

**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="2014"/>		119469.51
(b) Cash on Hand at Beginning of Reporting Period.....	103464.28	
(c) Total Receipts (from Line 19)	9633.50	147301.87
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	113097.78	266771.38
7. Total Disbursements (from Line 31).....	27120.00	180793.60
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	85977.78	85977.78
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).....	6743.30	49070.25
(ii) Unitemized	2890.20	32064.50
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	9633.50	81134.75
(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)	9633.50	81134.75
12. Transfers From Affiliated/Other Party Committees.....	0.00	64667.12
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	1500.00
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))..... ▶	9633.50	147301.87
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	9633.50	147301.87

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	120.00	220.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	120.00	220.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3500.00	118000.00
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	63.00
(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	63.00
29. Other Disbursements	23500.00	62510.60
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)) ..	27120.00	180793.60
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	27120.00	180793.60

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)	9633.50	81134.75
34. Total Contribution Refunds (from Line 28(d))	0.00	63.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	9633.50	81071.75
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	120.00	220.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	120.00	220.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 46
	<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. TERRY WHEELER
Full Name (Last, First, Middle Initial)

Mailing Address 13802 Magnolia Manor Dr

City Cypress State TX Zip Code 77429-8162

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

Name of Employer CYPRESS FAIRBANKS MEDICAL CENTER Occupation CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **595.00**

Date of Receipt **08 / 23 / 2014**

Transaction ID : A5B80F369E04349339BF

Amount of Each Receipt this Period **70.00**

Payroll Deduction: \$35.00/Bi-Weekly

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

Mailing Address 7935 East Dr Apt 901

City North Bay Village State FL Zip Code 33141-3693

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

Name of Employer NORTH SHORE MEDICAL CENTER Occupation CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **646.00**

Date of Receipt **08 / 23 / 2014**

Transaction ID : AF91341940DCE4DB1A41

Amount of Each Receipt this Period **76.00**

Payroll Deduction: \$38.00/Bi-Weekly

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

Mailing Address 3014 Castle Pines Dr

City Duluth State GA Zip Code 30097-2039

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

Name of Employer ATLANTA MEDICAL CENTER Occupation MARKET CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **340.00**

Date of Receipt **08 / 23 / 2014**

Transaction ID : A8B619FF37213493F9E1

Amount of Each Receipt this Period **40.00**

Payroll Deduction: \$20.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... **186.00**

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 46
	<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. 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 ▼ 646.00

Date of Receipt 08 / 23 / 2014
Transaction ID : A9066DAB5FA55464AA04
 Amount of Each Receipt this Period 76.00
 Payroll Deduction: \$38.00/Bi-Weekly

B. 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 COUNSEL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1275.00

Date of Receipt 08 / 23 / 2014
Transaction ID : ACAE64C00E9004D7984E
 Amount of Each Receipt this Period 150.00
 Payroll Deduction: \$75.00/Bi-Weekly

C. MICHAEL J KING
 Full Name (Last, First, Middle Initial)
 Mailing Address 2713 Stuyvesant Cir
 City Modesto State CA Zip Code 95356-0337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DOCTORS MEDICAL CENTER-MODESTO Occupation COO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 323.00

Date of Receipt 08 / 23 / 2014
Transaction ID : A71BF6A4DDAEA45AD911
 Amount of Each Receipt this Period 38.00
 Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	264.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 9 OF 46
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. 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 ▼ 646.00

Date of Receipt 08 / 23 / 2014
Transaction ID : A5498CB399EB34EB29E8
 Amount of Each Receipt this Period 76.00
 Payroll Deduction: \$38.00/Bi-Weekly

B. Brock Phillips
 Full Name (Last, First, Middle Initial)
 Mailing Address 1445 Ross Ave Ste 1400
 City Dallas State TX Zip Code 75202-2703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ -65.00

Date of Receipt 08 / 09 / 2014
Transaction ID : A142F83543EAE49DBB0E
 Amount of Each Receipt this Period -65.00
 Refund Payroll Deduction: \$-65.00/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 ▼ 663.00

Date of Receipt 08 / 23 / 2014
Transaction ID : A618C87941C724618BB5
 Amount of Each Receipt this Period 78.00
 Payroll Deduction: \$39.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ▶ 89.00
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 46
	<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. ALBERT BARROCAS
 Full Name (Last, First, Middle Initial)
 Mailing Address 4050 Spalding Dr
 City Atlanta State GA Zip Code 30350-1100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SOUTH FULTON MEDICAL CENTER Occupation CHIEF MEDICAL OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 08 / 23 / 2014
Transaction ID : A32428C30CCAB4F15804
 Amount of Each Receipt this Period 38.00
 Payroll Deduction: \$19.00/Bi-Weekly

B. RODNEY A REASONER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1960 Mary Lee Ln
 City Allen State TX Zip Code 75002-8528
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHCARE CORPORATION Occupation VP, FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 646.00

Date of Receipt 08 / 23 / 2014
Transaction ID : A5918C2561C1C4371815
 Amount of Each Receipt this Period 76.00
 Payroll Deduction: \$38.00/Bi-Weekly

