

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>		643339.68
(b) Cash on Hand at Beginning of Reporting Period.....	733223.87	
(c) Total Receipts (from Line 19)	110864.77	313385.32
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	844088.64	956725.00
7. Total Disbursements (from Line 31).....	60646.76	173283.12
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	783441.88	783441.88
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	103766.63	304193.77
(ii) Unitemized	5789.41	6024.41
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	109556.04	310218.18
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	1058.82
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	109556.04	311277.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	1308.73	1698.32
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	410.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	110864.77	313385.32
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	110864.77	313385.32

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	146.76	1807.12
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	146.76	1807.12
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	46500.00	151500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	14000.00	19976.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	60646.76	173283.12
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	60646.76	173283.12

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	109556.04	311277.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	109556.04	311277.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	146.76	1807.12
37. Offsets to Operating Expenditures (from Line 15, page 3).....	1308.73	1698.32
38. Net Operating Expenditures (subtract Line 37 from Line 36)	-1161.97	108.80

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA
Transaction ID :

This amendment is in response the letter dated 6/27/2012. This report adds a note explaining the receipt of \$1308.73 was a reimbursement of Administrative fee. This report also corrects the contribution to Mike McIntyre for Congress. The Contribution was meant to be attributed to the General 2012 Election. It was misreported due to data entry error.

Form/Schedule:
Transaction ID:

**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 7 OF 84
<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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

A. Amy T Aaron
Full Name (Last, First, Middle Initial)

Mailing Address 620 Bluff Springs Road

City Fort Worth State TX Zip Code 76108

FEC ID number of contributing federal political committee. **C**

Name of Employer: Pediatrix Medical Group, Inc. Occupation: Dir Adv Practioners

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt: **03 / 15 / 2012**

Transaction ID : AD52D02584109436BA34

Amount of Each Receipt this Period: **50.00**

Payroll Deduction

B. Amy T Aaron
Full Name (Last, First, Middle Initial)

Mailing Address 620 Bluff Springs Road

City Fort Worth State TX Zip Code 76108

FEC ID number of contributing federal political committee. **C**

Name of Employer: Pediatrix Medical Group, Inc. Occupation: Dir Adv Practioners

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt: **03 / 30 / 2012**

Transaction ID : A889F595DA9D14CD68A9

Amount of Each Receipt this Period: **50.00**

Payroll Deduction

C. Francis J Abdou MD
Full Name (Last, First, Middle Initial)

Mailing Address 3828 White Chapel Way

City Raleigh State NC Zip Code 27615

FEC ID number of contributing federal political committee. **C**

Name of Employer: American Anesthesiology of North Carol Occupation: Anesthesiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt: **03 / 30 / 2012**

Transaction ID : AC178EAE20AE740E19A6

Amount of Each Receipt this Period: **100.00**

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... **200.00**

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

**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 8 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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. Sikander Adeni MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 4321 Rio Robles Dr
 City Austin State TX Zip Code 78746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Pediatrix Medical Services, Inc. Occupation: Neonatologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt: 03 / 30 / 2012
Transaction ID : AE309259863E349ABA03
 Amount of Each Receipt this Period: 100.00
 Payroll Deduction

B. Robert Alphin MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 4028 John S Raboteau Wynd
 City Raleigh State NC Zip Code 27612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: American Anesthesiology of North Carol Occupation: Anesthesiologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt: 03 / 30 / 2012
Transaction ID : A76397D6CBDC34820BC7
 Amount of Each Receipt this Period: 100.00
 Payroll Deduction

C. Dominic J Andreano
 Full Name (Last, First, Middle Initial)
 Mailing Address 1720 SW 131st Terrace
 City Davie State FL Zip Code 33325
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Mednax Services, Inc. Occupation: SVP and Gen'l Counsel
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1017.64**

Date of Receipt: 03 / 15 / 2012
Transaction ID : AB6CE7E8C22534BA48E5
 Amount of Each Receipt this Period: 203.53
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... **403.53**
TOTAL This Period (last page this line number only).....

**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 9 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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. Dominic J Andreano
 Full Name (Last, First, Middle Initial)
 Mailing Address 1720 SW 131st Terrace
 City Davie State FL Zip Code 33325
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mednax Services, Inc. Occupation SVP and Gen'l Counsel
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1221.17**

Date of Receipt **03 / 30 / 2012**
Transaction ID : A4840EAE4D42C48C6A4D
 Amount of Each Receipt this Period **203.53**
 Payroll Deduction

B. Robert J Balcom MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 2257 Haversham Close
 City Virginia Beach State VA Zip Code 23454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pediatrix Medical Group, Inc. Occupation Regional President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **5000.00**

Date of Receipt **03 / 15 / 2012**
Transaction ID : A3F7772C9E6084467A93
 Amount of Each Receipt this Period **5000.00**
 Payroll Deduction

C. Adel W Bassali MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 6427 Lake Meadow Drive
 City Burke State VA Zip Code 22015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer American Anesthesiology of Virginia, P Occupation Anesthesiologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **03 / 16 / 2012**
Transaction ID : A4FD476DA0B2942DDBCA
 Amount of Each Receipt this Period **250.00**
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... **5453.53**
TOTAL This Period (last page this line number only).....

**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 10 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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

Full Name (Last, First, Middle Initial) A. Michael Battista MD		Date of Receipt
Mailing Address 11 Orsinger Hill		<input type="text" value="03"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City	State	Zip Code
San Antonio	TX	78230
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : AE62EA826857E4363959
Name of Employer	Occupation	Amount of Each Receipt this Period
Pediatrix Medical Services, Inc.	Medical Director NICU	<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	Payroll Deduction
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Michael Battista MD		Date of Receipt
Mailing Address 11 Orsinger Hill		<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2012"/>
City	State	Zip Code
San Antonio	TX	78230
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : A669A64D324D54944AB5
Name of Employer	Occupation	Amount of Each Receipt this Period
Pediatrix Medical Services, Inc.	Medical Director NICU	<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	Payroll Deduction
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Rosaire J Belizaire MD		Date of Receipt
Mailing Address 117 Clipper Cove		<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2012"/>
City	State	Zip Code
Lafayette	LA	70508
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : A995D34D7AB474C828A6
Name of Employer	Occupation	Amount of Each Receipt this Period
Pediatrix Medical Group of Louisiana,	Corp Med Director NICU	<input type="text" value="150.00"/>
Receipt For:	Aggregate Year-to-Date ▼	Payroll Deduction
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="450.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="650.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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 11 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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. Valerie Bell MD
Full Name (Last, First, Middle Initial)

