

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 69 OF 91
<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. Craig Steiner MD
Full Name (Last, First, Middle Initial)

Mailing Address 4709 Camargo Court

City College Station	State TX	Zip Code 77845-4405
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FEC ID number of contributing federal political committee. **C**

Name of Employer Pediatrix Medical Services, Inc.	Occupation Medical Director NICU
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2015

Transaction ID : A9387A8A18A584BBF858

Amount of Each Receipt this Period

125.00

Payroll Deduction

B. Robert Stettler MD
Full Name (Last, First, Middle Initial)

Mailing Address 5190 Olive Court

City Greenwood Village	State CO	Zip Code 80121
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FEC ID number of contributing federal political committee. **C**

Name of Employer Obstetrix Medical Group of Colorado, P	Occupation Perinatologist
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2015

Transaction ID : A8785415EE135458D9BE

Amount of Each Receipt this Period

300.00

Payroll Deduction

C. Michael J Stevener MD
Full Name (Last, First, Middle Initial)

Mailing Address 2124 Bradford Park

City Fort Worth	State TX	Zip Code 76107
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FEC ID number of contributing federal political committee. **C**

Name of Employer Pediatrix Medical Services, Inc.	Occupation Medical Director NICU
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2015

Transaction ID : ACB3AFC6CCD874E798BA

Amount of Each Receipt this Period

5000.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	5425.00
TOTAL This Period (last page this line number only).....▶	