

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		99000.60
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	362516.55									
(c) Total Receipts (from Line 19)	20678.61	288927.54								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	383195.16	387928.14								
7. Total Disbursements (from Line 31)	4781.80	9514.78								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	378413.36	378413.36								
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

Write or Type Committee Name

MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	1	0

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)	15485.60	274933.47
(ii) Unitemized	5193.01	13994.07
(iii) TOTAL (add Lines 11(a)(i) and (ii)	20678.61	288927.54
(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)	20678.61	288927.54
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (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))	20678.61	288927.54
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	20678.61	288927.54

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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.....	781.80	3114.78
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	781.80	3114.78
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	4000.00	6400.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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	0.00
(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	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	4781.80	9514.78
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4781.80	9514.78

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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)	20678.61	288927.54
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	20678.61	288927.54
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	781.80	3114.78
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	781.80	3114.78

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 37
(check only one)

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

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)
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Francis Abdou

Mailing Address 3828 White Chapel Way

City Raleigh State NC Zip Code 27615

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

Name of Employer American Anesthesiology of NC Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 28 / 2010
Transaction ID: SA11AI.4871
 Amount of Each Receipt this Period 100.00
 Political Contribution

B.

Full Name (Last, First, Middle Initial)
Robert S. Alphin

Mailing Address 4028 John S. Raboteau West

City Raleigh State NC Zip Code 27612

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

Name of Employer American Anesthesiology of NC Occupation Anesthesiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 28 / 2010
Transaction ID: SA11AI.4873
 Amount of Each Receipt this Period 100.00
 Political Contribution

C.

Full Name (Last, First, Middle Initial)
Dominic Andreano

Mailing Address 1720 SW 131st Terrace

City Davie State FL Zip Code 33325

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

Name of Employer MEDNAX Services, Inc. Occupation VP, Deputy General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 616.00

Date of Receipt 05 / 14 / 2010
Transaction ID: SA11AI.4875
 Amount of Each Receipt this Period 249.34
 Political Contribution

SUBTOTAL of Receipts This Page (optional) ▶ 449.34

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 37
	<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)
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Dominic Andreano	Date of Receipt MM / DD / YYYY 05 / 28 / 2010
	Mailing Address 1720 SW 131st Terrace	Transaction ID: SA11AI.4874
	City State Zip Code Davie FL 33325	Amount of Each Receipt this Period 190.67
	FEC ID number of contributing federal political committee. C	Political Contribution
	Name of Employer MEDNAX Services, Inc. Occupation VP, Deputy General Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 806.67	

B.	Full Name (Last, First, Middle Initial) Jennifer Arriza	Date of Receipt MM / DD / YYYY 05 / 28 / 2010
	Mailing Address 2087 SW 176 Terrace	Transaction ID: SA11AI.4877
	City State Zip Code Ft. Lauderdale FL 33029	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	Political Contribution
	Name of Employer MEDNAX Services, Inc. Occupation Director of Applications Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00	

C.	Full Name (Last, First, Middle Initial) Michael Battista	Date of Receipt MM / DD / YYYY 05 / 14 / 2010
	Mailing Address 11 Orsinger Hill	Transaction ID: SA11AI.4883
	City State Zip Code San Antonio TX 78230	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Political Contribution
	Name of Employer Pediatrix Medical Services Inc Occupation Medical Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional)	465.67
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 / 37
	<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)
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Michael Battista	Date of Receipt MM / DD / YYYY 05 / 28 / 2010
	Mailing Address 11 Orsinger Hill	Transaction ID: SA11AI.4884
	City State Zip Code San Antonio TX 78230	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Political Contribution
Name of Employer Pediatrix Medical Services Inc	Occupation Medical Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2250.00	

B.	Full Name (Last, First, Middle Initial) Howard Brenker	Date of Receipt MM / DD / YYYY 05 / 28 / 2010
	Mailing Address 6566 NW 99th Lane	Transaction ID: SA11AI.4893
	City State Zip Code Parkland FL 33076	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Political Contribution
Name of Employer Pediatrix Medical Group of FL	Occupation Medical Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

C.	Full Name (Last, First, Middle Initial) Robert Bryant	Date of Receipt MM / DD / YYYY 05 / 28 / 2010
	Mailing Address 12717 W. Sunrise Blvd.	Transaction ID: SA11AI.4896
	City State Zip Code Sunrise FL 33323	Amount of Each Receipt this Period 416.66
	FEC ID number of contributing federal political committee. C	Political Contribution
Name of Employer MEDNAX Services, Inc.	Occupation SVP and CIO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2083.30	

SUBTOTAL of Receipts This Page (optional)	916.66
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 / 37
(check only one)

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

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NAME OF COMMITTEE (In Full)
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Andrew Sean Campbell

Mailing Address 423 S. Westridge Circle

City State Zip Code
Anaheim CA 92807

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

Name of Employer: Pediatrix Medical Group, Inc.
Occupation: Regional Director, Patient Accounts

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 540.00

Date of Receipt: 05 / 14 / 2010
Transaction ID: SA11AI.4897
Amount of Each Receipt this Period: 60.00
Political Contribution

B.

