
 Amount of Each Receipt this Period 50.00
 Payroll Deduction: \$25.00/Bi-Weekly

B. MATTHEW C MICHAELS
 Full Name (Last, First, Middle Initial)
 Mailing Address 3507 Munstead Trl
 City Frisco State TX Zip Code 75033-1166
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CONIFER Occupation SVP, HOSPITAL OPS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 399.00

Date of Receipt 10 / 19 / 2013
Transaction ID : A4ACB94B2EA604CD5BA6
 Amount of Each Receipt this Period 38.00
 Payroll Deduction: \$19.00/Bi-Weekly

C. Mr. JAMES M THATCHER
 Full Name (Last, First, Middle Initial)
 Mailing Address 6608 Castle Pines Dr
 City Plano State TX Zip Code 75093-6378
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CONIFER Occupation SVP, BUS DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 399.00

Date of Receipt 10 / 19 / 2013
Transaction ID : AD798A787B727438782A
 Amount of Each Receipt this Period 38.00
 Payroll Deduction: \$19.00/Bi-Weekly

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 61
	<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. 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 ▼ 1399.00

Date of Receipt 10 / 19 / 2013
Transaction ID : A37507ED2627540E399F
 Amount of Each Receipt this Period 38.00
 Payroll Deduction: \$19.00/Bi-Weekly

B. LERRYN CROCKER
 Full Name (Last, First, Middle Initial)
 Mailing Address 2386 Liledoun Rd
 City Taylorsville State NC Zip Code 28681-8892
 FEC ID number of contributing federal political committee. **C**
 Name of Employer FRYE REGIONAL MEDICAL CENTER Occupation CNO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1152.00

Date of Receipt 10 / 19 / 2013
Transaction ID : A44A90F72858E4C74B1D
 Amount of Each Receipt this Period 192.00
 Payroll Deduction: \$96.00/Bi-Weekly

C. STEPHEN M MOONEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 4619 Briar Oaks Cir
 City Dallas State TX Zip Code 75287-7503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CONIFER Occupation PRESIDENT, CONIFER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 819.00

Date of Receipt 10 / 19 / 2013
Transaction ID : AC7D4E30C54EB498FA8D
 Amount of Each Receipt this Period 78.00
 Payroll Deduction: \$39.00/Bi-Weekly

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 61
	<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. DAWN CASTRO
Full Name (Last, First, Middle Initial)

Mailing Address 15408 FOX MEADOW LANE

City Frisco	State TX	Zip Code 75035-3671
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FEC ID number of contributing federal political committee. **C**

Name of Employer CONIFER	Occupation VP CLIENT DELIVERY
-----------------------------	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **247.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2013

Transaction ID : A43CA06858FED48D18D5

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

B. JAY MIRANDA
Full Name (Last, First, Middle Initial)

Mailing Address 15871 SW 148th Ter

City Miami	State FL	Zip Code 33196-5701
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FEC ID number of contributing federal political committee. **C**

Name of Employer CORAL GABLES HOSPITAL	Occupation CEO
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **840.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2013

Transaction ID : A2C6C7DE628214F42BE2

Amount of Each Receipt this Period

80.00

Payroll Deduction: \$40.00/Bi-Weekly

C. LESTER G COTTLE
Full Name (Last, First, Middle Initial)

Mailing Address 1625 Fawn Ln

City Huntingdon Valley	State PA	Zip Code 19006-7917
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FEC ID number of contributing federal political committee. **C**

Name of Employer ST CHRISTOPHER'S HOSPITAL FOR CHILDREN	Occupation CFO
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **399.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2013

Transaction ID : AC42E785464DA4A308C5

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 61
	<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. MR. JAMES M COWLING
 Full Name (Last, First, Middle Initial)
 Mailing Address 111 Sunset Cove Ln
 City State Zip Code
 Palm Beach Gardens FL 33418-4607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 PALM BEACH GARDENS MEDICAL CENTER CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 399.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 19 / 2013
Transaction ID : A7043FD8BF2F943A880D
 Amount of Each Receipt this Period
 38.00
 Payroll Deduction: \$19.00/Bi-Weekly

B. STEVEN B BARR
 Full Name (Last, First, Middle Initial)
 Mailing Address 1300 Binz St
 City State Zip Code
 Houston TX 77004-7016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 PLAZA SPECIALTY HOSPITAL CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 399.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 19 / 2013
Transaction ID : AE82928C3C6F34954BDD
 Amount of Each Receipt this Period
 38.00
 Payroll Deduction: \$19.00/Bi-Weekly

C. CRAIG C ARMIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 23510 Berdon St
 City State Zip Code
 Woodland Hills CA 91367-3004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 TENET HEALTHCARE CORPORATION VP, GOVT PROGRAMS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 840.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 19 / 2013
Transaction ID : A092F02E8B29A44E2BA7
 Amount of Each Receipt this Period
 80.00
 Payroll Deduction: \$40.00/Bi-Weekly

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

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

Mailing Address 2594 Hocksett Cv

City Germantown State TN Zip Code 38139-6655

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

Name of Employer SAINT FRANCIS HOSPITAL Occupation MARKET CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2016.00