Mailing Address 2973 Cheroakwood Lane

City Rockford State IL Zip Code 61114

FEC ID number of contributing federal political committee. **C**

Name of Employer: Pediatrix Medical Group of Illinois, P
Occupation: Med Dir Ped Hosp

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt: **03 / 30 / 2012**
Transaction ID : AFE66C0BE2A914708B17

Amount of Each Receipt this Period: **75.00**

Payroll Deduction

B. Anne Bergwall MD
Full Name (Last, First, Middle Initial)

Mailing Address 523 Livingston Drive

City Charlotte State NC Zip Code 28211

FEC ID number of contributing federal political committee. **C**

Name of Employer: American Anesthesiology of the Southea
Occupation: Anesthesiologist Assoc

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **03 / 16 / 2012**
Transaction ID : ACA678C556B584DF2A2C

Amount of Each Receipt this Period: **400.00**

C. Timothy Biela MD
Full Name (Last, First, Middle Initial)

Mailing Address 8050 Colonial Woods

City Boerne State TX Zip Code 78015

FEC ID number of contributing federal political committee. **C**

Name of Employer: Pediatrix Medical Services, Inc.
Occupation: Neonatologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt: **03 / 15 / 2012**
Transaction ID : AB818EFE1DA19477C8D7

Amount of Each Receipt this Period: **45.00**

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... **520.00**

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

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 12 OF 84
<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. Timothy Biela MD
Full Name (Last, First, Middle Initial)

Mailing Address 8050 Colonial Woods

City Boerne State TX Zip Code 78015

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Pediatrix Medical Services, Inc. Neonatologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt
03 / 30 / 2012

Transaction ID : A4DFA83CFE90439796F

Amount of Each Receipt this Period
45.00

Payroll Deduction

B. Albert V Brawley MD
Full Name (Last, First, Middle Initial)

Mailing Address 619 Brae Burn Drive

City Martinez State GA Zip Code 30907

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Pediatrix Medical Group of Georgia, P. Hospital Medical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt
03 / 30 / 2012

Transaction ID : A39D97B835C9D4F29B91

Amount of Each Receipt this Period
50.00

Payroll Deduction

C. David R Breed MD
Full Name (Last, First, Middle Initial)

Mailing Address 1310 S College St

City Georgetown State TX Zip Code 78626

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Pediatrix Medical Services, Inc. Neonatologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
03 / 15 / 2012

Transaction ID : ADF4D6A402C2645A5898

Amount of Each Receipt this Period
100.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... **195.00**

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

**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 13 OF 84
<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. David R Breed MD
Full Name (Last, First, Middle Initial)

Mailing Address 1310 S College St

City Georgetown State TX Zip Code 78626

FEC ID number of contributing federal political committee. **C**

Name of Employer: Pediatrix Medical Services, Inc. Occupation: Neonatologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt: **03 / 30 / 2012**

Transaction ID : A5BBF5315DA6644A080D

Amount of Each Receipt this Period: **100.00**

Payroll Deduction

B. Howard Brenker MD
Full Name (Last, First, Middle Initial)

Mailing Address 6566 NW 99 Lane

City Parkland State FL Zip Code 33076

FEC ID number of contributing federal political committee. **C**

Name of Employer: Pediatrix Medical Group of Florida, In Occupation: Medical Director NICU

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt: **03 / 30 / 2012**

Transaction ID : A8BA5B5B6C4604E05A55

Amount of Each Receipt this Period: **250.00**

Payroll Deduction

c. Robert C Bryant
Full Name (Last, First, Middle Initial)

Mailing Address 12717 W Sunrise Blvd 256

City Sunrise State FL Zip Code 33323

FEC ID number of contributing federal political committee. **C**

Name of Employer: Mednax Services, Inc. Occupation: SVP and CIO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1249.98**

Date of Receipt: **03 / 30 / 2012**

Transaction ID : AB3346A75A3BA4DEE85E

Amount of Each Receipt this Period: **416.66**

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... **766.66**

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

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 14 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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. Thomas J Butler
Full Name (Last, First, Middle Initial)

Mailing Address 4223 Forestridge Dr

City Richfield State OH Zip Code 44286

FEC ID number of contributing federal political committee. **C**

Name of Employer: Pediatrix Medical Group of Ohio Corp. Occupation: Neonatologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt: 03 / 30 / 2012
Transaction ID : AE1C08A27FCA5437B9A2

Amount of Each Receipt this Period: 1500.00

B. Joseph M Calabro
Full Name (Last, First, Middle Initial)

Mailing Address 4155 NW 100 Avenue

City Coral Springs State FL Zip Code 33065

FEC ID number of contributing federal political committee. **C**

Name of Employer: Mednax Services, Inc. Occupation: President And COO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 03 / 15 / 2012
Transaction ID : A31B574116FEF41F8B7D

Amount of Each Receipt this Period: 5000.00

Payroll Deduction

C. Andrew Sean Campbell
Full Name (Last, First, Middle Initial)

Mailing Address 423 Westridge Circle

City Anaheim State CA Zip Code 92651

FEC ID number of contributing federal political committee. **C**

Name of Employer: Pediatrix Medical Group, Inc. Occupation: Reg Dir Pat Accts 15

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 15 / 2012
Transaction ID : AF6CD61C6CA944B0390C

Amount of Each Receipt this Period: 60.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 6560.00

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

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 15 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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. Andrew Sean Campbell
Full Name (Last, First, Middle Initial)

Mailing Address 423 Westridge Circle

City Anaheim State CA Zip Code 92651

FEC ID number of contributing federal political committee. **C**

Name of Employer: **Pediatrix Medical Group, Inc.** Occupation: **Reg Dir Pat Accts 15**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt: **03 / 30 / 2012**