Full Name (Last, First, Middle Initial)
Andrew Sean Campbell

Mailing Address 423 S. Westridge Circle

City State Zip Code
Anaheim CA 92807

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

Name of Employer: Pediatrix Medical Group, Inc.
Occupation: Regional Director, Patient Accounts

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 05 / 28 / 2010
Transaction ID: SA11AI.4898
Amount of Each Receipt this Period: 60.00
Political Contribution

C.

Full Name (Last, First, Middle Initial)
Kristin Campbell

Mailing Address 150 Wicked Wedge Way

City State Zip Code
Las Vegas NV 89148

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

Name of Employer: Pokroy Medical Group of NV
Occupation: Physician Relations Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 05 / 06 / 2010
Transaction ID: SA11AI.4900
Amount of Each Receipt this Period: 250.00
Political Contribution

SUBTOTAL of Receipts This Page (optional) ► **370.00**

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 10 / 37
(check only one)

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

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NAME OF COMMITTEE (In Full)
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial) Jose Colindres		Date of Receipt MM / DD / YYYY 05 / 28 / 2010
Mailing Address 16775 NW 20 Street		Transaction ID: SA11AI.4904
City Pembroke Pines	State FL	Zip Code 33028
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Pediatrix Medical Group of FL	Occupation Medical Director, NICU	Political Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	

B.

Full Name (Last, First, Middle Initial) Steven Collins		Date of Receipt MM / DD / YYYY 05 / 28 / 2010
Mailing Address 10468 Laurel Road		Transaction ID: SA11AI.4905
City Davie	State FL	Zip Code 33328
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer MEDNAX Services, Inc.	Occupation SVP - Business Development	Political Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

C.

Full Name (Last, First, Middle Initial) Frances 'Penny' Cox		Date of Receipt MM / DD / YYYY 05 / 14 / 2010
Mailing Address 6310 Oliver Loving Trail		Transaction ID: SA11AI.4907
City Austin	State TX	Zip Code 78749
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 49.35
Name of Employer Pediatrix Medical Group, Inc.	Occupation Regional Manager	Political Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 394.80	

SUBTOTAL of Receipts This Page (optional)	▶	799.35
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 / 37
	<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)
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Frances 'Penny' Cox		Date of Receipt
	Mailing Address 6310 Oliver Loving Trail		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 05 / 28 / 2010
	City	State	Zip Code
	Austin	TX	78749
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4908
Name of Employer Pediatrix Medical Group, Inc.		Occupation Regional Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 444.15	<input type="text"/> 49.35
Political Contribution			

B.	Full Name (Last, First, Middle Initial) Jorge DelToro		Date of Receipt
	Mailing Address 1059 Nautica Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 05 / 28 / 2010
	City	State	Zip Code
	Weston	FL	33327
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4916
Name of Employer Pediatrix Medical Group, Inc.		Occupation RVP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2083.35	<input type="text"/> 416.67
Political Contribution			

C.	Full Name (Last, First, Middle Initial) Matthew J. Devine		Date of Receipt
	Mailing Address 2902 Needham Court		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 05 / 14 / 2010
	City	State	Zip Code
	Delray Beach	FL	33445
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4917
Name of Employer MEDNAX Services, Inc.		Occupation VP, Business Development	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1874.97	<input type="text"/> 208.33
Political Contribution			

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 674.35
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 37
(check only one)

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

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NAME OF COMMITTEE (In Full)
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial) Matthew J. Devine		Date of Receipt MM / DD / YYYY 05 / 28 / 2010
Mailing Address 2902 Needham Court		Transaction ID: SA11AI.4918
City Delray Beach	State FL	Zip Code 33445
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 208.33
Name of Employer MEDNAX Services, Inc.	Occupation VP, Business Development	Political Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2083.30	

B.

Full Name (Last, First, Middle Initial) Mike Dwyer		Date of Receipt MM / DD / YYYY 05 / 28 / 2010
Mailing Address 421 Canterbury Way		Transaction ID: SA11AI.4924
City Jonesboro	State GA	Zip Code 30236
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 416.67
Name of Employer Pediatrix Medical Group of GA	Occupation Corporate Medical Director	Political Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2083.35	

C.

Full Name (Last, First, Middle Initial) Simon Frisch		Date of Receipt MM / DD / YYYY 05 / 14 / 2010
Mailing Address 3816 W. Hibiscus St.		Transaction ID: SA11AI.4931
City Weston	State FL	Zip Code 33332
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer MEDNAX Services, Inc.	Occupation Director, Business Development	Political Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional)	▶	725.00
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 / 37

(check only one)

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

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NAME OF COMMITTEE (In Full)
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Simon Frisch

Mailing Address 3816 W. Hibiscus St.

City State Zip Code
Weston FL 33332

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

Name of Employer Occupation
MEDNAX Services, Inc. Director, Business Development

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.4932

Amount of Each Receipt this Period

100.00

Political Contribution

B.

