

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)

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☒ 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. Campbell, Andrew Sean, , ,

Mailing Address 423 S Westridge Cir

City
Anaheim

State
CA

Zip Code
92807-3722

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
Dir RCM CBO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1080.00

Date of Receipt

09 / 28 / 2018

Transaction ID : A178C08EC112F486C8BE

Amount of Each Receipt this Period

60.00

☐ Memo Item
☐ Payroll Deduction

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

B. Moore, Mary Ann, , ,

Mailing Address 16868 Charles River Dr
Apt B407

City
Delray Beach

State
FL

Zip Code
33446-0010

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
Chief Legal Officer MNMG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.06

Date of Receipt

09 / 28 / 2018

Transaction ID : ADCA7CC6A22A14DD2A5I

Amount of Each Receipt this Period

41.67

☐ Memo Item
☐ Payroll Deduction

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

C. Rieker, Robert, P, , MD

Mailing Address 4420 Lake Boone Trl

City
Raleigh

State
NC

Zip Code
27607-7505

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
American Anesthesiology of North Carol

Occupation (for Individual)
Anesthesiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

09 / 28 / 2018

Transaction ID : ABA891DAD7023452087C

Amount of Each Receipt this Period

50.00

☐ Memo Item
☐ Payroll Deduction

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

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

151.67