C. 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 ▼ 1634.55

Date of Receipt 08 / 23 / 2014
Transaction ID : A3EF5C23AF2F64E2E9F3
 Amount of Each Receipt this Period 192.30
 Payroll Deduction: \$96.15/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	306.30
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 46
	<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. RONALD GALONSKY
 Full Name (Last, First, Middle Initial)
 Mailing Address 2 Alato Drive
 City Mission Viejo State CA Zip Code 92692-5104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Lakewood Medical Center Occupation CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 08 / 23 / 2014
Transaction ID : ADA606DEF7AE94810B54
 Amount of Each Receipt this Period 78.00
 Payroll Deduction: \$39.00/Bi-Weekly

B. JOHN A GRAH
 Full Name (Last, First, Middle Initial)
 Mailing Address 6104 La Posta Dr
 City El Paso State TX Zip Code 79912-1842
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PROVIDENCE MEMORIAL HOSPITAL Occupation COO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 663.00

Date of Receipt 08 / 23 / 2014
Transaction ID : A97B8BB25BF244679B3F
 Amount of Each Receipt this Period 78.00
 Payroll Deduction: \$39.00/Bi-Weekly

C. JOHN QUINN
 Full Name (Last, First, Middle Initial)
 Mailing Address 1138 Pine Valley Rd
 City Griffin State GA Zip Code 30224-4953
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SPALDING REGIONAL HOSPITAL Occupation CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 646.00

Date of Receipt 08 / 23 / 2014
Transaction ID : ACAABC7763751473D903
 Amount of Each Receipt this Period 76.00
 Payroll Deduction: \$38.00/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 12 OF 46
	<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. LESTER G COTTLE
Full Name (Last, First, Middle Initial)

Mailing Address 1625 Fawn Ln

City State Zip Code
Huntingdon Valley PA 19006-7917

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **323.00**

Date of Receipt
08 / 23 / 2014

Transaction ID : A2C7A52DE4AA94EC995D

Amount of Each Receipt this Period
38.00

Payroll Deduction: \$19.00/Bi-Weekly

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

Mailing Address 6516 Vasco Way

City State Zip Code
El Paso TX 79912-1709

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

Name of Employer Occupation
SIERRA MEDICAL CENTER DIR, EXTERNAL AFFAIRS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **585.00**

Date of Receipt
08 / 23 / 2014

Transaction ID : AB651AE46E592418194F

Amount of Each Receipt this Period
78.00

Payroll Deduction: \$39.00/Bi-Weekly

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

Mailing Address 391 E Milgeo Ave

City State Zip Code
Ripon CA 95366-2120

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

Name of Employer Occupation
DOCTORS HOSPITAL OF MANTECA CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **663.00**

Date of Receipt
08 / 23 / 2014

Transaction ID : AE8DE10A553FD4053843

Amount of Each Receipt this Period
78.00

Payroll Deduction: \$39.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... **194.00**

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

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

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

FOR LINE NUMBER: PAGE 13 OF 46
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. 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 ▼ 1632.00

Date of Receipt 08 / 23 / 2014
Transaction ID : A9D3BFEC5705E4EB79B1
 Amount of Each Receipt this Period 192.00
 Payroll Deduction: \$96.00/Bi-Weekly

B. 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 ▼ 1632.00

Date of Receipt 08 / 23 / 2014
Transaction ID : A2AB31B7220F7401AA95
 Amount of Each Receipt this Period 192.00
 Payroll Deduction: \$96.00/Bi-Weekly

C. MICHELE M FINNEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 21521 Turtledove St
 City Trabuco Canyon State CA Zip Code 92679-3486
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LOS ALAMITOS MEDICAL CENTER Occupation CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 646.00

Date of Receipt 08 / 23 / 2014
Transaction ID : AE748BCF5105A46F88C3
 Amount of Each Receipt this Period 76.00
 Payroll Deduction: \$38.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ▶ 460.00
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 46		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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

Full Name (Last, First, Middle Initial) A. KEITH PITTS		Date of Receipt										
Mailing Address 4441 South Versailles Ave		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>08</td> <td></td> <td>23</td> <td></td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	08		23		2014
M M M	/	D D D	/	Y Y Y Y Y Y								
08		23		2014								
City	State	Zip Code										
Dallas	TX	75205-3012										
FEC ID number of contributing federal political committee.		Transaction ID : A2E49C5B95BB54A6BBFC										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period										
		384.00										
Name of Employer		Payroll Deduction: \$192.00/Bi-Weekly										
Tenet Healthcare Corporation												
Occupation												
Vice Chairman												
Receipt For:	Aggregate Year-to-Date ▼											
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	1728.00											

Full Name (Last, First, Middle Initial) B. COREY L DAVISON		Date of Receipt										
Mailing Address 2700 Crepe Myrtle Dr		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>08</td> <td></td> <td>23</td> <td></td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	08		23		2014
M M M	/	D D D	/	Y Y Y Y Y Y								
08		23		2014								
City	State	Zip Code										
Flower Mound	TX	75028-3617										
FEC ID number of contributing federal political committee.		Transaction ID : AD0E9A16EA72246649ED										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period										
		78.00										
Name of Employer		Payroll Deduction: \$39.00/Bi-Weekly										
TENET HEALTHCARE CORPORATION												
Occupation												
VP, GOVT RELATIONS												
Receipt For:	Aggregate Year-to-Date ▼											
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	663.00											