Transaction ID : AB59BC30E086441329D1

Amount of Each Receipt this Period: **60.00**

Payroll Deduction

B. William D Caplan MD
Full Name (Last, First, Middle Initial)

Mailing Address 7207 Edloe

City Houston State TX Zip Code 77025

FEC ID number of contributing federal political committee. **C**

Name of Employer: **Pediatrix Medical Services, Inc.** Occupation: **Medical Director NICU**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt: **03 / 30 / 2012**

Transaction ID : A02D03818792E440FA58

Amount of Each Receipt this Period: **200.00**

Payroll Deduction

C. Ronald Carzoli MD
Full Name (Last, First, Middle Initial)

Mailing Address 1505 First South Apt 401

City Jacksonville State FL Zip Code 32250

FEC ID number of contributing federal political committee. **C**

Name of Employer: **Pediatrix Medical Group of Florida, In** Occupation: **Corporate Medical Directr**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt: **03 / 30 / 2012**

Transaction ID : A5935CA299C134F5590F

Amount of Each Receipt this Period: **125.00**

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... **385.00**

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

**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 16 OF 84
<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. Elmer K Choi MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 11773 Hollyview Drive
 City State Zip Code
 Great Falls VA 22066
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 American Anesthesiology of Virginia, P Anesthesiologist
 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
 03 / 30 / 2012
Transaction ID : AEA932992F0AC4F9DB6C
 Amount of Each Receipt this Period
 100.00
 Payroll Deduction

B. David A Clark
 Full Name (Last, First, Middle Initial)
 Mailing Address 7489 Nw 117th Lane
 City State Zip Code
 Parkland FL 33076
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pediatrix Medical Group, Inc. COO PMG
 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
 03 / 15 / 2012
Transaction ID : A80E4A767BF4C479E942
 Amount of Each Receipt this Period
 5000.00
 Payroll Deduction

C. Bobby Clifton MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 1312 Montrose Dr
 City State Zip Code
 Shelby NC 28150
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 American Anesthesiology of the Southea Anesthesiologist Assoc
 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
 03 / 30 / 2012
Transaction ID : A2F49686D20AA4EC1AAF
 Amount of Each Receipt this Period
 100.00
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	5200.00
TOTAL This Period (last page this line number only).....▶	

**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 17 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

A. Robert Closius
Full Name (Last, First, Middle Initial)

Mailing Address 4301 Willow Ridge Drive

City Weston State FL Zip Code 33331

FEC ID number of contributing federal political committee. **C**

Name of Employer Mednax Services, Inc. Occupation Mgr Network Services

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
03 / 15 / 2012

Transaction ID : A351258976DE847FEB78

Amount of Each Receipt this Period
60.00

Payroll Deduction

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

Mailing Address 4301 Willow Ridge Drive

City Weston State FL Zip Code 33331

FEC ID number of contributing federal political committee. **C**

Name of Employer Mednax Services, Inc. Occupation Mgr Network Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 30 / 2012

Transaction ID : A457CCBD7D9A741FBBA9

Amount of Each Receipt this Period
60.00

Payroll Deduction

C. Cameron Cole MD
Full Name (Last, First, Middle Initial)

Mailing Address 8239 New Cut Rd

City Campo Bello State SC Zip Code 29322

FEC ID number of contributing federal political committee. **C**

Name of Employer Pediatrix Medical Group of South Carol Occupation Medical Director NICU

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 30 / 2012

Transaction ID : AAF58551AE0614FD09F8

Amount of Each Receipt this Period
125.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... **245.00**

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

**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 18 OF 84
<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. Jose Colindres MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 16775 NW 20 Street
 City State Zip Code
 Pembroke Pines FL 33028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pediatrix Medical Group of Florida, In Medical Director NICU
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 750.00

Date of Receipt
 03 / 30 / 2012
Transaction ID : A47825DD7B1D9487EADF
 Amount of Each Receipt this Period
 250.00
 Payroll Deduction

B. Steve Collins
 Full Name (Last, First, Middle Initial)
 Mailing Address 10468 Laurel Road
 City State Zip Code
 Davie FL 33328
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Mednax Services, Inc. SVP Business Development
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1500.00

Date of Receipt
 03 / 30 / 2012
Transaction ID : A7645D667A35B439D941
 Amount of Each Receipt this Period
 500.00
 Payroll Deduction

C. Frances C Cox
 Full Name (Last, First, Middle Initial)
 Mailing Address 2428 Green Meadows Lane
 City State Zip Code
 Buda TX 78610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pediatrix Medical Group, Inc. Regional HS Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 221.80

Date of Receipt
 03 / 30 / 2012
Transaction ID : A844AA94097734C0B9AB
 Amount of Each Receipt this Period
 55.45
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	805.45
TOTAL This Period (last page this line number only).....▶	

**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 19 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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. J Thomas Thomas Cox JRMD
 Full Name (Last, First, Middle Initial)
 Mailing Address 2488 W Keswick Road
 City Florence State SC Zip Code 29501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pediatrix Medical Group of South Carol Neonatologist
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 375.00

Date of Receipt
 03 / 30 / 2012
Transaction ID : A434C7669581F459DB4B
 Amount of Each Receipt this Period
 125.00
 Payroll Deduction

B. Jorge Del Toro MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 1059 Nautica Drive
 City Weston State FL Zip Code 33327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pediatrix Medical Group, Inc. RVP
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 962.01

Date of Receipt
 03 / 30 / 2012
Transaction ID : A6DD9B9DB561C433B940
 Amount of Each Receipt this Period
 320.67
 Payroll Deduction

C. Matthew J Devine
 Full Name (Last, First, Middle Initial)
 Mailing Address 2902 Needham Court
 City Delray Beach State FL Zip Code 33445
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Mednax Services, Inc. VP Business Development
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1041.65

Date of Receipt
 03 / 15 / 2012
Transaction ID : A5002D2E107664630AAE
 Amount of Each Receipt this Period
 208.33
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	654.00
TOTAL This Period (last page this line number only).....▶	

**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 20 OF 84
<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. Matthew J Devine
Full Name (Last, First, Middle Initial)