Full Name (Last, First, Middle Initial)
Scott Garrison

Mailing Address 5213 Acrs Lane

City State Zip Code
Raleigh NC 27613

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

Name of Employer Occupation
American Anesthesiology of NC Anesthesiologist

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.4933

Amount of Each Receipt this Period

100.00

Political Contribution

C.

Full Name (Last, First, Middle Initial)
Carrie Gill Murdoch

Mailing Address 8605 Batnemouth Dr.

City State Zip Code
Raleigh NC 27615

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

Name of Employer Occupation
American Anesthesiology of NC Anesthesiologist

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.4934

Amount of Each Receipt this Period

100.00

Political Contribution

SUBTOTAL of Receipts This Page (optional) ▶

300.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 37

(check only one)

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

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NAME OF COMMITTEE (In Full)
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Sam Grossman

Mailing Address 438 Forrest Park Circle

City State Zip Code
Franklin TN 37064

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

Name of Employer Occupation
MEDNAX Services, Inc. Dir. Government Relations

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 880.59

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 4 / 2 0 1 0

Transaction ID: SA11AI.4935

Amount of Each Receipt this Period

127.95

Political Contribution

B.

Full Name (Last, First, Middle Initial)
Sam Grossman

Mailing Address 438 Forrest Park Circle

City State Zip Code
Franklin TN 37064

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

Name of Employer Occupation
MEDNAX Services, Inc. Dir. Government Relations

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 978.43

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.4936

Amount of Each Receipt this Period

97.84

Political Contribution

C.

Full Name (Last, First, Middle Initial)
Peter Haney

Mailing Address 200 Chimney Rock Road

City State Zip Code
Houston TX 77024

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

Name of Employer Occupation
Pediatrix Medical Services Inc Neonatologist

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 416.65

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.4937

Amount of Each Receipt this Period

83.33

Political Contribution

SUBTOTAL of Receipts This Page (optional)

309.12

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 15 / 37
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Joseph Harlan
Mailing Address 2700 Kathwood Court

City State Zip Code
Florence SC 29501

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

Name of Employer Occupation
Pediatrix Medical Group of SC Medical Director

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1600.00

Date of Receipt
MM / DD / YYYY
05 / 28 / 2010

Transaction ID: SA11AI.4938

Amount of Each Receipt this Period
400.00

Political Contribution

B. Full Name (Last, First, Middle Initial)
William Hawk
Mailing Address 1542 SE 13th Street

City State Zip Code
Ft. Lauderdale FL 33316

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

Name of Employer Occupation
American Anesthesiology, Inc. SVP Operations

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 656.25

Date of Receipt
MM / DD / YYYY
05 / 14 / 2010

Transaction ID: SA11AI.4939

Amount of Each Receipt this Period
218.75

Political Contribution

C. Full Name (Last, First, Middle Initial)
William Hawk
Mailing Address 1542 SE 13th Street

City State Zip Code
Ft. Lauderdale FL 33316

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

Name of Employer Occupation
American Anesthesiology, Inc. SVP Operations

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 875.00

Date of Receipt
MM / DD / YYYY
05 / 28 / 2010

Transaction ID: SA11AI.4940

Amount of Each Receipt this Period
218.75

Political Contribution

SUBTOTAL of Receipts This Page (optional) ► **837.50**

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 16 / 37
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Steven Iskowitz

Mailing Address 12600 Classic Drive

City State Zip Code
Coral Springs FL 33071

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

Name of Employer: Pediatrix Medical Group of FL
Occupation: Cardiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt: 05 / 06 / 2010
Transaction ID: SA11AI.4945
 Amount of Each Receipt this Period: 1500.00
 Political Contribution

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

Mailing Address 55 Westelm Circle

City State Zip Code
San Antonio TX 78230

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

Name of Employer: Pediatrix Medical Services Inc
Occupation: Neonatologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1800.00

Date of Receipt: 05 / 14 / 2010
Transaction ID: SA11AI.4954
 Amount of Each Receipt this Period: 200.00
 Political Contribution

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

Mailing Address 55 Westelm Circle

City State Zip Code
San Antonio TX 78230

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

Name of Employer: Pediatrix Medical Services Inc
Occupation: Neonatologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: 05 / 28 / 2010
Transaction ID: SA11AI.4955
 Amount of Each Receipt this Period: 200.00
 Political Contribution

SUBTOTAL of Receipts This Page (optional) ► 1900.00

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 / 37
	<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)
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Peter Levine	Date of Receipt MM / DD / YYYY 05 / 28 / 2010
	Mailing Address 1192 Skylane Dr.	Transaction ID: SA11AI.4969
	City State Zip Code Weston FL 33327	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	Political Contribution
	Name of Employer MEDNAX Services, Inc. Occupation Sr. Corp. Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) Thomas Lewis	Date of Receipt MM / DD / YYYY 05 / 06 / 2010
	Mailing Address 1085 Woodruff Pltn Pky	Transaction ID: SA11AI.4971
	City State Zip Code Marietta GA 30067	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Political Contribution
	Name of Employer American Anesthesiology of GA Occupation Anesthesiologist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Beverly Gail Lim	Date of Receipt MM / DD / YYYY 05 / 28 / 2010
	Mailing Address 201 NE 4th Street	Transaction ID: SA11AI.4972
	City State Zip Code Boca Raton FL 33432	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. C	Political Contribution
	Name of Employer MEDNAX Services, Inc. Occupation VP Program Development Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1600.00	

SUBTOTAL of Receipts This Page (optional)	750.00
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 18 / 37

(check only one)

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

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NAME OF COMMITTEE (In Full)
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Lisa Lowery-Smith

Mailing Address 7821 Night Hawk Rd.