Full Name (Last, First, Middle Initial) C. JOSEPH J. MULLANY		Date of Receipt										
Mailing Address 2169 Tottenham Road		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>08</td> <td></td> <td>23</td> <td></td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	08		23		2014
M M M	/	D D D	/	Y Y Y Y Y Y								
08		23		2014								
City	State	Zip Code										
Bloomfield Hills	MI	48301-2332										
FEC ID number of contributing federal political committee.		Transaction ID : AEEF9B2897D074255B66										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period										
		192.00										
Name of Employer		Payroll Deduction: \$96.00/Bi-Weekly										
Detroit Medical Center												
Occupation												
CEO												
Receipt For:	Aggregate Year-to-Date ▼											
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	384.00											

SUBTOTAL of Receipts This Page (optional).....▶	654.00
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 46
	<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. 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 ▼ **323.00**

Date of Receipt **08 / 23 / 2014**

Transaction ID : AB8E40EBFC05B4B7982A

Amount of Each Receipt this Period **38.00**

Payroll Deduction: \$19.00/Bi-Weekly

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

Mailing Address 15408 Fox Meadow Ln

City Frisco State TX Zip Code 75035-3671

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

Name of Employer CONIFER Occupation VP CLIENT DELIVERY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **323.00**

Date of Receipt **08 / 23 / 2014**

Transaction ID : A7DDFA61048DA4A27BA3

Amount of Each Receipt this Period **38.00**

Payroll Deduction: \$19.00/Bi-Weekly

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

Mailing Address 42 Barneburg

City Dove Canyon State CA Zip Code 92679-4210

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation SVP, REGIONAL OPERATIONS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **646.00**

Date of Receipt **08 / 23 / 2014**

Transaction ID : AFA3BE263BEFC4F8A920

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 16 OF 46
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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 ST. CHRISTOPHER'S HOSPITAL FOR CHILDREN Occupation CHIEF HR OFFICER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **323.00**

Date of Receipt **08 / 23 / 2014**
Transaction ID : A76FD0EE4F8A14A55A42
 Amount of Each Receipt this Period **38.00**
 Payroll Deduction: \$19.00/Bi-Weekly

B. SALLY A HURT-STEFFEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 712 Waltham Ct
 City El Paso State TX Zip Code 79922-2128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SIERRA PROVIDENCE EASTSIDE HOSPITAL Occupation CEO
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **850.00**

Date of Receipt **08 / 23 / 2014**
Transaction ID : A3A617D38E6C94099873
 Amount of Each Receipt this Period **100.00**
 Payroll Deduction: \$50.00/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 **340.00**

Date of Receipt **08 / 23 / 2014**
Transaction ID : A14461686C94445D3AA8
 Amount of Each Receipt this Period **40.00**
 Payroll Deduction: \$20.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	178.00
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 46
	<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 E MCPARTLAND
 Full Name (Last, First, Middle Initial)
 Mailing Address 2345 Timberlake Cir
 City State Zip Code
 Allen TX 75013-5835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 TENET HEALTHCARE CORPORATION VP, PATIENT MGMT SYSTEMS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 323.00

Date of Receipt
 08 / 23 / 2014
Transaction ID : A00AD2BEFB19949A7930
 Amount of Each Receipt this Period
 38.00
 Payroll Deduction: \$19.00/Bi-Weekly

B. KELVIN A BAGGETT
 Full Name (Last, First, Middle Initial)
 Mailing Address 6453 Tulip Ln
 City State Zip Code
 Dallas TX 75230-4148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 TENET HEALTHCARE CORPORATION SVP, CHIEF MEDICAL OFCR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 663.00

Date of Receipt
 08 / 23 / 2014
Transaction ID : AC5BAE3C7C75648F4AA5
 Amount of Each Receipt this Period
 78.00
 Payroll Deduction: \$39.00/Bi-Weekly

C. ALVIN W JOSEPHS
 Full Name (Last, First, Middle Initial)
 Mailing Address 3717 Herwol Ave
 City State Zip Code
 Waco TX 76710-7218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 TENET HEALTHCARE CORPORATION SR DIR, COMPLNCE POLICY
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 663.00

Date of Receipt
 08 / 23 / 2014
Transaction ID : A3F6CDFE51DAD4710AC5
 Amount of Each Receipt this Period
 78.00
 Payroll Deduction: \$39.00/Bi-Weekly

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 46
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. ROBERT HOEFER
Full Name (Last, First, Middle Initial)

Mailing Address 11216 Hermitage Hill Place

City Saint Louis State MO Zip Code 63131-3322

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

Name of Employer St. Louis University Hospital Occupation COO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **273.00**

Date of Receipt **08 / 23 / 2014**

Transaction ID : A51860C17B6AF4AE4AA2

Amount of Each Receipt this Period **78.00**

Payroll Deduction: \$39.00/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 ▼ **425.00**

Date of Receipt **08 / 23 / 2014**

Transaction ID : A240A2A390E504DE696A

Amount of Each Receipt this Period **50.00**

Payroll Deduction: \$25.00/Bi-Weekly

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

Mailing Address 13123 Avalange Ct

City Cypress State TX Zip Code 77429-4913

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

Name of Employer CYPRESS FAIRBANKS MEDICAL CENTER Occupation COO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **323.00**

Date of Receipt **08 / 23 / 2014**

Transaction ID : A71A9ABC2F44642D5BAC

Amount of Each Receipt this Period **38.00**

Payroll Deduction: \$19.00/Bi-Weekly

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 46
	<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 ▼ **646.00**

Date of Receipt: **08 / 23 / 2014**
Transaction ID : **A663B86C8520143DFB71**

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

Payroll Deduction: \$38.00/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 ▼ **323.00**