Date of Receipt 10 / 19 / 2013
Transaction ID : A27EF1E5BB10E4F18863

Amount of Each Receipt this Period 192.00

Payroll Deduction: \$96.00/Bi-Weekly

B. 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 ▼ 399.00

Date of Receipt 10 / 19 / 2013
Transaction ID : A6C503CCF13E54264BD7

Amount of Each Receipt this Period 38.00

Payroll Deduction: \$19.00/Bi-Weekly

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

Mailing Address 102 Wilmington Ct

City Southlake State TX Zip Code 76092-8492

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 798.00

Date of Receipt 10 / 19 / 2013
Transaction ID : A9FC9CA6091974A57ADE

Amount of Each Receipt this Period 76.00

Payroll Deduction: \$38.00/Bi-Weekly

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 61
	<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. 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 ▼ **819.00**

Date of Receipt **10 / 19 / 2013**

Transaction ID : A7C7011764DE84221A02

Amount of Each Receipt this Period **78.00**

Payroll Deduction: \$39.00/Bi-Weekly

B. 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 ▼ **2019.15**

Date of Receipt **10 / 19 / 2013**

Transaction ID : A329DD0BACD914E0B9A2

Amount of Each Receipt this Period **192.30**

Payroll Deduction: \$96.15/Bi-Weekly

C. LINDA HINZ
Full Name (Last, First, Middle Initial)

Mailing Address 1639 IOWA STREET UNIT C

City Costa Mesa State CA Zip Code 92626-2072

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **247.00**

Date of Receipt **10 / 19 / 2013**

Transaction ID : AC5DAD3EEA2944E5FBB0

Amount of Each Receipt this Period **38.00**

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	308.30
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 25 OF 61
<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. 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 **819.00**

Date of Receipt **10 / 19 / 2013**
Transaction ID : A05D4585BA3A344B4B74
 Amount of Each Receipt this Period **78.00**
 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 **798.00**

Date of Receipt **10 / 19 / 2013**
Transaction ID : A717CD6EA40094A47994
 Amount of Each Receipt this Period **76.00**
 Payroll Deduction: \$38.00/Bi-Weekly

C. DAVID W BORDOFSKE
 Full Name (Last, First, Middle Initial)
 Mailing Address 5001 Ashland Belle Ln
 City Frisco State TX Zip Code 75035-7682
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHCARE CORPORATION Occupation VP, CLINICAL SYSTEMS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **840.00**

Date of Receipt **10 / 19 / 2013**
Transaction ID : A8CD4CA151DDF4956B92
 Amount of Each Receipt this Period **80.00**
 Payroll Deduction: \$40.00/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 26 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 108 Londonberry Ter

City Southlake State TX Zip Code 76092-7321

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation VP AND TREASURER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **399.00**

Date of Receipt **10 / 19 / 2013**

Transaction ID : AA884938A470D4E7FB24

Amount of Each Receipt this Period **38.00**

Payroll Deduction: \$19.00/Bi-Weekly

B. LEONARD ROSENFELD
Full Name (Last, First, Middle Initial)

Mailing Address 7243 Baxtershire Dr

City Dallas State TX Zip Code 75230-3170

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation VP, QUALITY MANAGEMENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **399.00**

Date of Receipt **10 / 19 / 2013**

Transaction ID : A3486B91E5EC849E8AC0

Amount of Each Receipt this Period **38.00**

Payroll Deduction: \$19.00/Bi-Weekly

C. JAMES E MCPARTLAND
Full Name (Last, First, Middle Initial)

Mailing Address 2345 Timberlake Cir

City Allen State TX Zip Code 75013-5835

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation VP, PATIENT MGMT SYSTEMS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **399.00**

Date of Receipt **10 / 19 / 2013**

Transaction ID : A930E192E2037416A902

Amount of Each Receipt this Period **38.00**

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... **114.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 61
	<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. 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 ▼ **399.00**

Date of Receipt **10 / 19 / 2013**

Transaction ID : AE0D1B65DB3BC494B8D7

Amount of Each Receipt this Period **38.00**

Payroll Deduction: \$19.00/Bi-Weekly

B. THOMAS RICE
Full Name (Last, First, Middle Initial)

Mailing Address 15126 Ferdinand Dr

City Dallas State TX Zip Code 75248-6437

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation SVP, INVESTOR RELATIONS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **819.00**

Date of Receipt **10 / 19 / 2013**

Transaction ID : A5E52BDD7A971480290E

Amount of Each Receipt this Period **78.00**

Payroll Deduction: \$39.00/Bi-Weekly

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

Mailing Address 911 Lake Breeze Dr

City Highland Village State TX Zip Code 75077-6491

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation VP PHY RELT PROG,BUS DEV

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **780.00**

Date of Receipt **10 / 05 / 2013**

Transaction ID : A14180C13C9884D0FBB1

Amount of Each Receipt this Period **39.00**

Payroll Deduction: \$39.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... **155.00**

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 61
	<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. PAUL D. SLAVIN
Full Name (Last, First, Middle Initial)

Mailing Address 508 FORREST AVENUE

City Cleburne State TX Zip Code 76033-5345

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation VP COMPENSATION BENEFITS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 247.00

Date of Receipt 10 / 19 / 2013
Transaction ID : AC260BED6FB5F4139BDF

Amount of Each Receipt this Period 38.00

Payroll Deduction: \$19.00/Bi-Weekly

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

Mailing Address 1111 N Montclair Ave

City Dallas State TX Zip Code 75208-3520

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation VP, GOVERNMENT RELATIONS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2016.00

