LAW OFFICES OF
NIELSEN, MERKSAMER,
FARRINELLO, MUELLER & NAYLOR, LLP
A LIMITED LIABILITY PARTNERSHIP INCLUDING A PROFESSIONAL CORPORATION

SACRAMENTO
770 L STREET, SUITE 800
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SAN FRANCISCO
TWO EMBARCADERO CENTER, SUITE 200
SAN FRANCISCO, CALIFORNIA 94111
TELEPHONE (415) 389-6800
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RECEIVED
FEC MAIL ROOM
2002 JAN -8 P 12:49

December 17, 2001

22-03-738-1851

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

Dear Filing Officer:

Enclosed herewith please find the original signed copy of the following for:

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

for the period 10/01/96 Through 10/16/96.

- [ ] Form 1
- [x] Form 3X (Amendment)
- [x] **Report to the Federal Election Commission via Certified Mail**
- [x] Report(s) to state filing official(s) sent via Certified Mail
- [ ] Other: _____

Please endorse this transmittal letter as acknowledgment of receipt of the enclosed report and return it in the stamped envelope provided.

cc: California
Florida
Louisiana
Missouri
Texas

#7125.01

REPORT OF RECEIPTS AND DISBURSEMENTS

RECEIVED
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For Other Than An Authorized Committee
(Summary Page)

1. NAME OF COMMITTEE (in full)
TENET HEALTHCARE CORPORATION PAC

ADDRESS (number and street) ☐ Check if different than previously reported
3620 STATE ST.

CITY, STATE and ZIP CODE
SANTA BARBARA, CA 93105

2. FEC IDENTIFICATION NUMBER
C00119354

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

4. TYPE OF REPORT

(a) ☐ April 15 Quarterly Report
☐ July 15 Quarterly Report
☐ October 15 Quarterly Report
☐ January 31 Year End Report
☐ July 31 Mid Year Report (Non-election Year Only)
☐ Termination Report

Monthly Report Due On:
☐ February 20 ☐ June 20 ☐ October 20
☐ March 20 ☐ July 20 ☐ November 20
☐ April 20 ☐ August 20 ☐ December 20
☐ May 20 ☐ September 20 ☐ January 31

☒ 12-Day Pre-Election Report for the General (Type of Election) election on 11/05/96 in the State of CA

☐ 30-Day Post-Election Report following the General Election on _____ in the State of _____

(b) Is this Report an Amendment? ☒ YES ☐ NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 10/01/1996 through 10/17/1996		$ 88318.03
6. (a) Cash on Hand January 1, 1996		
(b) Cash on Hand at Beginning of Reporting Period	$ 97016.81	
(c) Total Receipts (from Line 19)	$ 8325.02	$ 88423.80
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 105341.83	$ 177141.83
7. Total Disbursements (from Line 30)	$ 8500.00	$ 80300.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 96841.83	$ 96841.83
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	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer JASON D. KAUME, ASSISTANT TREASURER

Signature of Treasurer
-2- D 2-

Date 11/ 30 /01

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 437g.

FEC FORM 3X
(revised 9/93)

FEBAN12\PDF

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X

(revised 1/1/97)