City State Zip Code
Chattanooga TN 37421

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

Name of Employer
Pediatrix Medical Group
of TN

Occupation
Medical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.01

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.4973

Amount of Each Receipt this Period

666.67

Political Contribution

B.

Full Name (Last, First, Middle Initial)
Gerald A. Maccioli

Mailing Address 3903 Laurel Manor Ct.

City State Zip Code
Raleigh NC 27612

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

Name of Employer
American Anesthesiology
of NC

Occupation
Director of Critical Care Medicine

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.4974

Amount of Each Receipt this Period

100.00

Political Contribution

C.

Full Name (Last, First, Middle Initial)
Bruce Manno

Mailing Address 1257 Ginger Circle

City State Zip Code
Weston FL 33326

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

Name of Employer
MEDNAX Services, Inc.

Occupation
Dir. Internal Audit

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
967.50

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 4 / 2 0 1 0

Transaction ID: SA11AI.4975

Amount of Each Receipt this Period

107.50

Political Contribution

SUBTOTAL of Receipts This Page (optional)

874.17

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 19 / 37
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Bruce Manno

Mailing Address 1257 Ginger Circle

City State Zip Code
Weston FL 33326

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

Name of Employer Occupation
MEDNAX Services, Inc. Dir. Internal Audit

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1075.00

Date of Receipt
MM / DD / YYYY
05 / 28 / 2010

Transaction ID: SA11AI.4976

Amount of Each Receipt this Period
107.50

Political Contribution

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

Mailing Address 4225 Mandavilla Way

City State Zip Code
Apex NC 27539

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

Name of Employer Occupation
American Anesthesiology of NC Director of Operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 297.70

Date of Receipt
MM / DD / YYYY
05 / 28 / 2010

Transaction ID: SA11AI.4979

Amount of Each Receipt this Period
148.85

Political Contribution

C. Full Name (Last, First, Middle Initial)
Eric W. Mason

Mailing Address 4313 Cedar Gate

City State Zip Code
Raleigh NC 27612

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

Name of Employer Occupation
American Anesthesiology of NC Anesthesiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
05 / 28 / 2010

Transaction ID: SA11AI.4980

Amount of Each Receipt this Period
100.00

Political Contribution

SUBTOTAL of Receipts This Page (optional) ► **356.35**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 37
(check only one)

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

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NAME OF COMMITTEE (In Full)
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Stefan Maxwell

Mailing Address 5 Chatham Rd.

City Charleston State WV Zip Code 25304

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

Name of Employer: Pediatrix Medical Group Occupation: Medical Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 416.67

Date of Receipt: 05 / 28 / 2010

Transaction ID: SA11AI.4982

Amount of Each Receipt this Period: 416.67

Political Contribution

B.

Full Name (Last, First, Middle Initial)
Jorge McCormack

Mailing Address 7 Brightwater Circle

City St. Petersburg State FL Zip Code 33704

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

Name of Employer: Pediatrix Medical Group of FL Occupation: Medical Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 05 / 28 / 2010

Transaction ID: SA11AI.4983

Amount of Each Receipt this Period: 100.00

Political Contribution

C.

Full Name (Last, First, Middle Initial)
Bahman Mehdizadeh

Mailing Address 25470 Prado de las Bellotas

City Calabasas State CA Zip Code 91302

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

Name of Employer: Pediatrix Medical Group of CA Occupation: Neonatologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 05 / 28 / 2010

Transaction ID: SA11AI.4986

Amount of Each Receipt this Period: 100.00

Political Contribution

SUBTOTAL of Receipts This Page (optional) ► **616.67**

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 21 / 37
(check only one)

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

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NAME OF COMMITTEE (In Full)
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Khawar Mohsini

Mailing Address 9 Hunters Ridge Dr.

City State Zip Code
Saginaw MI 48609

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

Name of Employer Occupation
Pediatrix Medical Group of MI Medical Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt
MM / DD / YYYY
05 / 28 / 2010

Transaction ID: SA11AI.4992

Amount of Each Receipt this Period
200.00

Political Contribution

B.