Date of Receipt 10 / 19 / 2013
Transaction ID : A7B0B1315B3BA49B694C

Amount of Each Receipt this Period 192.00

Payroll Deduction: \$96.00/Bi-Weekly

C. BRADLEY C TAYLOR
Full Name (Last, First, Middle Initial)

Mailing Address 9438 Thornberry Ln

City Dallas State TX Zip Code 75220-5145

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 ▼ 399.00

Date of Receipt 10 / 19 / 2013
Transaction ID : AE85D4034F5CD4271BF3

Amount of Each Receipt this Period 38.00

Payroll Deduction: \$19.00/Bi-Weekly

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 61
	<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. 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 ▼ 2016.00

Date of Receipt 10 / 19 / 2013
Transaction ID : A68B3C2FFCAD34D72B98

Amount of Each Receipt this Period 192.00

Payroll Deduction: \$96.00/Bi-Weekly

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

Mailing Address 42 Barneburg

City Dove Canyon State CA Zip Code 92679-4210

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation SVP, REGIONAL OPERATIONS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 798.00

Date of Receipt 10 / 19 / 2013
Transaction ID : AE1586F9C54204FD18E3

Amount of Each Receipt this Period 76.00

Payroll Deduction: \$38.00/Bi-Weekly

C. 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 ▼ 252.00

Date of Receipt 10 / 19 / 2013
Transaction ID : AFD797F3A45DC4AE0988

Amount of Each Receipt this Period 24.00

Payroll Deduction: \$12.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ▶ 292.00

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 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

A. RODNEY A REASONER
Full Name (Last, First, Middle Initial)
Mailing Address 1960 Mary Lee Ln
City State Zip Code
Allen TX 75002-8528
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
TENET HEALTHCARE CORPORATION VP, FINANCE
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
798.00

Date of Receipt
10 / 19 / 2013
Transaction ID : A34542888C85846CAA36
Amount of Each Receipt this Period
76.00
Payroll Deduction: \$38.00/Bi-Weekly

B. MICHAEL HALTER
Full Name (Last, First, Middle Initial)
Mailing Address 111 Righters Mill Rd
City State Zip Code
Penn Valley PA 19072-1312
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
HAHNEMANN UNIVERSITY HOSPITAL CEO
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
399.00

Date of Receipt
10 / 19 / 2013
Transaction ID : A294B0FBAEDFC49F0BF5
Amount of Each Receipt this Period
38.00
Payroll Deduction: \$19.00/Bi-Weekly

C. ALBERT BARROCAS
Full Name (Last, First, Middle Initial)
Mailing Address 4050 Spalding Dr
City State Zip Code
Atlanta GA 30350-1100
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
SOUTH FULTON MEDICAL CENTER CHIEF MEDICAL OFFICER
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
399.00

Date of Receipt
10 / 19 / 2013
Transaction ID : A271E42D178A04855967
Amount of Each Receipt this Period
38.00
Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	152.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 61
	<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. JAMES D DORIS
Full Name (Last, First, Middle Initial)

Mailing Address 264 Idlewilde Ln

City Sanford State NC Zip Code 27332-9304

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

Name of Employer CENTRAL CAROLINA HOSPITAL Occupation CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **735.00**

Date of Receipt **10 / 19 / 2013**

Transaction ID : ABEC56B117EF64EA5AD7

Amount of Each Receipt this Period **70.00**

Payroll Deduction: \$35.00/Bi-Weekly

B. 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 ▼ **327.00**

Date of Receipt **10 / 19 / 2013**

Transaction ID : AFCC81451A6494367BCC

Amount of Each Receipt this Period **38.00**

Payroll Deduction: \$19.00/Bi-Weekly

C. 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 ▼ **798.00**

Date of Receipt **10 / 19 / 2013**

Transaction ID : A2F24AFC8BB7C4B1899E

Amount of Each Receipt this Period **76.00**

Payroll Deduction: \$38.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... **184.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

A. MONICA C VARGAS
Full Name (Last, First, Middle Initial)

Mailing Address 4017 Flamingo Dr

City	State	Zip Code
El Paso	TX	79902-1313

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 ▼ **399.00**

Date of Receipt
10 / 19 / 2013
Transaction ID : A4584E4A202E74977A2C

Amount of Each Receipt this Period
38.00

Payroll Deduction: \$19.00/Bi-Weekly

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

Mailing Address 7707 N 127th Ave

City	State	Zip Code
Omaha	NE	68142-1723

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

Name of Employer	Occupation
JFK Memorial Hospital	CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1503.00**

Date of Receipt
10 / 19 / 2013
Transaction ID : ADA3C5660FC5C4AEFA42

Amount of Each Receipt this Period
192.00

Payroll Deduction: \$96.00/Bi-Weekly

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

Mailing Address 6905 Villa Hermosa Dr

City	State	Zip Code
El Paso	TX	79912-2341

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **399.00**

Date of Receipt
10 / 19 / 2013
Transaction ID : A3CE15386A5A74B218CE

Amount of Each Receipt this Period
38.00

Payroll Deduction: \$19.00/Bi-Weekly

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 61
	<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. SALLY A HURT-STEFFEN
Full Name (Last, First, Middle Initial)

Mailing Address 712 Waltham Ct

City	State	Zip Code
El Paso	TX	79922-2128

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

Name of Employer	Occupation
SIERRA PROVIDENCE EASTSIDE HOSPITAL	CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1050.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 19 / 2013

Transaction ID : A6407D2D1FEA44E27B5F

Amount of Each Receipt this Period
100.00

Payroll Deduction: \$50.00/Bi-Weekly

B. CARLOS A DUBE
Full Name (Last, First, Middle Initial)

Mailing Address 10172 Saigon Dr

City	State	Zip Code
El Paso	TX	79925-5428

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

Name of Employer	Occupation
SIERRA PROVIDENCE EASTSIDE HOSPITAL	DIR, IMAGING SVCS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
399.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 19 / 2013

