

**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

Full Name (Last, First, Middle Initial)

A. Majority Committee

Mailing Address 213 Ashby Street

City Alexandria State VA Zip Code 22305

Purpose of Disbursement
Political Contribution- 2013

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: 2013
 Primary General
 Other (specify) Other2013

Date of Disbursement

MM / DD / YYYY
09 / 17 / 2013

Transaction ID : B329EFA6632DE411298F

Amount of Each Disbursement this Period

2500.00

B. PASCRELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 640

City TOTOWA State NJ Zip Code 07511

Purpose of Disbursement
Political Contribution- Primary 2014

Candidate Name

Rep. Bill J. Pascrell Jr.

Office Sought: House Senate President

State: NJ District: 09

Disbursement For: 2014
 Primary General
 Other (specify)

Date of Disbursement

MM / DD / YYYY
09 / 16 / 2013

Transaction ID : B3A947D944E7844968B8

Amount of Each Disbursement this Period

2500.00

C. RE-ELECT TIM GRIFFIN FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 7526

City Little Rock State AR Zip Code 72217-7526

Purpose of Disbursement
Political Contribution- Primary 2014

Candidate Name

Rep. Tim Griffin

Office Sought: House Senate President

State: AR District: 02

Disbursement For: 2014
 Primary General
 Other (specify)

Date of Disbursement

MM / DD / YYYY
09 / 16 / 2013

Transaction ID : B1EB2A4E1352B49A5BCB

Amount of Each Disbursement this Period

5000.00

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

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

10000.00