Full Name (Last, First, Middle Initial)
Melissa Montague

Mailing Address 6525 Monument Avenue

City State Zip Code
Richmond VA 23226

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

Name of Employer Occupation
Pediatrix Medical Group, Inc. Director of Operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 855.00

Date of Receipt
MM / DD / YYYY
05 / 14 / 2010

Transaction ID: SA11AI.4993

Amount of Each Receipt this Period
95.00

Political Contribution

C.

Full Name (Last, First, Middle Initial)
Melissa Montague

Mailing Address 6525 Monument Avenue

City State Zip Code
Richmond VA 23226

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

Name of Employer Occupation
Pediatrix Medical Group, Inc. Director of Operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 950.00

Date of Receipt
MM / DD / YYYY
05 / 28 / 2010

Transaction ID: SA11AI.4994

Amount of Each Receipt this Period
95.00

Political Contribution

SUBTOTAL of Receipts This Page (optional) ► **390.00**

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 22 / 37
(check only one)

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

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NAME OF COMMITTEE (In Full)
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Olufemi Okanlami

Mailing Address 51310 Shamrock Hills Drive

City State Zip Code
Granger IN 46530

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

Name of Employer: Pediatrix Medical Group of IN
Occupation: Medical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt: 05 / 28 / 2010
Transaction ID: SA11AI.5002
Amount of Each Receipt this Period: 250.00
Political Contribution

B.

Full Name (Last, First, Middle Initial)
Alan Oliver

Mailing Address 130 Orion Circle

City State Zip Code
Jupiter FL 33477

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

Name of Employer: Pediatrix Medical Group, Inc.
Occupation: Regional President-Atlantic Region

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt: 05 / 28 / 2010
Transaction ID: SA11AI.5003
Amount of Each Receipt this Period: 250.00
Political Contribution

C.

Full Name (Last, First, Middle Initial)
Hanoch Patt

Mailing Address 3005 Scenic Drive

City State Zip Code
Austin TX 78703

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

Name of Employer: Pediatrix Medical Services Inc
Occupation: Pediatric Cardiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1150.00

Date of Receipt: 05 / 28 / 2010
Transaction ID: SA11AI.5006
Amount of Each Receipt this Period: 150.00
Political Contribution

SUBTOTAL of Receipts This Page (optional) ▶ **650.00**

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 23 / 37
(check only one)

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

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NAME OF COMMITTEE (In Full)
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Darren Patz

Mailing Address 46 NE 100th Street

City State Zip Code
Miami Shores FL 33138

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

Name of Employer MEDNAX Services, Inc. Occupation VP, Government Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1460.93

Date of Receipt
MM / DD / YYYY
05 / 14 / 2010

Transaction ID: SA11AI.5009

Amount of Each Receipt this Period
166.67

Political Contribution

B.

Full Name (Last, First, Middle Initial)
Darren Patz

Mailing Address 46 NE 100th Street

City State Zip Code
Miami Shores FL 33138

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

Name of Employer MEDNAX Services, Inc. Occupation VP, Government Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1627.60

Date of Receipt
MM / DD / YYYY
05 / 28 / 2010

Transaction ID: SA11AI.5011

Amount of Each Receipt this Period
166.67

Political Contribution

C.

Full Name (Last, First, Middle Initial)
Jeffrey R. Poe

Mailing Address 1035 So. Cook Street

City State Zip Code
Denver CO 80709

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

Name of Employer Pediatrix Medical Group, Inc. Occupation Director of Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
05 / 14 / 2010

Transaction ID: SA11AI.5014

Amount of Each Receipt this Period
50.00

Political Contribution

SUBTOTAL of Receipts This Page (optional) ► **383.34**

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

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

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

FOR LINE NUMBER: PAGE 24 / 37
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Jeffrey R. Poe

Mailing Address 1035 So. Cook Street

City State Zip Code
Denver CO 80709

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

Name of Employer Occupation
Pediatrix Medical Group, Inc. Director of Operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
05 / 28 / 2010

Transaction ID: SA11AI.5015

Amount of Each Receipt this Period
50.00

Political Contribution

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

Mailing Address 1954 S. Parfet Drive

City State Zip Code
Lakewood CO 80227

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

Name of Employer Occupation
MEDNAX Services, Inc. Dir Compliance

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 932.85

Date of Receipt
MM / DD / YYYY
05 / 14 / 2010

Transaction ID: SA11AI.5016

Amount of Each Receipt this Period
103.65

Political Contribution

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

Mailing Address 1954 S. Parfet Drive

City State Zip Code
Lakewood CO 80227

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

Name of Employer Occupation
MEDNAX Services, Inc. Dir Compliance

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1036.50

Date of Receipt
MM / DD / YYYY
05 / 28 / 2010

Transaction ID: SA11AI.5017

Amount of Each Receipt this Period
103.65

Political Contribution

SUBTOTAL of Receipts This Page (optional) ► **257.30**

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: PAGE 25 / 37
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Richard Powers

Mailing Address 110 Gemini Ct.