Mailing Address 2902 Needham Court

City Delray Beach State FL Zip Code 33445

FEC ID number of contributing federal political committee. **C**

Name of Employer Mednax Services, Inc. Occupation VP Business Development

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1249.98**

Date of Receipt **03 / 30 / 2012**

Transaction ID : A993D6282A205488EA49

Amount of Each Receipt this Period **208.33**

Payroll Deduction

B. Daniel P Eller
Full Name (Last, First, Middle Initial)

Mailing Address 8231 Nesbit Ferry Road

City Sandy Springs State GA Zip Code 30350

FEC ID number of contributing federal political committee. **C**

Name of Employer Pediatrix Medical Group of Georgia, P. Occupation Corp Med Director PERI

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt **03 / 30 / 2012**

Transaction ID : A92DD611D747048C0A4D

Amount of Each Receipt this Period **125.00**

Payroll Deduction

c. Julia Elrod MD
Full Name (Last, First, Middle Initial)

Mailing Address 110 Oxford Circle

City Bossier City State LA Zip Code 71111

FEC ID number of contributing federal political committee. **C**

Name of Employer Pediatrix Medical Group of Louisiana, Occupation Medical Director NICU

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **03 / 30 / 2012**

Transaction ID : A596A332AF8E74BE3A8F

Amount of Each Receipt this Period **100.00**

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... **433.33**

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

**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 21 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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. Claire M Fair
Full Name (Last, First, Middle Initial)

Mailing Address 3353 Emerald Oaks Drive 102

City	State	Zip Code
Hollywood	FL	33021

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Mednax Services, Inc.	VP Human Resources

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
03	/	15	/	2012

Transaction ID : ABB38520C236C41F4829

Amount of Each Receipt this Period
5000.00

Payroll Deduction

B. Fuad Fakhreddine MD
Full Name (Last, First, Middle Initial)

Mailing Address 215 Northglenn Court

City	State	Zip Code
Atlanta	GA	30342

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Pediatrix Medical Group of Georgia, P.	Corp Med Director NICU

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	30	/	2012

Transaction ID : A1241116276634426B4D

Amount of Each Receipt this Period
125.00

Payroll Deduction

C. Harriet J Feick MD
Full Name (Last, First, Middle Initial)

Mailing Address 3950 Stonebridge Blvd

City	State	Zip Code
Copley	OH	44321

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Pediatrix Medical Group of Ohio Corp.	Neonatologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	30	/	2012

Transaction ID : AC504A6CBE63B45AEBF6

Amount of Each Receipt this Period
1500.00

SUBTOTAL of Receipts This Page (optional).....▶	6625.00
TOTAL This Period (last page this line number only).....▶	

**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 22 OF 84
<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

Full Name (Last, First, Middle Initial) A. Miguel Fernandez		Date of Receipt MM / DD / YYYY 03 / 30 / 2012 Transaction ID : AC3E9FC97D1EC48CC9C0
Mailing Address 121 Alhambra Plz Suite 1100		Amount of Each Receipt this Period 5000.00
City Coral Gables	State FL	Zip Code 33134
FEC ID number of contributing federal political committee. C	Name of Employer Mednax, Inc.	Occupation Director, Mednax, Inc. Board O
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. Simon Frisch		Date of Receipt MM / DD / YYYY 03 / 15 / 2012 Transaction ID : A7783DC88794D4281B3F
Mailing Address 3816 W Hibiscus Street		Amount of Each Receipt this Period 100.00
City Weston	State FL	Zip Code 33332
FEC ID number of contributing federal political committee. C	Name of Employer Pediatrix Medical Group, Inc.	Occupation Director of Operations
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
		Payroll Deduction

Full Name (Last, First, Middle Initial) C. Simon Frisch		Date of Receipt MM / DD / YYYY 03 / 30 / 2012 Transaction ID : A9E7BA4AF426543B6BE0
Mailing Address 3816 W Hibiscus Street		Amount of Each Receipt this Period 100.00
City Weston	State FL	Zip Code 33332
FEC ID number of contributing federal political committee. C	Name of Employer Pediatrix Medical Group, Inc.	Occupation Director of Operations
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
		Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	5200.00
TOTAL This Period (last page this line number only).....▶	

**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 23 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<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. Paul Gabos
Full Name (Last, First, Middle Initial)

Mailing Address 7742 Still Lakes Dr

City Odessa State FL Zip Code 33556

FEC ID number of contributing federal political committee. **C**

Name of Employer Lincare Holdings, Inc. Occupation Mednax Board Of Directors

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 16 / 2012
Transaction ID : A8A94C04F3D0C4529A15

Amount of Each Receipt this Period 5000.00

B. Josephine Gambardella MD
Full Name (Last, First, Middle Initial)

Mailing Address 1014 Priory Place

City McLean State VA Zip Code 22101

FEC ID number of contributing federal political committee. **C**

Name of Employer American Anesthesiology of Virginia, P Occupation Anesthesiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 30 / 2012
Transaction ID : AC43E21820ED246429A7

Amount of Each Receipt this Period 100.00

Payroll Deduction

c. Sanjuanita GarzaCox MD
Full Name (Last, First, Middle Initial)

Mailing Address 722 Ruidosa Downs

City Helotes State TX Zip Code 78023

FEC ID number of contributing federal political committee. **C**

Name of Employer Pediatrix Medical Services, Inc. Occupation Neonatologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 208.33

Date of Receipt 03 / 30 / 2012
Transaction ID : ADE5B17DF48554CE5B79

Amount of Each Receipt this Period 208.33

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 5308.33

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

**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 24 OF 84
<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. Mario I Gonzalez
Full Name (Last, First, Middle Initial)
Mailing Address 45 Turtle Creek Ln

City Panarra	State FL	Zip Code 32346
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Pediatrix Medical Group, Inc.	Occupation Director, Managed Care
---	--------------------------------------

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
03	/	15	/	2012

Transaction ID : A56BCE47FA7A846A2AE9

Amount of Each Receipt this Period

50.00

Payroll Deduction

B. Mario I Gonzalez
Full Name (Last, First, Middle Initial)
Mailing Address 45 Turtle Creek Ln

City Panarra	State FL	Zip Code 32346
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Pediatrix Medical Group, Inc.	Occupation Director, Managed Care
---	--------------------------------------