NAME OF COMMITTEE: TENET HEALTHCARE CORPORATION PAC

REPORT COVERING PERIOD FROM 10/01/1996 TO: 10/15/1996

	COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individuals/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	5356.58	64193.20	11(a)(i)
ii. Unitemized	2968.44	24230.60	11(a)(ii)
iii. Total (add i and ii) >	8325.02	88423.80	11(a)(iii)
b. Political Party Committees	0.00	0.00	11(b)
c. Other Political Committees (such as PACs)	0.00	0.00	11(c)
d. Total Contributions (add a iii, b and c) >	8325.02	88423.80	11(d)
12. Transfers From Affiliated/Other Party Committees	0.00	0.00	12
13. All Loans Received	0.00	0.00	13
14. Loan Repayments Received	0.00	0.00	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00	16
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00	17
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	8325.02	88423.80	19
20. Total Federal Receipts (subtract line 18 from line 19) >	8325.02	88423.80	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal (from Schedule H4)			
i. Federal Share	0.00	0.00	21(a)(i)
ii. Non-Federal Share	0.00	0.00	21(a)(ii)
b. Other Federal Operating Expenditures	0.00	0.00	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >	0.00	0.00	21(c)
22. Transfers to Affiliated/Other Party Committees	0.00	0.00	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	8000.00	57650.00	23
24. Independent Expenditures (use Schedule E)	0.00	0.00	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00	25
26. Loan Repayments Made	0.00	0.00	26
27. Loans Made	0.00	0.00	27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees	0.00	0.00	28(a)
b. Political Party Committees	0.00	0.00	28(b)
c. Other Political Committees (such as PACs)	0.00	0.00	28(c)
d. Total Contribution Refunds (add a, b and c) >	0.00	0.00	28(d)
29. Other Disbursements	500.00	22650.00	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	8500.00	80300.00	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	8500.00	80300.00	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	8325.02	88423.80	32
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	8325.02	88423.80	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	0.00	0.00	35
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00	36
37. Net Operating Expenditures (subtract line 36 from 35) >	0.00	0.00	37

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 5

FOR LINE NUMBER 11(a)(1)

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 PAC

Name	Employer	Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Full Name, Mailing Address and ZIP Code Philip A. Cohen, 22253 Parched Drive, Calabasas, CA 91302	Garfield Medical Center	Chief Executive Officer	10/10/1996	$500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 500.00			
B. Full Name, Mailing Address and ZIP Code Michael Focht, Sr., P.O. Box 703, Santa Ynez, CA 93460-0703	Tenet Healthcare Corporation	President	10/10/1996	$1,000.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 4039.50			
C. Full Name, Mailing Address and ZIP Code Brian A. Bacon, 216 Fairways Boulevard, N., Tullahoma, TN 37388	Norton Regional Medical Ctr.	Director	10/11/1996	$500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 500.00			
D. Full Name, Mailing Address and ZIP Code Steven Altmiller, 6211 Edenbrook Drive, Sugar Land, TX 77479	Twelve Oaks Hospital	Chief Executive Officer	10/12/1996	$20.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 500.00			
E. Full Name, Mailing Address and ZIP Code John Bartlett, 230 Turtle Creek Circle, Oldsmar, FL 34677	Palms of Pasadena Hospital	Chief Executive Officer	10/12/1996	$5.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 635.00			
F. Full Name, Mailing Address and ZIP Code John Beelle, 10530 Hamlin Boulevard, Largo, FL 34644	Tenet Healthcare Corporation	Director	10/12/1996	$10.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 270.00			
F. Full Name, Mailing Address and ZIP Code Janelle Blanco, 1111 Atlee Drive, La Canada, CA 91011	Tenet Healthcare Corporation	Government Relations	10/12/1996	$10.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 270.00			

SUBTOTAL of Receipts This Page (optional) 4045.00

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

www.notfile.net

22.03.738.1954

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 2 OF 5

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full)