City State Zip Code
Los Gatos CA 95032

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

Name of Employer: Pediatrix Medical Group of CA
Occupation: Medical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2900.00

Date of Receipt: 05 / 28 / 2010
Transaction ID: SA11AI.5018
 Amount of Each Receipt this Period: 100.00
 Political Contribution

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

Mailing Address 3144 Legends Circle

City State Zip Code
Lakeland FL 33803

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

Name of Employer: Pediatrix Medical Group of FL
Occupation: Corp. Med. Director, NICU

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 05 / 28 / 2010
Transaction ID: SA11AI.5019
 Amount of Each Receipt this Period: 50.00
 Political Contribution

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

Mailing Address 8500 54th Avenue NE

City State Zip Code
Seattle WA 98115

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

Name of Employer: Pediatrix Medical Group, Inc.
Occupation: Director of Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2083.30

Date of Receipt: 05 / 28 / 2010
Transaction ID: SA11AI.5020
 Amount of Each Receipt this Period: 416.66
 Political Contribution

SUBTOTAL of Receipts This Page (optional) ► 566.66

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

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

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

FOR LINE NUMBER: PAGE 26 / 37
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Carey Purre
Mailing Address 3603 NW 23 Terrace
City Boca Raton State FL Zip Code 33431
FEC ID number of contributing federal political committee. **C**

Date of Receipt
MM / DD / YYYY
05 / 14 / 2010
Transaction ID: SA11AI.5021
Amount of Each Receipt this Period
60.00
Political Contribution

Name of Employer MEDNAX Services, Inc. Occupation Director Recruiting
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 540.00

B. Full Name (Last, First, Middle Initial)
Carey Purre
Mailing Address 3603 NW 23 Terrace
City Boca Raton State FL Zip Code 33431
FEC ID number of contributing federal political committee. **C**

Date of Receipt
MM / DD / YYYY
05 / 28 / 2010
Transaction ID: SA11AI.5022
Amount of Each Receipt this Period
60.00
Political Contribution

Name of Employer MEDNAX Services, Inc. Occupation Director Recruiting
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

C. Full Name (Last, First, Middle Initial)
Brian Rosenberg
Mailing Address 9842 W. McNab Road
City Tamarac State FL Zip Code 33321
FEC ID number of contributing federal political committee. **C**

Date of Receipt
MM / DD / YYYY
05 / 14 / 2010
Transaction ID: SA11AI.5028
Amount of Each Receipt this Period
30.00
Political Contribution

Name of Employer MEDNAX Services, Inc. Occupation Director, Training & Development
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 270.00

SUBTOTAL of Receipts This Page (optional) ► 150.00
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 27 / 37
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Brian Rosenberg

Mailing Address 9842 W. McNab Road

City State Zip Code
Tamarac FL 33321

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

Name of Employer Occupation
MEDNAX Services, Inc. Director, Training & Development

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
05 / 28 / 2010

Transaction ID: SA11AI.5029

Amount of Each Receipt this Period
30.00

Political Contribution

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

Mailing Address 406 Wheaton Street

City State Zip Code
Savannah GA 31405

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

Name of Employer Occupation
Magella Med. Assoc. of GA Medical Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt
MM / DD / YYYY
05 / 14 / 2010

Transaction ID: SA11AI.5033

Amount of Each Receipt this Period
100.00

Political Contribution

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

Mailing Address 406 Wheaton Street

City State Zip Code
Savannah GA 31405

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

Name of Employer Occupation
Magella Med. Assoc. of GA Medical Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
05 / 28 / 2010

Transaction ID: SA11AI.5034

Amount of Each Receipt this Period
100.00

Political Contribution

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: PAGE 28 / 37
(check only one)

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

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NAME OF COMMITTEE (In Full)
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Idelsi Sanchez

Mailing Address 3941 SW 186 Way

City State Zip Code
Miramar FL 33029

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

Name of Employer MEDNAX Services, Inc. Occupation Associate General Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 254.95

Date of Receipt
MM / DD / YYYY
05 / 14 / 2010

Transaction ID: SA11AI.5035

Amount of Each Receipt this Period
103.19

Political Contribution

B.

Full Name (Last, First, Middle Initial)
Idelsi Sanchez

Mailing Address 3941 SW 186 Way

City State Zip Code
Miramar FL 33029

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

Name of Employer MEDNAX Services, Inc. Occupation Associate General Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 333.86

Date of Receipt
MM / DD / YYYY
05 / 28 / 2010

Transaction ID: SA11AI.5036

Amount of Each Receipt this Period
78.91

Political Contribution

C.

Full Name (Last, First, Middle Initial)
Jonathan E. Schwartz

Mailing Address 3740 Saltmeadow Ct. South

City State Zip Code
Jacksonville FL 32224

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

Name of Employer Pediatrix Medical Group of FL Occupation Medical Director, NICU

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
05 / 28 / 2010

Transaction ID: SA11AI.5039

Amount of Each Receipt this Period
60.00

Political Contribution

SUBTOTAL of Receipts This Page (optional) ► **242.10**

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 29 / 37

(check only one)

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

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NAME OF COMMITTEE (In Full)
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Cecil Sharp

Mailing Address 576 Medinah Dr.