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
03	/	30	/	2012

Transaction ID : A9B930690F7E4427D834

Amount of Each Receipt this Period

50.00

Payroll Deduction

C. Jennifer Granberry
Full Name (Last, First, Middle Initial)
Mailing Address 7700 NW 120th Drive

City Parkland	State FL	Zip Code 33076
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Mednax Services, Inc.	Occupation VP Med Coding Ops and IM
---	--

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
03	/	15	/	2012

Transaction ID : A74D10C49CAD747DB981

Amount of Each Receipt this Period

60.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	160.00
TOTAL This Period (last page this line number only).....▶	

**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 25 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

A. Jennifer Granbery
Full Name (Last, First, Middle Initial)

Mailing Address 7700 NW 120th Drive

City Parkland State FL Zip Code 33076

FEC ID number of contributing federal political committee. **C**

Name of Employer Mednax Services, Inc. Occupation VP Med Coding Ops and IM

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 30 / 2012

Transaction ID : A8BAAC23859274B72A04

Amount of Each Receipt this Period
60.00

Payroll Deduction

B. Samuel W Grossmann
Full Name (Last, First, Middle Initial)

Mailing Address 438 Forrest Prk Cir

City Franklin State TN Zip Code 37064

FEC ID number of contributing federal political committee. **C**

Name of Employer Mednax Services, Inc. Occupation Dir Government Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **529.10**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 15 / 2012

Transaction ID : AB023D2C7BCA744D199E

Amount of Each Receipt this Period
105.82

Payroll Deduction

C. Samuel W Grossmann
Full Name (Last, First, Middle Initial)

Mailing Address 438 Forrest Prk Cir

City Franklin State TN Zip Code 37064

FEC ID number of contributing federal political committee. **C**

Name of Employer Mednax Services, Inc. Occupation Dir Government Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **634.92**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 30 / 2012

Transaction ID : AB7C24D35D3974338B50

Amount of Each Receipt this Period
105.82

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ **271.64**

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

**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 27 OF 84
<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. Joseph Harlan JRMD
Full Name (Last, First, Middle Initial)

Mailing Address 2700 Kathwood Court

City Florence State SC Zip Code 29501-1975

FEC ID number of contributing federal political committee. **C**

Name of Employer: Pediatrix Medical Group of South Carol
Occupation: Medical Director NICU

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1200.00**

Date of Receipt: **03 / 30 / 2012**

Transaction ID : AB3D64D6776BF47FB8CA

Amount of Each Receipt this Period: **400.00**

Payroll Deduction

B. William Hawk
Full Name (Last, First, Middle Initial)

Mailing Address 1542 SE 13th Street

City Ft Lauderdale State FL Zip Code 33316

FEC ID number of contributing federal political committee. **C**

Name of Employer: American Anesthesiology, Inc.
Occupation: SVP Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1093.75**

Date of Receipt: **03 / 15 / 2012**

Transaction ID : A613703AFF18645F588A

Amount of Each Receipt this Period: **218.75**

Payroll Deduction

C. William Hawk
Full Name (Last, First, Middle Initial)

Mailing Address 1542 SE 13th Street

City Ft Lauderdale State FL Zip Code 33316

FEC ID number of contributing federal political committee. **C**

Name of Employer: American Anesthesiology, Inc.
Occupation: SVP Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1312.50**

Date of Receipt: **03 / 30 / 2012**

Transaction ID : A8F737237DD1741CB880

Amount of Each Receipt this Period: **218.75**

Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	837.50
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 28 OF 84
(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

A. Cody Henderson MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 8 Ranch Terrace
 City Fair Oaks State TX Zip Code 78015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Pediatrix Medical Services, Inc. Occupation: Neonatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1458.35

Date of Receipt: 03 / 15 / 2012
Transaction ID : AE16CA6CD712C4F55BD3
 Amount of Each Receipt this Period: 291.67
 Payroll Deduction

B. Cody Henderson MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 8 Ranch Terrace
 City Fair Oaks State TX Zip Code 78015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Pediatrix Medical Services, Inc. Occupation: Neonatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1750.02

Date of Receipt: 03 / 30 / 2012
Transaction ID : A30AFBDF09591485DB9A
 Amount of Each Receipt this Period: 291.67
 Payroll Deduction

C. Ayne K Iafolla MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 14220 Cervantes Avenue
 City Darnestown State MD Zip Code 20874
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Pediatrix of Maryland, P.A. Occupation: Corp Med Director NICU
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt: 03 / 30 / 2012
Transaction ID : A984AEEC4C7A6433FA4D
 Amount of Each Receipt this Period: 150.00
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 733.34
TOTAL This Period (last page this line number only)..... ▶

**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 29 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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

Full Name (Last, First, Middle Initial) A. Jack Jacob MD		Date of Receipt
Mailing Address 3300 North Shore Dr		<input type="text" value="03"/> / <input type="text" value="16"/> / <input type="text" value="2012"/>
City	State	Zip Code
Anchorage	AK	99502
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : A01A3055AA3194DA9900
Alaska Neonatology Associates, Inc.	Medical Director NICU	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1000.00"/>	<input type="text" value="1000.00"/>

Full Name (Last, First, Middle Initial) B. Dennis M Jacobs DO		Date of Receipt
Mailing Address 420 Hendon Row Way		<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2012"/>
City	State	Zip Code
Fort Mill	SC	29715
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : A0AF6D8D348CD489D876
American Anesthesiology of the Southea	Anesthesiologist	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	<input type="text" value="100.00"/>
		Payroll Deduction

Full Name (Last, First, Middle Initial) C. Robert V Jarrett DO		Date of Receipt
Mailing Address 5851 Holmberg Rd Unit 3211		<input type="text" value="03"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City	State	Zip Code
Parkland	FL	33067
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : A313AA4EAAB9444C7BAD
Mednax Services, Inc.	VP Medical Affairs	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="5000.00"/>	<input type="text" value="5000.00"/>
		Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="6100.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 30 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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. Shannon L Jenkins DO
 Full Name (Last, First, Middle Initial)
 Mailing Address 5365 S. Tappan Falls Dr
 City Idaho Falls State ID Zip Code 83406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mountain States Neonatology Occupation Medical Director
 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
 03 / 15 / 2012
Transaction ID : A927A1500846D4FC4A38
 Amount of Each Receipt this Period 50.00
 Payroll Deduction