Transaction ID : A899AB7F1897249D587F

Amount of Each Receipt this Period
38.00

Payroll Deduction: \$19.00/Bi-Weekly

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

Mailing Address 21521 Turtledove St

City	State	Zip Code
Trabuco Canyon	CA	92679-3486

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

Name of Employer	Occupation
LOS ALAMITOS MEDICAL CENTER	CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
798.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 19 / 2013

Transaction ID : A085F8B7B00ED41808F0

Amount of Each Receipt this Period
76.00

Payroll Deduction: \$38.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	214.00
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 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 2713 Stuyvesant Cir

City	State	Zip Code
Modesto	CA	95356-0337

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

Name of Employer	Occupation
DOCTORS MEDICAL CENTER-MODESTO	COO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **399.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2013

Transaction ID : A81EBOED91A3041D7937

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

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

Mailing Address 501 LIDO DRIVE

City	State	Zip Code
Fort Lauderdale	FL	33301-2537

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

Name of Employer	Occupation
WEST BOCA MEDICAL CENTER	CHIEF MEDICAL OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **228.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2013

Transaction ID : A7BEDFAD00DCB4614BEF

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

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

Mailing Address 7935 East Dr
Apt 901

City	State	Zip Code
North Bay Village	FL	33141-3693

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

Name of Employer	Occupation
NORTH SHORE MEDICAL CENTER	CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **798.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2013

Transaction ID : A313CE1FD6D4544C19E2

Amount of Each Receipt this Period

76.00

Payroll Deduction: \$38.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	152.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 61
	<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. THOMAS I RUNKLE
Full Name (Last, First, Middle Initial)

Mailing Address 868B N Pennock St

City Philadelphia State PA Zip Code 19130-1234

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

Name of Employer HAHNEMANN UNIVERSITY HOSPITAL Occupation DIRECTOR OF OPERATIONS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 418.00

Date of Receipt 10 / 26 / 2013
Transaction ID : A9025ED305302414384C

Amount of Each Receipt this Period 38.00

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 ▼ 220.00

Date of Receipt 10 / 26 / 2013
Transaction ID : A5B4C041BDB47440C9E4

Amount of Each Receipt this Period 20.00

Payroll Deduction: \$10.00/Bi-Weekly

C. JORGE DIAZ
Full Name (Last, First, Middle Initial)

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 CORAL GABLES HOSPITAL Occupation DIR, CARDIOPULMONARY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 26 / 2013
Transaction ID : A0CBF995774E04949BB0

Amount of Each Receipt this Period 20.00

Payroll Deduction: \$10.00/Bi-Weekly

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

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 61
	<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. TERESA O'NEILL
 Full Name (Last, First, Middle Initial)
 Mailing Address 12066 Marsh Hen Ln
 City Tega Cay State SC Zip Code 29708-7224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 PIEDMONT MEDICAL CENTER DIR, NURSING -EMERGENCY
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 10 / 26 / 2013
Transaction ID : AEC0A010A0CDB48208FA
 Amount of Each Receipt this Period
 20.00
 Payroll Deduction: \$10.00/Bi-Weekly

B. ALFRED SCHULS
 Full Name (Last, First, Middle Initial)
 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 / 26 / 2013
Transaction ID : AD14EAF4EDA5845059CC
 Amount of Each Receipt this Period
 20.00
 Payroll Deduction: \$10.00/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 Occupation
 DESERT REGIONAL MEDICAL CENTER DIR-IMAGING SERVICES
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 10 / 26 / 2013
Transaction ID : A15A2450DCC334B14BE5
 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 37 OF 61
	<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. DENNIS GRADY
Full Name (Last, First, Middle Initial)
Mailing Address 3940 NW 54th Ct

City Coconut Creek	State FL	Zip Code 33073-4123
-----------------------	-------------	------------------------

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

Name of Employer PALMETTO GENERAL HOSPITAL	Occupation DIR, CANCER CENTER 2
---	------------------------------------

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	/	26	/	2013

Transaction ID : AA0522B1BF2124B39BE6

Amount of Each Receipt this Period
200.00

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

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2013

Transaction ID : A61288FE9093D4EA289D

Amount of Each Receipt this Period
200.00

Payroll Deduction: \$10.00/Bi-Weekly

C. CELESTE H CHAMBERLAIN
Full Name (Last, First, Middle Initial)
Mailing Address 8446 Pembroke Rd

City Philadelphia	State PA	Zip Code 19128-1907
----------------------	-------------	------------------------

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

Name of Employer ST. CHRISTOPHER'S HOSPITAL FOR CHILDREN	Occupation DCQI
---	--------------------

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	/	26	/	2013

Transaction ID : A02EF3DA9F34145EE871

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: (check only one)	PAGE 38 OF 61
	<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 D PRESTON
Full Name (Last, First, Middle Initial)

Mailing Address 3680 Village Center Ln

City Hoover State AL Zip Code 35226-6343

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

Name of Employer: BROOKWOOD MEDICAL CENTER
Occupation: VP, EXTERNAL AFFAIRS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **418.00**

Date of Receipt: **10 / 26 / 2013**
Transaction ID : **ADA4A7F861E8F423499F**

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

Payroll Deduction: \$19.00/Bi-Weekly

B. 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: BROOKWOOD MEDICAL CENTER
Occupation: CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt: **10 / 19 / 2013**
Transaction ID : **A36AA346CCD0E4790B15**