Date of Receipt: **08 / 23 / 2014**
Transaction ID : **A0F728E1FAD8E40F487D**

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

Payroll Deduction: \$19.00/Bi-Weekly

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

Mailing Address 1043 Humphrey Oaks Cir

City Memphis State TN Zip Code 38120-2626

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

Name of Employer: SAINT FRANCIS HOSPITAL
Occupation: ASSOC. ADMINISTRATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **323.00**

Date of Receipt: **08 / 23 / 2014**
Transaction ID : **A8A2E087D4CA14452BE2**

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 20 OF 46
<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. 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 ▼ 425.00

Date of Receipt 08 / 23 / 2014
Transaction ID : AD1BCFC9410864495A0C
 Amount of Each Receipt this Period 50.00
 Payroll Deduction: \$25.00/Bi-Weekly

B. 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 ▼ 680.00

Date of Receipt 08 / 23 / 2014
Transaction ID : A3E93AE6536914D3DAF6
 Amount of Each Receipt this Period 80.00
 Payroll Deduction: \$40.00/Bi-Weekly

C. EDWARD MESCO
 Full Name (Last, First, Middle Initial)
 Mailing Address 7365 NW 54th St
 City Lauderhill State FL Zip Code 33319-6346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHCARE CORPORATION Occupation DIR, REG REIMBURSEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 08 / 23 / 2014
Transaction ID : AD3938478A49C41DB9FA
 Amount of Each Receipt this Period 50.00
 Payroll Deduction: \$25.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	180.00
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 46
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 1445 Ross Avenue
Suite 1400

City Dallas State TX Zip Code 75202-2703

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

Name of Employer HOUSTON NORTHWEST MEDICAL CENTER Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 312.00

Date of Receipt
08 / 23 / 2014
Transaction ID : **A8C95F523F26D4092A70**

Amount of Each Receipt this Period 78.00

Payroll Deduction: \$39.00/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 ▼ 1632.00

Date of Receipt
08 / 23 / 2014
Transaction ID : **A63DD619295DB459B9CB**

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 El Paso State TX Zip Code 79912-2341

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 323.00

Date of Receipt
08 / 23 / 2014
Transaction ID : **A660DDEC0C5894AE1AB3**

Amount of Each Receipt this Period 38.00

Payroll Deduction: \$19.00/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 22 OF 46
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. DAVID L CORDOVA
Full Name (Last, First, Middle Initial)
Mailing Address 2118 University Cir
City Rowlett State TX Zip Code 75088-6573
FEC ID number of contributing federal political committee. **C**
Name of Employer TENET HEALTHCARE CORPORATION Occupation DIR, MED ECON OP/PHY SVC
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **70.00**

Date of Receipt **08 / 09 / 2014**
Transaction ID : A8B6D9A79096540269A7
Amount of Each Receipt this Period **-5.00**
Payroll Deduction: \$-5.00/Bi-Weekly

B. CONRAD MALLETT
Full Name (Last, First, Middle Initial)
Mailing Address 19386 Cumberland Way
City Detroit State MI Zip Code 48203-1456
FEC ID number of contributing federal political committee. **C**
Name of Employer Detroit Medical Center Occupation Chief Administrative Officer
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **864.00**

Date of Receipt **08 / 23 / 2014**
Transaction ID : A54FF989E85A844BE98C
Amount of Each Receipt this Period **192.00**
Payroll Deduction: \$96.00/Bi-Weekly

C. TIM ADAMS
Full Name (Last, First, Middle Initial)
Mailing Address 2408 University Club Dr
City Austin State TX Zip Code 78732-2052
FEC ID number of contributing federal political committee. **C**
Name of Employer TENET HEALTHCARE CORPORATION Occupation SVP REGIONAL OPERATIONS
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1632.00**

Date of Receipt **08 / 23 / 2014**
Transaction ID : AE61EB64B3B1D449892C
Amount of Each Receipt this Period **192.00**
Payroll Deduction: \$96.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	379.00
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 46
<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. AUDREY T ANDREWS
Full Name (Last, First, Middle Initial)

Mailing Address 702 Penfolds Ln

City Coppell	State TX	Zip Code 75019-4544
-----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼	3264.00
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Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	23	/	2014

Transaction ID : ABBB1CAAE7F18426DB83

Amount of Each Receipt this Period

384.00

Payroll Deduction: \$192.00/Bi-Weekly

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

Mailing Address 714 Kent Ct

City Southlake	State TX	Zip Code 76092-8868
-------------------	-------------	------------------------

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

Name of Employer TENET HEALTHCARE CORPORATION	Occupation SVP, PHYSICIAN RESOURCES
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼	1632.00
--------------------------	---------

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	23	/	2014

Transaction ID : A2123C3C6129A458C80C

Amount of Each Receipt this Period

192.00

Payroll Deduction: \$96.00/Bi-Weekly

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

Mailing Address 6307 Preston Pkwy

City Dallas	State TX	Zip Code 75205-1650
----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼	323.00
--------------------------	--------

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	23	/	2014

Transaction ID : A5F7C0677E7A546BFAFF

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	614.00
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 46
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. VANESSA BENAVIDES
 Full Name (Last, First, Middle Initial)
 Mailing Address 3818 Cedar Spr # 101-32
 City Dallas State TX Zip Code 75219-0000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHCARE CORPORATION Occupation CORP COMPLIANCE OFFICER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **663.00**