TENET HEALTHCARE CORPORATION PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Full Name, Mailing Address and ZIP Code Harold E. (Hal) Chilton 1012 Vista Grande Paso Robles, CA 93446 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Sierra Vista Regional Med.Ctr. Occupation: Chief Executive Officer Aggregate Year-to-Date $ 480.00	10/12/1996	$40.00
B. Full Name, Mailing Address and ZIP Code Stephen Diez 28020 Heston Lane Saugus, CA 91350 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Tenet Healthcare Corporation Occupation: Director Aggregate Year-to-Date $ 405.00	10/12/1996	$15.00
C. Full Name, Mailing Address and ZIP Code Steve Dominguez 17800 Prairie Northridge, CA 91325 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Tenet Healthcare Corporation Occupation: Senior Vice President Aggregate Year-to-Date $ 650.00	10/12/1996	$25.00
D. Full Name, Mailing Address and ZIP Code Michele Earnhart 6 Saint Robert Dana Point, CA 92629 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Tenet Healthcare Corporation Occupation: Director Aggregate Year-to-Date $ 405.00	10/12/1996	$15.00
E. Full Name, Mailing Address and ZIP Code Ed Evangelista 17095 Escalon Drive Encino, CA 91436 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Tenet Healthcare Corporation Occupation: Reimbursement Specialist Aggregate Year-to-Date $ 243.00	10/12/1996	$9.00
F. Full Name, Mailing Address and ZIP Code Michael Fecht, Sr. P.O. Box 703 Santa Ynez, CA 93460-0703 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Tenet Healthcare Corporation Occupation: President Aggregate Year-to-Date $ 4039.50	10/12/1996	$38.50
F. Full Name, Mailing Address and ZIP Code Truman Gates 21130 Ambric Knolls Road Saratoga, CA 95070 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Desert Regional Medical Center Occupation: Chief Executive Officer Aggregate Year-to-Date $ 300.00	10/12/1996	$20.00

SUBTOTAL of Receipts This Page (optional) 162.50

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

www.pdfile.net

22.03.738.1955

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 5

FOR LINE NUMBER 31(a)(i)

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Richard Gold 7609 North Cypresshead Drive Parkland, FL 33067 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: West Boca Medical Center Occupation: Chief Executive Officer Aggregate Year-to-Date $ 300.00	10/12/1996	$100.00
B. Lee Quinn 707 Claymoor Odessa, TX 79764 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Odessa Regional Hospital Occupation: Chief Executive Officer Aggregate Year-to-Date $ 723.06	10/12/1996	$100.00
C. Gary Heinrich 11339 Gladwin Street Los Angeles, CA 90049 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Tenet Healthcare Corporation Occupation: Vice President, Human Resources Aggregate Year-to-Date $ 249.21	10/12/1996	$9.23
D. Hank Irick, Jr. 1649 Stearns Drive Los Angeles, CA 90035 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Tenet Healthcare Corporation Occupation: Assistant Vice President Aggregate Year-to-Date $ 270.00	10/12/1996	$10.00
E. David Hume 16477 Santa Blanca Hacienda Heights, CA 91745 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Garden Grove Hospital Occupation: Vice President, Development Aggregate Year-to-Date $ 2100.00	10/12/1996	$100.00
F. Judith Novak 3207 Merrick Houston, TX 77025 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Tenet Healthcare Corporation Occupation: Vice President Aggregate Year-to-Date $ 463.83	10/12/1996	$20.00
F. Patrick Petre 22 Elderberry Rancho Sta Margarita, CA 92688 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: San Dimas Community Hospital Occupation: Chief Operating Officer Aggregate Year-to-Date $ 270.00	10/12/1996	$10.00

SUBTOTAL of Receipts This Page (optional) 349.23

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

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23.03.29 1:38PM

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 4 OF 5

FOR LINE NUMBER I1(a)(i)

