

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

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

FOR LINE NUMBER: PAGE 41 OF 102

(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. Sato, Ray, Y, , MD**

Mailing Address 2000 Alaskan Way  
Apt 349

City  
Seattle

State  
WA

Zip Code  
98121-2104

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Pediatrix Medical Group of Washington,

Occupation (for Individual)

Neonatologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2019

**Transaction ID : AF939D71F28514757862**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Payroll Deduction Payroll Deduction: \$50.00/

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

**B. Cole, Cameron, , , MD**

Mailing Address 8239 New Cut Rd

City

Campobello

State

SC

Zip Code

29322-8733

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Pediatrix Medical Group of South Carol

Occupation (for Individual)

Neonatologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2019

**Transaction ID : AE7D78B20FA0E4080A77**

Amount of Each Receipt this Period

125.00

☐ Memo Item

Payroll Deduction Payroll Deduction: \$125.00/

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

**C. Tisdell, Scott, , , MD**

Mailing Address 1420 Crownhill Dr

City

Arlington

State

TX

Zip Code

76012-2816

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Pediatrix Medical Services, Inc.

Occupation (for Individual)

Medical Director NICU

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4090.89

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2019

**Transaction ID : AD3916E801A9F415391E**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Payroll Deduction Payroll Deduction: \$500.00/

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

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

675.00