Amount of Each Receipt this Period: **20.00**

Payroll Deduction: \$10.00/Bi-Weekly

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

Mailing Address 5166 E Lake Blvd # CR

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 ▼ **210.00**

Date of Receipt: **10 / 19 / 2013**
Transaction ID : **A2245935E5F8C4FB8BBB**

Amount of Each Receipt this Period: **20.00**

Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	78.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 61
	<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. 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 ▼
210.00

Date of Receipt
10 / 19 / 2013
Transaction ID : **AE8E8C2BCE99F4F9399C**

Amount of Each Receipt this Period
20.00

Payroll Deduction: \$10.00/Bi-Weekly

B. 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 ▼
210.00

Date of Receipt
10 / 19 / 2013
Transaction ID : **A7DB2234F1E96465D8CA**

Amount of Each Receipt this Period
20.00

Payroll Deduction: \$10.00/Bi-Weekly

C. NANCY L LUTTRULL-KITT
Full Name (Last, First, Middle Initial)

Mailing Address 9530 Deodar St

City Alta Loma 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 ▼
210.00

Date of Receipt
10 / 19 / 2013
Transaction ID : **A4F4B05573384437A86F**

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 40 OF 61
	<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. KELLY SCHIRMER
Full Name (Last, First, Middle Initial)

Mailing Address 1500 Locust St
Apt 3911

City Philadelphia State PA Zip Code 19102-4326

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

Name of Employer Occupation
ST. CHRISTOPHER'S HOSPITAL FOR CHILDREN COO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
10 / 19 / 2013
Transaction ID : A943FC34AEDC94F54962

Amount of Each Receipt this Period
20.00

Payroll Deduction: \$10.00/Bi-Weekly

B. 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 Occupation
SAINT FRANCIS HOSPITAL-BARTLETT DBD-ASSOC ADMINISTRATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
10 / 19 / 2013
Transaction ID : ACA76C984D25341B5A50

Amount of Each Receipt this Period
20.00

Payroll Deduction: \$10.00/Bi-Weekly

C. JACQUELINE HERD
Full Name (Last, First, Middle Initial)

Mailing Address 3571 Carriage Glen Way

City Dacula State GA Zip Code 30019-4575

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

Name of Employer Occupation
ATLANTA MEDICAL CENTER CNO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
10 / 19 / 2013
Transaction ID : A26196C59444A4286AD4

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 41 OF 61
	<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. LYNNE SCROGGINS
Full Name (Last, First, Middle Initial)

Mailing Address 3777 Peachtree Rd NE
Apt 632

City Atlanta State GA Zip Code 30319-5209

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

Name of Employer ATLANTA MEDICAL CENTER Occupation ASSOCIATE ADMINISTRATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
10 / 19 / 2013
Transaction ID : A43FA757257F74CB6B46

Amount of Each Receipt this Period
20.00

Payroll Deduction: \$10.00/Bi-Weekly

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

Mailing Address 4229 Riley St

City Houston State TX Zip Code 77005-3546

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

Name of Employer PARK PLAZA HOSPITAL Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
10 / 19 / 2013
Transaction ID : A132D231D25AA439780F

Amount of Each Receipt this Period
20.00

Payroll Deduction: \$10.00/Bi-Weekly

C. REBECCA SPEIGHT
Full Name (Last, First, Middle Initial)

Mailing Address 210 Chatfield Dr

City Rockwall State TX Zip Code 75087-7140

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

Name of Employer LAKE POINTE MEDICAL CENTER Occupation CFO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
10 / 19 / 2013
Transaction ID : A1EC38F48F71849D2AF7

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 42 OF 61
	<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. MARY A MCCREA
 Full Name (Last, First, Middle Initial)
 Mailing Address 3420 N 128th Cir
 City Omaha State NE Zip Code 68164-4236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CREIGHTON UNIVERSITY MEDICAL CENTER Occupation CNO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **210.00**

Date of Receipt **10 / 19 / 2013**
Transaction ID : AFDB77600AC5D42B7951
 Amount of Each Receipt this Period **20.00**
 Payroll Deduction: \$10.00/Bi-Weekly

B. 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 **210.00**

Date of Receipt **10 / 19 / 2013**
Transaction ID : A16BAE42FC6B34BB087B
 Amount of Each Receipt this Period **20.00**
 Payroll Deduction: \$10.00/Bi-Weekly

C. CEZAR L QUIAMBAO
 Full Name (Last, First, Middle Initial)
 Mailing Address 845 Brisa Del Mar Dr
 City El Paso State TX Zip Code 79912-1513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PROVIDENCE MEMORIAL HOSPITAL Occupation DIR, RESPIRATORY SVCS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **210.00**

Date of Receipt **10 / 19 / 2013**
Transaction ID : ABC160117BB1D42EE8E3
 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 43 OF 61
	<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. BRADLEY S TALBERT
Full Name (Last, First, Middle Initial)

Mailing Address 16 Paddocks Blvd

City Hilton Head	State SC	Zip Code 29926-3507
---------------------	-------------	------------------------

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

Name of Employer HILTON HEAD HOSPITAL	Occupation COO
--	-------------------

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	/	19	/	2013

Transaction ID : AAA2BD11BFB004CDA9B

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

B. AMY L HILL
Full Name (Last, First, Middle Initial)

Mailing Address 6237 Westchester Ln

City Plano	State TX	Zip Code 75093-6174
---------------	-------------	------------------------