City State Zip Code
Augusta GA 30907

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

Name of Employer Occupation
Pediatrix Medical Group Corp. Med. Director, NICU
of GA

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 225.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.5040

Amount of Each Receipt this Period

45.00

Political Contribution

B.

Full Name (Last, First, Middle Initial)
Richard Simon

Mailing Address 2111 34th Street

City State Zip Code
West Palm Beach FL 33407

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

Name of Employer Occupation
Pediatrix Medical Group, Inc. Director of Operations

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 450.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 4 / 2 0 1 0

Transaction ID: SA11AI.5041

Amount of Each Receipt this Period

50.00

Political Contribution

C.

Full Name (Last, First, Middle Initial)
Richard Simon

Mailing Address 2111 34th Street

City State Zip Code
West Palm Beach FL 33407

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

Name of Employer Occupation
Pediatrix Medical Group, Inc. Director of Operations

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.5042

Amount of Each Receipt this Period

50.00

Political Contribution

SUBTOTAL of Receipts This Page (optional)

145.00

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 30 / 37
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Brenda Sommer
Mailing Address 4871 Acorn Drive
City Boca Raton State FL Zip Code 33487
FEC ID number of contributing federal political committee. **C**

Date of Receipt: 05 / 14 / 2010
Transaction ID: SA11AI.5045
Amount of Each Receipt this Period: 56.54
Political Contribution

Name of Employer: Pediatrix Medical Group, Inc.
Occupation: Clin Mgr, Chart Abstractor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date: 508.86

B. Full Name (Last, First, Middle Initial)
Brenda Sommer
Mailing Address 4871 Acorn Drive
City Boca Raton State FL Zip Code 33487
FEC ID number of contributing federal political committee. **C**

Date of Receipt: 05 / 28 / 2010
Transaction ID: SA11AI.5046
Amount of Each Receipt this Period: 56.54
Political Contribution

Name of Employer: Pediatrix Medical Group, Inc.
Occupation: Clin Mgr, Chart Abstractor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date: 565.40

C. Full Name (Last, First, Middle Initial)
Teresa Spence
Mailing Address 148 N. Cleveland Street
City Orange State CA Zip Code 92866
FEC ID number of contributing federal political committee. **C**

Date of Receipt: 05 / 14 / 2010
Transaction ID: SA11AI.5051
Amount of Each Receipt this Period: 94.47
Political Contribution

Name of Employer: Pediatrix Medical Group, Inc.
Occupation: Reg Mgr Man Care Cont-15
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date: 850.23

SUBTOTAL of Receipts This Page (optional) ► 207.55
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 31 / 37
(check only one)

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

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NAME OF COMMITTEE (In Full)
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial) Teresa Spence		Date of Receipt MM / DD / YYYY 05 / 28 / 2010
Mailing Address 148 N. Cleveland Street		Transaction ID: SA11AI.5052
City Orange	State CA	Zip Code 92866
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 94.47
Name of Employer Pediatrix Medical Group, Inc.	Occupation Reg Mgr Man Care Cont-15	Political Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 944.70	

B.

Full Name (Last, First, Middle Initial) Margaret Steinbach		Date of Receipt MM / DD / YYYY 05 / 28 / 2010
Mailing Address 272 NW 97th Avenue		Transaction ID: SA11AI.5053
City Plantation	State FL	Zip Code 33324
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
Name of Employer MEDNAX Services, Inc.	Occupation VP Advance Practitioners	Political Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1600.00	

C.

Full Name (Last, First, Middle Initial) Paul Stern		Date of Receipt MM / DD / YYYY 05 / 14 / 2010
Mailing Address 275 NE Olive Way		Transaction ID: SA11AI.5056
City Boca Raton	State FL	Zip Code 33432
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer MEDNAX Services, Inc.	Occupation Director Technical Services	Political Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

SUBTOTAL of Receipts This Page (optional)	▶	644.47
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 37		
	<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

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NAME OF COMMITTEE (In Full)
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Paul Stern		Date of Receipt
	Mailing Address 275 NE Olive Way		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 05 / 28 / 2010
	City	State	Zip Code
	Boca Raton	FL	33432
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5057
Name of Employer MEDNAX Services, Inc.		Occupation Director Technical Services	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1350.00	<input type="text"/> 150.00
Political Contribution			

B.	Full Name (Last, First, Middle Initial) Sandy Tarant		Date of Receipt
	Mailing Address 2710 Aylesford Dr.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 05 / 28 / 2010
	City	State	Zip Code
	Midlothian	VA	23112
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5063
Name of Employer Pediatrix Medical Group, PC		Occupation Corporate Medical Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2000.00	<input type="text"/> 400.00
Political Contribution			

C.	Full Name (Last, First, Middle Initial) B. Keith Taylor		Date of Receipt
	Mailing Address 108 Linden Ave.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 05 / 28 / 2010
	City	State	Zip Code
	Lynchburg	VA	24503
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5064
Name of Employer Pediatrix Medical Group, PC		Occupation Medical Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	<input type="text"/> 100.00
Political Contribution			