Date of Receipt **08 / 23 / 2014**
Transaction ID : ACF8D7B2A39754673BC8
 Amount of Each Receipt this Period **78.00**
 Payroll Deduction: \$39.00/Bi-Weekly

B. PHILLIP SOWA
 Full Name (Last, First, Middle Initial)
 Mailing Address 4909 Laclede Ave Apt 805
 City Saint Louis State MO Zip Code 63108-1446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SAINT LOUIS UNIVERSITY HOSPITAL Occupation CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **273.00**

Date of Receipt **08 / 23 / 2014**
Transaction ID : AC92040C52EB4450DBC8
 Amount of Each Receipt this Period **78.00**
 Payroll Deduction: \$39.00/Bi-Weekly

C. MICHAEL K BURTNETT
 Full Name (Last, First, Middle Initial)
 Mailing Address 1131 N Edgefield Ave
 City Dallas State TX Zip Code 75208-3624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHCARE CORPORATION Occupation VP, OUTPATIENT SERVICES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **646.00**

Date of Receipt **08 / 23 / 2014**
Transaction ID : A6D0415AFAED24C00A3A
 Amount of Each Receipt this Period **76.00**
 Payroll Deduction: \$38.00/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 25 OF 46
<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. ANDREAS M GRAF
 Full Name (Last, First, Middle Initial)
 Mailing Address 3975 Stockton Ln
 City Dallas State TX Zip Code 75287-4921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHCARE CORPORATION Occupation MGR, TRAVEL
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **323.00**

Date of Receipt **08 / 23 / 2014**
Transaction ID : A5856E5DC6E634CC4A69
 Amount of Each Receipt this Period **38.00**
 Payroll Deduction: \$19.00/Bi-Weekly

B. SHELLEY GILES
 Full Name (Last, First, Middle Initial)
 Mailing Address 3803 Stockton Ln
 City Dallas State TX Zip Code 75287-4919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHCARE CORPORATION Occupation DIR, RELOCATION
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **340.00**

Date of Receipt **08 / 23 / 2014**
Transaction ID : ACC08B34403DD42A5A8A
 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 **352.00**

Date of Receipt **08 / 09 / 2014**
Transaction ID : AC11E8B8D77F44D5BA24
 Amount of Each Receipt this Period **-308.00**
 Payroll Deduction: \$-308.00/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 26 OF 46
	<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. STEVEN B BARR			Date of Receipt
Mailing Address 1300 Binz St			<input type="text" value="08"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : A87D5079303F041AA90F
Houston	TX	77004-7016	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			<input type="text" value="38.00"/>
Name of Employer	Occupation	Payroll Deduction: \$19.00/Bi-Weekly	
PLAZA SPECIALTY HOSPITAL	CEO		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="323.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. ROB FINNEGAN			Date of Receipt
Mailing Address 2804 Carriage Trl			<input type="text" value="08"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : A70DCAC61C2B74643B14
McKinney	TX	75070-4306	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			<input type="text" value="38.00"/>
Name of Employer	Occupation	Payroll Deduction: \$19.00/Bi-Weekly	
TENET HEALTHCARE CORPORATION	SR DIR, FINANCE ASC		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="323.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. TYLER MURPHY			Date of Receipt
Mailing Address 108 Londonberry Ter			<input type="text" value="08"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : AB4FDCCE042F949198A5
Southlake	TX	76092-7321	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			<input type="text" value="38.00"/>
Name of Employer	Occupation	Payroll Deduction: \$19.00/Bi-Weekly	
TENET HEALTHCARE CORPORATION	VP AND TREASURER		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="323.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="114.00"/>
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 27 OF 46
	<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. 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 ▼ 323.00

Date of Receipt 08 / 23 / 2014
Transaction ID : A111133701C6F4AF2A95
 Amount of Each Receipt this Period 38.00
 Payroll Deduction: \$19.00/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 ▼ 663.00

Date of Receipt 08 / 23 / 2014
Transaction ID : AACF7EFA1E90743888CA
 Amount of Each Receipt this Period 78.00
 Payroll Deduction: \$39.00/Bi-Weekly

C. LINDA K MERCIER
 Full Name (Last, First, Middle Initial)
 Mailing Address 14 Columbia Crest Pl
 City Spring State TX Zip Code 77382-1334
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HOUSTON NW MEDICAL CENTER Occupation CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 663.00

Date of Receipt 08 / 23 / 2014
Transaction ID : A7EDB92EA54FA4DB8893
 Amount of Each Receipt this Period 78.00
 Payroll Deduction: \$39.00/Bi-Weekly

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 46
	<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 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 **323.00**

Date of Receipt **08 / 23 / 2014**
Transaction ID : A1F182E1EF3AA4180BD3
 Amount of Each Receipt this Period **38.00**
 Payroll Deduction: \$19.00/Bi-Weekly

B. MICHAEL HALTER
 Full Name (Last, First, Middle Initial)
 Mailing Address 111 Righters Mill Rd
 City Penn Valley State PA Zip Code 19072-1312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HAHNEMANN UNIVERSITY HOSPITAL Occupation CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **323.00**

Date of Receipt **08 / 23 / 2014**
Transaction ID : AE411815CB0B64EBFB12
 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 Woodland Hills State CA Zip Code 91367-3004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHCARE CORPORATION Occupation VP, GOVT PROGRAMS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **680.00**