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

Name of Employer TENET HEALTHCARE CORPORATION	Occupation DIR, NATL MANAGED CARE
--	--------------------------------------

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	/	19	/	2013

Transaction ID : AF0C13D9DC1D746EEBD7

Amount of Each Receipt this Period

20.00

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 ▼ **210.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2013

Transaction ID : AE5743990F8F64D4CA68

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 44 OF 61
	<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. FELITA A CARTER
 Full Name (Last, First, Middle Initial)
 Mailing Address 290 E Plantation Dr
 City Sharsburg State GA Zip Code 30277-1958
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 TENET HEALTHCARE CORPORATION DIR, MGD CARE ECONOMICS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 10 / 19 / 2013
Transaction ID : AB0A3E66C48D944FD8E0
 Amount of Each Receipt this Period
 20.00
 Payroll Deduction: \$10.00/Bi-Weekly

B. JOHN SHORT
 Full Name (Last, First, Middle Initial)
 Mailing Address 3108 Clymer Dr
 City Plano State TX Zip Code 75025-5325
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 TENET HEALTHCARE CORPORATION VP, PERF MGMT & INNOVAT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 10 / 19 / 2013
Transaction ID : AF776D7F4C7B54C54A41
 Amount of Each Receipt this Period
 20.00
 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 Occupation
 TENET HEALTHCARE CORPORATION DIR, C&D
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 10 / 19 / 2013
Transaction ID : AFE9A9FC635694AEE82D
 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 45 OF 61
	<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. ROBERT D COKER		Date of Receipt
Mailing Address 7505 Dana Ln		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2013"/>
City	State	Zip Code
North Richland Hills	TX	76182-4551
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : A2E99236E7A9E4395AB8
TENET HEALTHCARE CORPORATION	SR DIR, QUALITY MGT	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="210.00"/>	<input type="text" value="20.00"/>
		Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial) B. MARK D BEATTY		Date of Receipt
Mailing Address 6905 Sonoma		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2013"/>
City	State	Zip Code
Irving	TX	75039-3071
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : AB7FBC49C930C4E03940
TENET HEALTHCARE CORPORATION	SENIOR COUNSEL	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="210.00"/>	<input type="text" value="20.00"/>
		Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial) C. JOETTA REETZ		Date of Receipt
Mailing Address 5209 Glen Canyon Rd		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2013"/>
City	State	Zip Code
Fort Worth	TX	76137-4105
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : A5644083B0482479F983
TENET HEALTHCARE CORPORATION	MGR FINC PLN & ANAL	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="210.00"/>	<input type="text" value="20.00"/>
		Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="60.00"/>
TOTAL This Period (last page this line number only).....	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 61
	<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. 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 ▼ **210.00**

Date of Receipt **10 / 19 / 2013**

Transaction ID : A40FD1725521A48DA9E5

Amount of Each Receipt this Period **20.00**

Payroll Deduction: \$10.00/Bi-Weekly

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

Mailing Address 1811 N Park Towne Pl Delp

City Phila State PA Zip Code 19130-0000

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation MGR, LITIGATION

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **10 / 19 / 2013**

Transaction ID : AAD589AE064DD47B6A02

Amount of Each Receipt this Period **20.00**

Payroll Deduction: \$10.00/Bi-Weekly

C. AMANDA EDMONDSON
Full Name (Last, First, Middle Initial)

Mailing Address 4407 Mill Creek Rd

City Dallas State TX Zip Code 75244-6718

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation DIR, MGD CARE PAY STRAT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **10 / 19 / 2013**

Transaction ID : AEE641E16F5774F6C801

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 47 OF 61
	<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. RICHARD BECK		Date of Receipt
Mailing Address 107 Waterman		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2013"/>
City Irvine State CA Zip Code 92602-1654		Transaction ID : A9B4827B052524740A57
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="20.00"/>
Name of Employer TENET HEALTHCARE CORPORATION	Occupation DIR, C&D - WESTERN DIV	Payroll Deduction: \$10.00/Bi-Weekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="210.00"/>	

Full Name (Last, First, Middle Initial) B. ROBERTA STEWART		Date of Receipt
Mailing Address 27291 Calle De La Rosa		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2013"/>
City San Juan Capo State CA Zip Code 92675-1873		Transaction ID : A701CA4DE2F244E2C876
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="20.00"/>
Name of Employer TENET HEALTHCARE CORPORATION	Occupation SR DIR, BUSINESS DEV	Payroll Deduction: \$10.00/Bi-Weekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="210.00"/>	

Full Name (Last, First, Middle Initial) C. JULIE K DIPPEL		Date of Receipt
Mailing Address 3706 Ash Glen Dr		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2013"/>
City Spring State TX Zip Code 77388-4154		Transaction ID : AEB9CA5B222C44506BEF
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="20.00"/>
Name of Employer TENET HEALTHCARE CORPORATION	Occupation DIR, ORG LEARNING & DEV	Payroll Deduction: \$10.00/Bi-Weekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="210.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="60.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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 61
	<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. 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 ▼ 210.00

Date of Receipt 10 / 19 / 2013
Transaction ID : A7E263BCA0C414F0CB27
Amount of Each Receipt this Period 20.00
Payroll Deduction: \$10.00/Bi-Weekly

B. 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 ▼ 210.00

Date of Receipt 10 / 19 / 2013
Transaction ID : A73FD7A4EBD1D4AA4931
Amount of Each Receipt this Period 20.00
Payroll Deduction: \$10.00/Bi-Weekly