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 650.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 33 / 37
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Susan Townsend
 Mailing Address 5450 S. Autumn Ct.
 City Greenwood Village State CO Zip Code 80111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Pediatrix Medical Group of CO Occupation: Medical Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1125.00
 Date of Receipt: 05 / 28 / 2010
Transaction ID: SA11AI.5069
 Amount of Each Receipt this Period: 125.00
 Political Contribution

B. Full Name (Last, First, Middle Initial)
Robert Treadway, Jr.
 Mailing Address 3100 Briar Stream Run
 City Raleigh State NC Zip Code 27612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: American Anesthesiology of NC Occupation: Anesthesiology
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00
 Date of Receipt: 05 / 28 / 2010
Transaction ID: SA11AI.5070
 Amount of Each Receipt this Period: 100.00
 Political Contribution

C. Full Name (Last, First, Middle Initial)
Agustin Trevino
 Mailing Address 830 Canary Walk
 City 830 Delray Beach State FL Zip Code 33483
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: MEDNAX Services Inc Occupation: Dir. Human Resources
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00
 Date of Receipt: 05 / 14 / 2010
Transaction ID: SA11AI.5071
 Amount of Each Receipt this Period: 40.00
 Political Contribution

SUBTOTAL of Receipts This Page (optional) ► 265.00
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 34 / 37
(check only one)

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

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NAME OF COMMITTEE (In Full)
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Agustin Trevino

Mailing Address 830 Canary Walk

City State Zip Code
830 Delray Beach FL 33483

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

Name of Employer Occupation
MEDNAX Services Inc Dir. Human Resources

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
05 / 28 / 2010

Transaction ID: SA11AI.5072

Amount of Each Receipt this Period
40.00

Political Contribution

B.

Full Name (Last, First, Middle Initial)
Wendy Troyer

Mailing Address 1274 Redfield Rd

City State Zip Code
Atlanta GA 30338

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

Name of Employer Occupation
Neonatology Assoc. of Atlanta Medical Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
MM / DD / YYYY
05 / 28 / 2010

Transaction ID: SA11AI.5075

Amount of Each Receipt this Period
200.00

Political Contribution

C.

Full Name (Last, First, Middle Initial)
Scott Wiles

Mailing Address 734 Marble Way

City State Zip Code
Boca Raton FL 33432

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

Name of Employer Occupation
MEDNAX Services, Inc. Director of Tax

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
05 / 14 / 2010

Transaction ID: SA11AI.5078

Amount of Each Receipt this Period
60.00

Political Contribution

SUBTOTAL of Receipts This Page (optional) ► **300.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 35 / 37	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 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)
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial) Scott Wiles		Date of Receipt																					
Mailing Address 734 Marble Way		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	8		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		2	8		2	0	1	0														
City	State	Zip Code	Transaction ID: SA11AI.5079																				
Boca Raton	FL	33432	Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.	C		60.00																				
Name of Employer MEDNAX Services, Inc.	Occupation Director of Tax		Political Contribution																				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼																						
	360.00																						

SUBTOTAL of Receipts This Page (optional)	▶	60.00
TOTAL This Period (last page this line number only)	▶	15485.60

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

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

FOR LINE NUMBER: (check only one)

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<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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)
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Bank of America Mailing Address 600 Peachtree Street City Atlanta State GA Zip Code 30308 Purpose of Disbursement Bank Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.5103 Date of Disbursement 05 / 10 / 2010	Amount of Each Disbursement this Period 775.50
B.	Full Name (Last, First, Middle Initial) Bank of America Mailing Address 600 Peachtree Street City Atlanta State GA Zip Code 30308 Purpose of Disbursement Bank Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.5104 Date of Disbursement 05 / 24 / 2010	Amount of Each Disbursement this Period 6.30

SUBTOTAL of Disbursements This Page (optional)	781.80
TOTAL This Period (last page this line number only)	781.80

**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)
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) FRIENDS OF JOHN MCCAIN INC	Transaction ID: SB23.5102
	Mailing Address PO BOX 16664	Date of Disbursement 05 / 12 / 2010
	City ARLINGTON State VA Zip Code 22215	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Political Contribution	Category/ Type
	Candidate Name JOHN S MCCAIN	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 00	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) SUE MYRICK FOR CONGRESS	Transaction ID: SB23.5094
	Mailing Address P.O. Box 37091	Date of Disbursement 05 / 11 / 2010
	City Charlotte State NC Zip Code 28237	Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement Political Contribution	Category/ Type
	Candidate Name SUE MYRICK FOR CONGRESS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 09	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) TEXANS FOR SENATOR JOHN CORNYN INC	Transaction ID: SB23.5097
	Mailing Address PO BOX 13026 SUITE 180	Date of Disbursement 05 / 11 / 2010
	City AUSTIN State TX Zip Code 78711	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Political Contribution	Category/ Type
	Candidate Name JOHN CORNYN	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 00	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	4000.00
TOTAL This Period (last page this line number only)	4000.00