Date of Receipt **08 / 23 / 2014**
Transaction ID : A826E6EE7A5454A498E5
 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 29 OF 46
	<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. ALAN R CASON
Full Name (Last, First, Middle Initial)

Mailing Address 255 Evernia St
Apt 1503

City West Palm Bch State FL Zip Code 33401-5691

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 323.00

Date of Receipt 08 / 23 / 2014
Transaction ID : AA30A7326B24A4CC1BF2

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 Dr

City Fort Lauderdale State FL Zip Code 33301-2537

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

Name of Employer WEST BOCA MEDICAL CENTER Occupation CHIEF MEDICAL OFFICER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 08 / 23 / 2014
Transaction ID : A51B68B5C8AAA4A759E6

Amount of Each Receipt this Period 20.00

Payroll Deduction: \$10.00/Bi-Weekly

C. DENISE F BERGER
Full Name (Last, First, Middle Initial)

Mailing Address 1504 Country Bend Dr

City Saint Charles State MO Zip Code 63303-2512

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

Name of Employer DES PERES HOSPITAL Occupation HOSPITAL COMPLIANCE OFF

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 273.00

Date of Receipt 08 / 23 / 2014
Transaction ID : A63154BDE4D8646E7936

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 30 OF 46
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. MARITA COVARRUBIAS
 Full Name (Last, First, Middle Initial)
 Mailing Address 7115 Wildgrove Ave
 City Dallas State TX Zip Code 75214-3841
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TENET HEALTHCARE CORPORATION Occupation VP & ASST GENERAL COUNSE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **323.00**

Date of Receipt **08 / 23 / 2014**
Transaction ID : A3D04E3814C8B4525AF9
 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 Omaha State NE Zip Code 68142-1723
 FEC ID number of contributing federal political committee. **C**
 Name of Employer JFK Memorial Hospital Occupation CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1632.00**

Date of Receipt **08 / 23 / 2014**
Transaction ID : A69272A20F0294581951
 Amount of Each Receipt this Period **192.00**
 Payroll Deduction: \$96.00/Bi-Weekly

C. JOE D THOMASON
 Full Name (Last, First, Middle Initial)
 Mailing Address 6304 Carmel Falls Ct
 City McKinney State TX Zip Code 75070-8768
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CENTENNIAL MEDICAL CENTER Occupation CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **646.00**

Date of Receipt **08 / 23 / 2014**
Transaction ID : AA80B591810E24A6DB92
 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 31 OF 46
	<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 ▼ **323.00**

Date of Receipt **08 / 23 / 2014**

Transaction ID : A0EC91580377444A39BC

Amount of Each Receipt this Period **38.00**

Payroll Deduction: \$19.00/Bi-Weekly

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

Mailing Address PO Box 757

City Edgewood State TX Zip Code 75117-0757

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation ASST - ADMINISTRATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **340.00**

Date of Receipt **08 / 23 / 2014**

Transaction ID : A5CB79A35FC9C49809BA

Amount of Each Receipt this Period **40.00**

Payroll Deduction: \$20.00/Bi-Weekly

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

Mailing Address 7746 Eagle Trl

City Dallas State TX Zip Code 75238-4115

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

Name of Employer TENET HEALTHCARE CORPORATION Occupation VP, TAXATION

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **340.00**

Date of Receipt **08 / 23 / 2014**

Transaction ID : A54901B2EFC6E499C9E2

Amount of Each Receipt this Period **40.00**

Payroll Deduction: \$20.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... **118.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 46
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 2613 Millington Dr

City Plano	State TX	Zip Code 75093-3560
---------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼	288.00
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Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 23 / 2014

Transaction ID : AAF5D06161C7F468F87E

Amount of Each Receipt this Period

32.00

Payroll Deduction: \$16.00/Bi-Weekly

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

Mailing Address 4017 Flamingo Dr

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼	323.00
--------------------------	--------

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 23 / 2014

Transaction ID : A8898D8058F4F4C98ABC

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

C. 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 ▼	323.00
--------------------------	--------

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 23 / 2014

Transaction ID : A268BBCB9C8BE4586851

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	108.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 46
	<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. RICKY JOHNSTON
Full Name (Last, First, Middle Initial)

Mailing Address 401 N Church St

City McKinney State TX Zip Code 75069-3854

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

Name of Employer: TENET HEALTHCARE CORPORATION
Occupation: VP, IT TECHNOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **765.00**

Date of Receipt: **08 / 23 / 2014**

Transaction ID : A9EFFDD327DF94EB48AF

Amount of Each Receipt this Period: **90.00**

Payroll Deduction: \$45.00/Bi-Weekly

B. GARY J SLOAN
Full Name (Last, First, Middle Initial)

Mailing Address 615 Stevens Ct

City Danville State CA Zip Code 94506-4805

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

Name of Employer: San Ramon Regional Medical Center
Occupation: CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **323.00**

Date of Receipt: **08 / 23 / 2014**

Transaction ID : A53288DC601E94E81A2B

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

Payroll Deduction: \$19.00/Bi-Weekly

C. PHILLIP W. ROE
Full Name (Last, First, Middle Initial)

Mailing Address 1445 Ross Avenue Suite 1400

City Dallas State TX Zip Code 75202-2703

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

Name of Employer: TENET HEALTHCARE CORPORATION
Occupation: SR. VICE PRESIDENT-FINANCE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **672.00**