C. 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 ▼ 210.00

Date of Receipt 10 / 19 / 2013
Transaction ID : A8B7C8EE8A9C042A4A6F
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 49 OF 61
	<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. MS. ADELE PAULETT
Full Name (Last, First, Middle Initial)

Mailing Address 2843 Thomas Ave

City Dallas State TX Zip Code 75204-2651

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 ▼ 210.00

Date of Receipt 10 / 19 / 2013
Transaction ID : A4AD4B56A0B4F49ECA46

Amount of Each Receipt this Period 20.00

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 ▼ 210.00

Date of Receipt 10 / 19 / 2013
Transaction ID : A446E17D782194C84AE2

Amount of Each Receipt this Period 20.00

Payroll Deduction: \$10.00/Bi-Weekly

C. 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 ▼ 210.00

Date of Receipt 10 / 19 / 2013
Transaction ID : A7CA459F5326B4F8B998

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 50 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 3961 St Claire Ct
Anta

City State Zip Code
Atl GA 30319-0000

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 / 19 / 2013
Transaction ID : AC14A10A878494CAC73

Amount of Each Receipt this Period
20.00

Payroll Deduction: \$10.00/Bi-Weekly

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

Mailing Address 24 Willow Oak Ln

City State Zip Code
Saint Louis MO 63122-4714

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

Name of Employer Occupation
TENET HEALTHCARE CORPORATION SR DIR, OUTPT STRATG DEV

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 / 19 / 2013
Transaction ID : A9487230C76334BF7816

Amount of Each Receipt this Period
20.00

Payroll Deduction: \$10.00/Bi-Weekly

C. JOSEPH A DESANTIS
Full Name (Last, First, Middle Initial)

Mailing Address 201 W Lancaster Ave
Unit 413

City State Zip Code
Ft Worth TX 76102-6669

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

Name of Employer Occupation
TENET HEALTHCARE CORPORATION DIR, EXECUTIVE OFFICE

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 / 19 / 2013
Transaction ID : A86A33C06AE5947039C6

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 51 OF 61
	<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. 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 ▼ 210.00

Date of Receipt 10 / 19 / 2013
Transaction ID : A83629B7C2FE243468DC

Amount of Each Receipt this Period 20.00

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 ▼ 210.00

Date of Receipt 10 / 19 / 2013
Transaction ID : A6551D7D742D14076A84

Amount of Each Receipt this Period 20.00

Payroll Deduction: \$10.00/Bi-Weekly

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

Mailing Address 557 Lacroix Way

City Columbia State IL Zip Code 62236-2853

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

Name of Employer SAINT LOUIS UNIVERSITY HOSPITAL Occupation DIR, IMAGING SVCS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 19 / 2013
Transaction ID : A5D82F8DE2D86410BA3B

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 52 OF 61
	<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. 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 ▼ **210.00**

Date of Receipt: 10 / 19 / 2013
Transaction ID : ABC86DB7C7606421CB6F

Amount of Each Receipt this Period: **20.00**

Payroll Deduction: \$10.00/Bi-Weekly

B. 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 ▼ **210.00**

Date of Receipt: 10 / 19 / 2013
Transaction ID : AD3BA617CF8A04ECA20

Amount of Each Receipt this Period: **20.00**

Payroll Deduction: \$10.00/Bi-Weekly

C. 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 ▼ **210.00**

Date of Receipt: 10 / 19 / 2013
Transaction ID : AD42FBDA023AD4F5E9E7

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 53 OF 61
	<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. 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 ▼ **210.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2013

Transaction ID : A91D236DA46DC482981E

Amount of Each Receipt this Period

20.00

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 ▼ **210.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2013

Transaction ID : A39C2BACA2A8D48629CB

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

C. 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 ▼ **210.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2013

Transaction ID : A979884C914C145359F1

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 54 OF 61
	<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. 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 ▼ **210.00**

Date of Receipt **10 / 19 / 2013**

Transaction ID : A58EE351BFF494CFCADF

Amount of Each Receipt this Period **20.00**

Payroll Deduction: \$10.00/Bi-Weekly

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

Mailing Address 3806 Harlan Dr

City Sachse State TX Zip Code 75048-1912

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **190.00**

Date of Receipt **10 / 19 / 2013**

Transaction ID : A56D8AEC5DE764EE8BDE

Amount of Each Receipt this Period **-10.00**

Payroll Deduction: \$-10.00/Bi-Weekly

C. 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 ▼ **210.00**

Date of Receipt **10 / 19 / 2013**

Transaction ID : AC1DB07E2321146D19A7

Amount of Each Receipt this Period **20.00**

Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	30.00
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 61
	<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. TIMOTHY RAPER		Date of Receipt 10 / 19 / 2013 Transaction ID : AE9A3B0442C844655B6E
Mailing Address 2333 Salisbury Ct		Amount of Each Receipt this Period 20.00
City Lewisville	State TX	Zip Code 75056-5644
FEC ID number of contributing federal political committee. C	Payroll Deduction: \$10.00/Bi-Weekly	
Name of Employer TENET HEALTHCARE CORPORATION	Occupation DIR, AVIATION	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) B. KIMBERLY P BROWN		Date of Receipt 10 / 19 / 2013 Transaction ID : A6EF27437A7C3472C9C1
Mailing Address 2634 Forest Pebble		Amount of Each Receipt this Period 20.00
City San Antonio	State TX	Zip Code 78232-4141
FEC ID number of contributing federal political committee. C	Payroll Deduction: \$10.00/Bi-Weekly	
Name of Employer TENET HEALTHCARE CORPORATION	Occupation SR DIR, COMPLIANCE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) C. BRUCE MEARS		Date of Receipt 10 / 19 / 2013 Transaction ID : A494C8E61B9FC4C26B1F
Mailing Address 10312 Arvin Hill Rd		Amount of Each Receipt this Period 20.00
City Aubrey	State TX	Zip Code 76227-6847
FEC ID number of contributing federal political committee. C	Payroll Deduction: \$10.00/Bi-Weekly	
Name of Employer TENET HEALTHCARE CORPORATION	Occupation SR DIR, IS OPERATIONS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