B. Shannon L Jenkins DO
 Full Name (Last, First, Middle Initial)
 Mailing Address 5365 S. Tappan Falls Dr
 City Idaho Falls State ID Zip Code 83406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mountain States Neonatology Occupation Medical Director
 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
 03 / 30 / 2012
Transaction ID : AEABB688FE3EA429682C
 Amount of Each Receipt this Period 50.00
 Payroll Deduction

C. Anand D Kantak MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 656 Highlands
 City Bath State OH Zip Code 44333
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pediatrix Medical Group of Ohio Corp. Occupation Corporate Medical Directr
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 30 / 2012
Transaction ID : A565C928A1E45451A93B
 Amount of Each Receipt this Period 1500.00

SUBTOTAL of Receipts This Page (optional).....▶	1600.00
TOTAL This Period (last page this line number only).....▶	

**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 31 OF 84
<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. Debra F Kaspar
Full Name (Last, First, Middle Initial)
Mailing Address 11224 Handlebar Rd
City Reston State VA Zip Code 20191
FEC ID number of contributing federal political committee. **C**
Name of Employer: Pediatrix Medical Group, Inc. Occupation: Director of Operations
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **634.80**

Date of Receipt: 03 / 15 / 2012
Transaction ID : A1F0BB714C0B845EE9F6
Amount of Each Receipt this Period: 126.96
Payroll Deduction

B. Debra F Kaspar
Full Name (Last, First, Middle Initial)
Mailing Address 11224 Handlebar Rd
City Reston State VA Zip Code 20191
FEC ID number of contributing federal political committee. **C**
Name of Employer: Pediatrix Medical Group, Inc. Occupation: Director of Operations
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **761.76**

Date of Receipt: 03 / 30 / 2012
Transaction ID : A3EFE57DDAD7347329C2
Amount of Each Receipt this Period: 126.96
Payroll Deduction

C. Alexander Kenton MD
Full Name (Last, First, Middle Initial)
Mailing Address 55 West Elm Circle
City San Antonio State TX Zip Code 78230
FEC ID number of contributing federal political committee. **C**
Name of Employer: Pediatrix Medical Services, Inc. Occupation: Neonatologist
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1000.00**

Date of Receipt: 03 / 15 / 2012
Transaction ID : AAAAD4BF4A0354C55AE8
Amount of Each Receipt this Period: 200.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... **453.92**
TOTAL This Period (last page this line number only).....

**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 32 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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. Alexander Kenton MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 55 West Elm Circle
 City San Antonio State TX Zip Code 78230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pediatrix Medical Services, Inc. Neonatologist
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1200.00

Date of Receipt
 03 / 30 / 2012
Transaction ID : A90B401A0B723433B0F
 Amount of Each Receipt this Period
 200.00
 Payroll Deduction

B. Kathleen A Knight
 Full Name (Last, First, Middle Initial)
 Mailing Address 3013 Overton Park Drive E
 City Fort Worth State TX Zip Code 76109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Mednax Services, Inc. Associate General Counsel
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 03 / 16 / 2012
Transaction ID : A635442C5D408490684F
 Amount of Each Receipt this Period
 600.00

C. Elizabeth Krueger MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 2420 Valley Brook Road
 City Nashville State TN Zip Code 37215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pediatrix Medical Group of Tennessee, Neonatologist
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 03 / 30 / 2012
Transaction ID : A9CD8F08EA3BF4288B47
 Amount of Each Receipt this Period
 100.00
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	900.00
TOTAL This Period (last page this line number only).....▶	

**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 33 OF 84
<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. Tony M Lacaze
Full Name (Last, First, Middle Initial)

Mailing Address 4342 Indian Creek Ln

City Frisco State TX Zip Code 75034

FEC ID number of contributing federal political committee. **C**

Name of Employer: Pediatrix Medical Group, Inc. Occupation: RVP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1041.65**

Date of Receipt: **03 / 15 / 2012**
Transaction ID : **A138D03A4A27E468A999**

Amount of Each Receipt this Period: **208.33**

Payroll Deduction

B. Tony M Lacaze
Full Name (Last, First, Middle Initial)

Mailing Address 4342 Indian Creek Ln

City Frisco State TX Zip Code 75034

FEC ID number of contributing federal political committee. **C**

Name of Employer: Pediatrix Medical Group, Inc. Occupation: RVP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1249.98**

Date of Receipt: **03 / 30 / 2012**
Transaction ID : **ADFD9EADE84A44CECA8E**

Amount of Each Receipt this Period: **208.33**

Payroll Deduction

C. David T Lam MD
Full Name (Last, First, Middle Initial)

Mailing Address 6 Jordans Wood Circle

City San Antonio State TX Zip Code 78248

FEC ID number of contributing federal political committee. **C**

Name of Employer: Pediatrix Medical Services, Inc. Occupation: Neonatologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt: **03 / 15 / 2012**
Transaction ID : **ACB9CF1321EBC4C0CB0C**

Amount of Each Receipt this Period: **45.00**

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... **461.66**

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

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 34 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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. David T Lam MD
Full Name (Last, First, Middle Initial)

Mailing Address 6 Jordans Wood Circle

City San Antonio State TX Zip Code 78248

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Pediatrix Medical Services, Inc. Neonatologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt
03 / 30 / 2012
Transaction ID : A612EAB0659D9423785C

Amount of Each Receipt this Period
45.00

Payroll Deduction

B. Stewart Lawrence MD
Full Name (Last, First, Middle Initial)

Mailing Address 2555 E Plateau Drive

City Boise State ID Zip Code 83712

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Mountain States Neonatology, Inc. Neonatologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
312.50

Date of Receipt
03 / 15 / 2012
Transaction ID : A3795095E0F774CE4B6D

Amount of Each Receipt this Period
62.50

Payroll Deduction

C. Stewart Lawrence MD
Full Name (Last, First, Middle Initial)

Mailing Address 2555 E Plateau Drive

City Boise State ID Zip Code 83712

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Mountain States Neonatology, Inc. Neonatologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
03 / 30 / 2012
Transaction ID : A4DFE65D65A8D4379A4C