Date of Receipt: **08 / 23 / 2014**

Transaction ID : A9F91BCB6B9124CF5B8E

Amount of Each Receipt this Period: **192.00**

Payroll Deduction: \$96.00/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 34 OF 46
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. THOMAS RICE
Full Name (Last, First, Middle Initial)
Mailing Address 15126 Ferdinand Dr
City Dallas State TX Zip Code 75248-6437
FEC ID number of contributing federal political committee. **C**
Name of Employer TENET HEALTHCARE CORPORATION Occupation SVP, INVESTOR RELATIONS
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **663.00**

Date of Receipt **08 / 23 / 2014**
Transaction ID : A2D29CB48B02A4EEFA04
Amount of Each Receipt this Period **78.00**
Payroll Deduction: \$39.00/Bi-Weekly

B. PAUL D. SLAVIN
Full Name (Last, First, Middle Initial)
Mailing Address 508 Forrest Ave
City Cleburne State TX Zip Code 76033-5345
FEC ID number of contributing federal political committee. **C**
Name of Employer TENET HEALTHCARE CORPORATION Occupation VP COMPENSATION BENEFITS
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **323.00**

Date of Receipt **08 / 23 / 2014**
Transaction ID : AC1C1926078F54A27A7B
Amount of Each Receipt this Period **38.00**
Payroll Deduction: \$19.00/Bi-Weekly

C. DANIEL WALDMANN
Full Name (Last, First, Middle Initial)
Mailing Address 1111 N Montclair Ave
City Dallas State TX Zip Code 75208-3520
FEC ID number of contributing federal political committee. **C**
Name of Employer TENET HEALTHCARE CORPORATION Occupation VP, GOVERNMENT RELATIONS
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1632.00**

Date of Receipt **08 / 23 / 2014**
Transaction ID : A4BBCCA1F71C04AD8B3C
Amount of Each Receipt this Period **192.00**
Payroll Deduction: \$96.00/Bi-Weekly

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

**SCHEDULE 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. ALAN LOWENTHAL FOR CONGRESS

Mailing Address 6380 WILSHIRE BLVD., #1612

City LOS ANGELES State CA Zip Code 90048

Purpose of Disbursement
General 2014

Candidate Name

Alan Lowenthal

Office Sought: House
 Senate
 President
State: CA District: 47

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 25 / 2014

Transaction ID : B318992E0BA0D41C1BC4

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. TOM RICE FOR CONGRESS

Mailing Address 1107 48TH AVE., N.
SUITE 310-A

City MYRTLE BEACH State SC Zip Code 29577

Purpose of Disbursement
General 2014

Candidate Name

Tom Rice

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

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2014

Transaction ID : B569D56859533403AA2A

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. ADRIAN SMITH FOR CONGRESS

Mailing Address 3321 AVENUE I
SUITE 6

City SCOTTSBLUFF State NE Zip Code 69361

Purpose of Disbursement
General 2014

Candidate Name

Adrian Smith

Office Sought: House
 Senate
 President
State: NE District: 03

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2014

Transaction ID : B57EEC503150247FC8FA

Amount of Each Disbursement this Period

1000.00

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

2500.00

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

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. TOM REED FOR CONGRESS

Mailing Address PO BOX 10847

City ROCHESTER State NY Zip Code 14610

Purpose of Disbursement
General 2014

Candidate Name

Thomas W Reed II

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NY District: 23

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	25	/	2014

Transaction ID : B6F596A573295483387E

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

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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)..... ▶

1000.00

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. Republican Leadership PAC

Mailing Address 1100 Tijeras Street NW

City Albuquerque State NM Zip Code 87102-2912

Purpose of Disbursement
Other 2014

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Other2014

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 25 / 2014

Transaction ID : B2C17B75DB13D4223AB2

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Sarah Davis Campaign

Mailing Address 4203 Tennyson Street

City Houston State TX Zip Code 77005-2751

Purpose of Disbursement
General 2014

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 25 / 2014

Transaction ID : B4C4D668F986241D48AF

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Vote Reagan 2014

Mailing Address 3104 E. Camelback Road #112

City Phoenix State AZ Zip Code 85016-4502

Purpose of Disbursement
Primary 2014

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2014

Transaction ID : B97761E8F096D45729FA

Amount of Each Disbursement this Period

1000.00

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

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

4500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Committee to Elect Diane Landis

Mailing Address 727 E Bethany Home Rd
Ste B109

City Phoenix State AZ Zip Code 85014-2151

Purpose of Disbursement
Primary 2014

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2014

Transaction ID : BFF7FED615FB24314BDB

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Vote Littlefield

Mailing Address 8926 E. Sheena Drive

City Scottsdale State AZ Zip Code 85260-7061

Purpose of Disbursement
Primary 2014

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2014

Transaction ID : B3FB55FD092EA4D0B895

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Texans for Greg Abbott

Mailing Address 504 Lavaca Street

City Austin State TX Zip Code 78701-2900

Purpose of Disbursement
General 2014

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 25 / 2014

Transaction ID : B77E62481715C4046B59

Amount of Each Disbursement this Period

2500.00

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

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

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. Susana Martinez for Governor

Mailing Address 6125 Jornada N

City Las Cruces State NM Zip Code 88012-9505

Purpose of Disbursement
General 2014

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	29	/	2014

Transaction ID : BAFD9963FABB84DC4B03

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. Effie for AZ

Mailing Address 8432 E Plaza Ave

City Scottsdale State AZ Zip Code 85250-6705

Purpose of Disbursement
Primary 2014

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	04	/	2014

Transaction ID : BBA2503F7665B4AD3BE9

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Committee to Elect Jeff Schwartz

Mailing Address 4715 N. 32 St. #104

City Phoenix State AZ Zip Code 85018-3300

Purpose of Disbursement
Primary 2014

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	04	/	2014

Transaction ID : B0497F75A24ED4902A27

Amount of Each Disbursement this Period

500.00

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

2500.00

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

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**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. Elect Eric Meyer

Mailing Address 8316 E. Cypress St.

