

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

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

FOR LINE NUMBER: PAGE 33 OF 68

(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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Warren, Charlene, , , CPHRM

Mailing Address 4851 NE 29th Ave

City
Lighthouse Point

State
FL

Zip Code
33064-7917

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Mednax Services, Inc.

Occupation (for Individual)
VP Risk Mgt & Creden

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2019

Transaction ID : A130819A1259E4BA3A04

Amount of Each Receipt this Period

100.00

☐ Memo Item

Payroll Deduction Payroll Deduction: \$100.00/

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Pepia, John, , ,

Mailing Address 20160 Ocean Key Dr

City
Boca Raton

State
FL

Zip Code
33498-4529

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Mednax Services, Inc.

Occupation (for Individual)
SVP & Chief Acctg Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2019

Transaction ID : ADCBE002328AD47D1AD9

Amount of Each Receipt this Period

250.00

☐ Memo Item

Payroll Deduction Payroll Deduction: \$250.00/

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Engels, Emil, D, , MD

Mailing Address 3127 Windsong Dr

City
Oakton

State
VA

Zip Code
22124-1832

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Mednax Services, Inc.

Occupation (for Individual)
Div Medical Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2019

Transaction ID : AFAE22D8D01E34E61ADB

Amount of Each Receipt this Period

100.00

☐ Memo Item

Payroll Deduction Payroll Deduction: \$100.00/

SUBTOTAL of Receipts This Page (optional)..... ►

450.00

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