Amount of Each Receipt this Period
62.50

Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶ 170.00

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

**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 35 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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. Peter Levine
Full Name (Last, First, Middle Initial)
Mailing Address 1192 Skylark Drive

City Weston	State FL	Zip Code 33327
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Mednax Services, Inc.	Occupation Associate General Counsel
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	15	/	2012

Transaction ID : A328A756AA6A24F9AAA2

Amount of Each Receipt this Period
100.00

Payroll Deduction

B. Peter Levine
Full Name (Last, First, Middle Initial)
Mailing Address 1192 Skylark Drive

City Weston	State FL	Zip Code 33327
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Mednax Services, Inc.	Occupation Associate General Counsel
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	30	/	2012

Transaction ID : A00A943A6E6F24865B42

Amount of Each Receipt this Period
100.00

Payroll Deduction

C. Christine A Lewandowski
Full Name (Last, First, Middle Initial)
Mailing Address 2100 N E 34 St

City Lighthouse Pt	State FL	Zip Code 33064
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Mednax Services, Inc.	Occupation VP Patient Accounts
---	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	15	/	2012

Transaction ID : A6F61ABD83DA043948B0

Amount of Each Receipt this Period
1000.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	1200.00
TOTAL This Period (last page this line number only).....▶	

**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 36 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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. Beverly Gail Lim
 Full Name (Last, First, Middle Initial)
 Mailing Address 201 NE 4th Street
 City Boca Raton State FL Zip Code 33432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pediatrix Medical Group, Inc. VP Program Development
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1200.00

Date of Receipt
 03 / 30 / 2012
Transaction ID : A1A803A1CAA8340FAA7B
 Amount of Each Receipt this Period
 400.00
 Payroll Deduction

B. Vivian Lopez LopezBlanco
 Full Name (Last, First, Middle Initial)
 Mailing Address 290 West McIntrye
 City Key Biscayne State FL Zip Code 33149
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Mednax Services, Inc. Chief Financial Officer
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 03 / 15 / 2012
Transaction ID : AF6F9C0D49BFB4756B7E
 Amount of Each Receipt this Period
 5000.00
 Payroll Deduction

C. Lisa A LowerySmith MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 7821 Night Hawk Road
 City Chattanooga State TN Zip Code 37421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pediatrix Medical Group of Tennessee, Corp Med Director NICU
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2000.01

Date of Receipt
 03 / 30 / 2012
Transaction ID : ACF69BDDFC1844ED7B66
 Amount of Each Receipt this Period
 666.67
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	6066.67
TOTAL This Period (last page this line number only).....▶	

**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 37 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

A. Gerald Maccioli MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 3903 Laurel Manor Ct
 City Raleigh State NC Zip Code 27612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer American Anesthesiology of North Carol
 Occupation Anesthesiologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 30 / 2012
Transaction ID : A0C4674512ED748608B6
 Amount of Each Receipt this Period 100.00
 Payroll Deduction

B. Bruce Manno
 Full Name (Last, First, Middle Initial)
 Mailing Address 1257 Ginger Circle
 City Weston State FL Zip Code 33326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mednax Services, Inc.
 Occupation Dir Internal Audit
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 604.60

Date of Receipt 03 / 15 / 2012
Transaction ID : A77E70C004B8C41D3A6B
 Amount of Each Receipt this Period 120.92
 Payroll Deduction

C. Bruce Manno
 Full Name (Last, First, Middle Initial)
 Mailing Address 1257 Ginger Circle
 City Weston State FL Zip Code 33326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mednax Services, Inc.
 Occupation Dir Internal Audit
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.52

Date of Receipt 03 / 30 / 2012
Transaction ID : ACB46F11EC93E49AB865
 Amount of Each Receipt this Period 120.92
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	341.84
TOTAL This Period (last page this line number only).....▶	

**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 38 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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. Jay Martin
Full Name (Last, First, Middle Initial)

Mailing Address 2715 Bembridge Drive

City Raleigh State NC Zip Code 27613

FEC ID number of contributing federal political committee. **C**

Name of Employer American Anesthesiology of North Carol Occupation Director of Oper ANES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 485.31

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 15 / 2012

Transaction ID : ACFF14EE9E731403C88B

Amount of Each Receipt this Period 161.77

Payroll Deduction

B. Jay Martin
Full Name (Last, First, Middle Initial)

Mailing Address 2715 Bembridge Drive

City Raleigh State NC Zip Code 27613

FEC ID number of contributing federal political committee. **C**

Name of Employer American Anesthesiology of North Carol Occupation Director of Oper ANES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 647.08

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 30 / 2012

Transaction ID : A942D6B55A2844C82861

Amount of Each Receipt this Period 161.77

Payroll Deduction

C. Eric W Mason MD
Full Name (Last, First, Middle Initial)

Mailing Address 333 Las Olas Way Apt 3005

City Ft Lauderdale State FL Zip Code 33301

FEC ID number of contributing federal political committee. **C**

Name of Employer American Anesthesiology, Inc. Occupation SVP

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
 03 / 30 / 2012

Transaction ID : AAB275B92E5314DCB92D

Amount of Each Receipt this Period 100.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 423.54

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

**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 39 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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. Stefan R Maxwell MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 5 Chatham Road
 City Charleston State WV Zip Code 25304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pediatrix Medical Group, P.C. Medical Director NICU
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1250.01

Date of Receipt
 03 / 30 / 2012
Transaction ID : A01F462CF8F774CD6BB4
 Amount of Each Receipt this Period
 416.67
 Payroll Deduction

B. Jorge McCormack MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 Brightwaters Circle NE
 City St Petersburg State FL Zip Code 33704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pediatrix Medical Group of Florida, In Pediatric Cardiologist
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 03 / 30 / 2012
Transaction ID : AA02661FFA6A04522932
 Amount of Each Receipt this Period
 100.00
 Payroll Deduction

C. Sandra E Medel
 Full Name (Last, First, Middle Initial)
 Mailing Address 11403 SW 115 Lane
 City Miami State FL Zip Code 33176
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Mednax Services, Inc. Staff Counsel
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 03 / 15 / 2012
Transaction ID : AF955D44BE7FE4B798BA
 Amount of Each Receipt this Period
 300.00
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶ 816.67
TOTAL This Period (last page this line number only).....▶