City Scottsdale State AZ Zip Code 85257-2855

Purpose of Disbursement
Primary 2014

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2014

Transaction ID : B5B54F63C8DC7483CBDB

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. McArthur for Arizona

Mailing Address 7754 E Boise St

City Mesa State AZ Zip Code 85207-7534

Purpose of Disbursement
Primary 2014

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2014

Transaction ID : BD241591A451A4F388DC

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Leticia Van de Putte for Lt. Governor Campaign

Mailing Address P.O. Box 8490

City San Antonio State TX Zip Code 78208-0490

Purpose of Disbursement
General 2014

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 25 / 2014

Transaction ID : B6E54D708747B4488B5A

Amount of Each Disbursement this Period

2500.00

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

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

4000.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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. Tony Rivero for House of Representatives

Mailing Address 6767 W. Cheryl Drive

City Peoria State AZ Zip Code 85345-6766

Purpose of Disbursement
Primary 2014

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2014

Transaction ID : B0EC3BD5932A34FCD933

Amount of Each Disbursement this Period

500.00

B. Grant for AZ

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 69882

City Oro Valley State AZ Zip Code 85737-0023

Purpose of Disbursement
Primary 2014

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2014

Transaction ID : BFB4145FA7EE549A2B4C

Amount of Each Disbursement this Period

500.00

C. Texas House Leadership Fund

Full Name (Last, First, Middle Initial)

Mailing Address 1005 Congress Avenue
Suite 910

City Austin State TX Zip Code 78701-2467

Purpose of Disbursement
Other 2014

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Other2014

Date of Disbursement

MM / DD / YYYY
08 / 25 / 2014

Transaction ID : BAF645D487D3A4ABC9E2

Amount of Each Disbursement this Period

2000.00

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

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

3000.00

**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 Jason Villalba

Mailing Address P.O. Box 670368

City State Zip Code
Dallas TX 75367-0368

Purpose of Disbursement
General 2014

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	25	/	2014

Transaction ID : BAE29F45BDD97485D945

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B. Tom O'Halleran for Senate

Mailing Address PO Box 20375

City State Zip Code
Sedona AZ 86341-0375

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 M	/	D D D	/	Y Y Y Y Y
08	/	04	/	2014

Transaction ID : BD565886AC06E429EB19

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Committee to Re-elect Garnet Coleman

Mailing Address P.O. Box 88140

City State Zip Code
Houston TX 77288-0140

Purpose of Disbursement
General 2014

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	25	/	2014

Transaction ID : B6F9677A1519E4F32948

Amount of Each Disbursement this Period

250.00

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

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

1000.00

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**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. Vote Scott Bartle

Mailing Address PO Box 1018

City Maricopa State AZ Zip Code 85139-0320

Purpose of Disbursement
Primary 2014

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2014

Transaction ID : B7A1A8832CF42444996B

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Smith Governor 2014

Mailing Address PO Box 5057

City Mesa State AZ Zip Code 85211-5057

Purpose of Disbursement
Primary 2014

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2014

Transaction ID : B64ABB5A15E964194BFF

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. Miranda for Senate 2014

Mailing Address PO Box 20522

City Phoenix State AZ Zip Code 85036-0522

Purpose of Disbursement
Primary 2014

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2014

Transaction ID : B9200E1B97FBE42A1809

Amount of Each Disbursement this Period

500.00

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

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

3000.00

**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. Lela Alston 2014

Mailing Address 69 W Willetta St Apt 1

City Phoenix State AZ Zip Code 85003-1236

Purpose of Disbursement
Primary 2014

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2014

Transaction ID : B9E0E5968368F4E438B6

Amount of Each Disbursement this Period

500.00

B. Texans for Charles Schwertner

Mailing Address PO Box 2448

City Georgetown State TX Zip Code 78627-2448

Purpose of Disbursement
General 2014

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 25 / 2014

Transaction ID : B6E3A3ED7D3E44A8CBD4

Amount of Each Disbursement this Period

500.00

C. Committee to Elect Susan Syfert

Mailing Address 830 S 20th Ave

City Safford State AZ Zip Code 85546-3317

Purpose of Disbursement
Primary 2014

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2014

Transaction ID : B25A6A06694BD472385A

Amount of Each Disbursement this Period

500.00

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

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

1500.00

**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. Elect Michelle Udall

Mailing Address 3447 E Caballero St

City Mesa State AZ Zip Code 85213-7014

Purpose of Disbursement
Primary 2014

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /
08 / 04 / 2014

Transaction ID : BEE366A2A0A32464DBBC

Amount of Each Disbursement this Period

500.00

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

/ /

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

/ /

Amount of Each Disbursement this Period

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

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

500.00

23500.00