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Full Name, Mailing Address and ZIP Code Michael Rumble 78-255 Monte Sereno Circle Indian Wells, CA 92210 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Centinela Hospital Med. Ctr. Occupation: Chief Executive Officer Aggregate Year-to-Date $ 380.00	10/12/1996	$20.00
B. Full Name, Mailing Address and ZIP Code Norma Resnedar 25217 Markel Santa Clarita, CA 91321 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Tenet Healthcare Corporation Occupation: Director Aggregate Year-to-Date $ 675.00	10/12/1996	$25.00
C. Full Name, Mailing Address and ZIP Code Jackie Rissotto 8298 Maonix Drive Los Angeles, CA 90046 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Tenet Healthcare Corporation Occupation: Vice President, Emp. Benefits Aggregate Year-to-Date $ 270.00	10/12/1996	$10.00
D. Full Name, Mailing Address and ZIP Code Richard Robinson 617 Toper Lane Ripon, CA 95366 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Doctors Hospital of Manteca Occupation: Chief Executive Officer Aggregate Year-to-Date $ 300.00	10/12/1996	$20.00
E. Full Name, Mailing Address and ZIP Code Richard Royer 404 Keene Street Columbia, MO 65201 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Columbia Regional Hospital Occupation: Chief Executive Officer Aggregate Year-to-Date $ 600.00	10/12/1996	$25.00
F. Full Name, Mailing Address and ZIP Code Paul Russell 4244 Avenida DeLa Encinal Malibu, CA 90265 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Tenet Healthcare Corporation Occupation: Senior Vice President Aggregate Year-to-Date $ 675.00	10/12/1996	$25.00
F. Full Name, Mailing Address and ZIP Code Arnold H. Schaffer 179 Annandale Road Pasadena, CA 91105 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Encino-Tarzana Reg. Med. Ctr. Occupation: Chief Executive Officer Aggregate Year-to-Date $ 500.00	10/12/1996	$20.00

SUBTOTAL of Receipts This Page (optional)	145.00
TOTAL This Period (last page this line number only)	

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22.03.738.1857

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 5 OF 5

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Full Name, Mailing Address and ZIP Code Don S. Steigman 837 N.W. 110th Avenue Coral Springs, FL 33071 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Tenet Healthcare Corporation Occupation: Senior Vice President Aggregate Year-to-Date $ 830.85	10/12/1996	$75.00
B. Full Name, Mailing Address and ZIP Code Diana Takvas 2121 Beloit Avenue #212 Los Angeles, CA 90025 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Tenet Healthcare Corporation Occupation: Senior Director Aggregate Year-to-Date $ 270.00	10/12/1996	$10.00
C. Full Name, Mailing Address and ZIP Code Donald Thayer 901 Bristol Court Southlake, TX 76092 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Tenet Healthcare Corporation Occupation: Vice President, A & D Aggregate Year-to-Date $ 624.74	10/12/1996	$4.62
D. Full Name, Mailing Address and ZIP Code Gustavo Valdespino 5 Sunburst Irvine, CA 92612 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Tenet Healthcare Corporation Occupation: Vice President Aggregate Year-to-Date $ 420.00	10/12/1996	$20.00
E. Full Name, Mailing Address and ZIP Code Jaime Mesolowski 4024 Lennox Drive New Orleans, LA 70131 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Meadowcrest Hospital Occupation: Chief Executive Officer Aggregate Year-to-Date $ 482.29	10/12/1996	$19.23
F. Full Name, Mailing Address and ZIP Code William Wilson 324 S. Smedley Street Philadelphia, PA 19103-6718 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Tenet Healthcare Corporation Occupation: Vice President, Finance Aggregate Year-to-Date $ 702.00	10/12/1996	$26.00
F. Full Name, Mailing Address and ZIP Code Anthony P. Whitehead 795 Aron Drive Roswell, GA 30076 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Tenet Healthcare Corporation Occupation: Vice President, Finance Aggregate Year-to-Date $ 500.00	10/16/1996	$500.00

SUBTOTAL of Receipts This Page (optional)	654.85
TOTAL This Period (last page this line number only)	5356.50

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22.03.739.1858

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☐	Hand Delivered	Date of Receipt
☐	First Class Mail	POSTMARKED
☑	Registered/Certified Mail	POSTMARKED (R/C) 12-27-01
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House office of Records and Registration	Date of Receipt
☐	Received from the Senate Office of Public Records	Date of Receipt
☐	Other (Specify):	Postmarked and/or Date of Receipt
☐	Electronic Filing	

Jm\ b
PREPARER

1-8-02
DATE PREPARED

(6/2000)