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 56 OF 61
	<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. JANIS THAYER
Full Name (Last, First, Middle Initial)

Mailing Address 1735 Crimson Ter

City	State	Zip Code
Brentwood	CA	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 ▼ **210.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2013

Transaction ID : AA9C7EBF5DB744577B5D

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

B. WAYNE E COBB
Full Name (Last, First, Middle Initial)

Mailing Address 4001 Orchid Ln

City	State	Zip Code
Mansfield	TX	76063-5577

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

Name of Employer	Occupation
TENET HEALTHCARE CORPORATION	MGR, TAX

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	/	19	/	2013

Transaction ID : A2454427E6AD74F9CB8B

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

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

Mailing Address 3013 Golf Crest Ln

City	State	Zip Code
Woodstock	GA	30189-8197

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

Name of Employer	Occupation
SOUTH FULTON MEDICAL CENTER	CEO

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	/	19	/	2013

Transaction ID : A4E1E5D58011B411090F

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 57 OF 61
	<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. STEVEN SIMMONS
Full Name (Last, First, Middle Initial)

Mailing Address 526 Hampshire Rd

City Drexel Hill State PA Zip Code 19026-1306

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

Name of Employer HAHNEMANN UNIVERSITY HOSPITAL Occupation CHIEF HR OFFICER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 19 / 2013
Transaction ID : AB253D1E03F7743AF992

Amount of Each Receipt this Period 20.00

Payroll Deduction: \$10.00/Bi-Weekly

B. CLAY A FARELL
Full Name (Last, First, Middle Initial)

Mailing Address 4118 Carla St

City Nacogdoches State TX Zip Code 75965-2239

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

Name of Employer NACOGDOCHES MEDICAL CENTER Occupation DBD-ASSOC ADMINISTRATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 19 / 2013
Transaction ID : A98EAB34B131A4BC7BDD

Amount of Each Receipt this Period 20.00

Payroll Deduction: \$10.00/Bi-Weekly

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

Mailing Address 288 Boulder Ln

City Nacogdoches State TX Zip Code 75965-7006

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

Name of Employer NACOGDOCHES MEDICAL CENTER Occupation COO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 19 / 2013
Transaction ID : AFA1385A036B643E3820

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 58 OF 61
	<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. ROBIN MONTOYA
Full Name (Last, First, Middle Initial)

Mailing Address 6504 Wind Ridge Dr

City El Paso State TX Zip Code 79912-7356

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

Name of Employer SIERRA PROVIDENCE EASTSIDE HOSPITAL Occupation DIR, MARKETING

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **10 / 19 / 2013**

Transaction ID : AD37397966CDC45D4BAF

Amount of Each Receipt this Period **20.00**

Payroll Deduction: \$10.00/Bi-Weekly

B. 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 ▼ **210.00**

Date of Receipt **10 / 19 / 2013**

Transaction ID : A267606853DD04D20A9C

Amount of Each Receipt this Period **20.00**

Payroll Deduction: \$10.00/Bi-Weekly

C. SCOTT A RIFKIN
Full Name (Last, First, Middle Initial)

Mailing Address 2188 Aspen St

City Tustin State CA Zip Code 92782-8339

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

Name of Employer LOS ALAMITOS MEDICAL CENTER Occupation COO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **10 / 19 / 2013**

Transaction ID : A490DDF94461C497CA96

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 59 OF 61
	<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. Full Name (Last, First, Middle Initial)
ALEXANDER M FERNANDEZ

Mailing Address 5843 NW 126th Ter

City State Zip Code
Coral Springs FL 33076-1934

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

Name of Employer Occupation
NORTH SHORE MEDICAL CENTER CFO

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 / 19 / 2013

Transaction ID : AB82A2A21F03241DA939

Amount of Each Receipt this Period
20.00

Payroll Deduction: \$10.00/Bi-Weekly

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	20.00
TOTAL This Period (last page this line number only).....▶	7907.30

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. FRIENDS OF JOHN BARRASSO

Mailing Address PO BOX 52008

City State Zip Code
CASPER WY 82605

Purpose of Disbursement
Primary 2018

Candidate Name

John A Barrasso

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: WY District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	07	/	2013

Transaction ID : B22F9AA908FCF4D3A803

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Beto O'Rourke For Congress

Mailing Address 1209 Prospect

City State Zip Code
El Paso TX 79902-3643

Purpose of Disbursement
Primary 2014

Candidate Name

Beto O'rourke

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: TX District: 16

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	07	/	2013

Transaction ID : B84B2AD3AE86747CBBE2

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

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

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

3500.00

3500.00

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 Joe Straus

Mailing Address P.O. Box 90388

City San Antonio State TX Zip Code 78209-9084

Purpose of Disbursement
Primary 2014

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			04			2013					

Transaction ID : B2FAB4F4AF9484203B87

Amount of Each Disbursement this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

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

--

C.

Full Name (Last, First, Middle Initial)

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

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

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

2500.00

2500.00