**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 40 OF 84
<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. Deborah MedelGuerrero
 Full Name (Last, First, Middle Initial)
 Mailing Address 12922 Grand Oaks Drive
 City Davie State FL Zip Code 33330
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mednax Services, Inc. Occupation VP Practice Integration
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 03 / 30 / 2012
Transaction ID : ABC01F1C004734F3C82A
 Amount of Each Receipt this Period 40.00
 Payroll Deduction

B. Roger Medel MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 12923 SW 35th Place
 City Davie State FL Zip Code 33330
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mednax Services, Inc. Occupation Ceo
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 15 / 2012
Transaction ID : AA4913519BA0848FF888
 Amount of Each Receipt this Period 5000.00
 Payroll Deduction

C. Bahman Mehdizadeh MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 25470 Prado De Las Bellotas
 City Calabasas State CA Zip Code 91302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pediatrix Medical Group of California, Occupation Medical Director NICU
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 30 / 2012
Transaction ID : AF994C4DAA07944BF88C
 Amount of Each Receipt this Period 100.00
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	5140.00
TOTAL This Period (last page this line number only).....▶	

**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 41 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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. Hugh Miller MD
Full Name (Last, First, Middle Initial)
Mailing Address 6910 N Chaparral Place

City Tucson	State AZ	Zip Code 85718
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Obstetrix Medical Group of Arizona, P.	Occupation Medical Director PERI
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	30	/	2012

Transaction ID : AE1587852F2054667931

Amount of Each Receipt this Period

150.00

Payroll Deduction

B. David Mintz
Full Name (Last, First, Middle Initial)
Mailing Address 2006 Havemeyer Lane

City Redondo Beach	State CA	Zip Code 90278
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FEC ID number of contributing federal political committee. **C**

Name of Employer Pediatrix Medical Group, Inc.	Occupation RVP
---	-------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2500.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	15	/	2012

Transaction ID : A6C42A661380B45A49EA

Amount of Each Receipt this Period

2500.00

Payroll Deduction

C. Khawar Mohsini MD
Full Name (Last, First, Middle Initial)
Mailing Address 9 Hunters Ridge Dr

City Saginaw	State MI	Zip Code 48609
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Pediatrix Medical Group of Michigan, P	Occupation Corporate Medical Directr
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	30	/	2012

Transaction ID : A3EF81FFF2A3D44A79E6

Amount of Each Receipt this Period

200.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	2850.00
TOTAL This Period (last page this line number only).....▶	

**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 42 OF 84
<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

Full Name (Last, First, Middle Initial) A. Melissa Montague		Date of Receipt
Mailing Address 6525 Monument Avenue		<input type="text" value="03"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City	State	Zip Code
Richmond	VA	23226
FEC ID number of contributing federal political committee.		Transaction ID : A1E88F4A51CB743B2AEA
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="95.00"/>
Name of Employer	Occupation	Payroll Deduction
Pediatrix Medical Group, Inc.	Director of Operations	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="475.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Melissa Montague		Date of Receipt
Mailing Address 6525 Monument Avenue		<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2012"/>
City	State	Zip Code
Richmond	VA	23226
FEC ID number of contributing federal political committee.		Transaction ID : A03AE62DC262C4055B46
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="95.00"/>
Name of Employer	Occupation	Payroll Deduction
Pediatrix Medical Group, Inc.	Director of Operations	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="570.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mary Ann Moore		Date of Receipt
Mailing Address 7543 NW 124th Avenue		<input type="text" value="03"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City	State	Zip Code
Parkland	FL	33076
FEC ID number of contributing federal political committee.		Transaction ID : A311D8B54616A4177B9E
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="2000.00"/>
Name of Employer	Occupation	Payroll Deduction
Mednax Services, Inc.	VP Chief Compliance Off	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="2000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="2190.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 43 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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. Ronald A Naglie MD
Full Name (Last, First, Middle Initial)

Mailing Address 25135 Stageline Dr

City Laguna Hills State CA Zip Code 92653

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Pediatrix Medical Group of California, Medical Director NICU

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
03 / 30 / 2012
Transaction ID : AE19C729A7AD546FA970

Amount of Each Receipt this Period
150.00

Payroll Deduction

B. Mahesh G Naik MD
Full Name (Last, First, Middle Initial)

Mailing Address 1889 Honey Spring Pl

City Lexington State KY Zip Code 40502

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Pediatrix Medical Group of Kentucky, P Corporate Medical Directr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
03 / 15 / 2012
Transaction ID : A275D122EB02446DF9EF

Amount of Each Receipt this Period
-4750.00

Payroll Deduction

C. Vijay Nama MD
Full Name (Last, First, Middle Initial)

Mailing Address 3101 Kennison Court

City Plano State TX Zip Code 75093

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Pediatrix Medical Services, Inc. Corp Med Director NICU

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1248.00

Date of Receipt
03 / 30 / 2012
Transaction ID : A4124E949A5224AFB8AA

Amount of Each Receipt this Period
416.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 4184.00

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

**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 44 OF 84
<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. Thomas G Nordstrom
 Full Name (Last, First, Middle Initial)
 Mailing Address 7910 W Upper Ridge Drive
 City Parkland State FL Zip Code 33067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mednax Services, Inc. Occupation Corporate Controller
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 15 / 2012
Transaction ID : AEF9675DA52E74507B13
 Amount of Each Receipt this Period 1000.00
 Payroll Deduction

B. Kathleen S O'Hara
 Full Name (Last, First, Middle Initial)
 Mailing Address 760 Azalea Ct
 City Plantation State FL Zip Code 33317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mednax Services, Inc. Occupation Director of Coding
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 15 / 2012
Transaction ID : A1CF3354CE6D34BF1860
 Amount of Each Receipt this Period 50.00
 Payroll Deduction

C. Kathleen S O'Hara
 Full Name (Last, First, Middle Initial)
 Mailing Address 760 Azalea Ct
 City Plantation State FL Zip Code 33317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mednax Services, Inc. Occupation Director of Coding
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 30 / 2012
Transaction ID : AE31A3BBAB90B462CBF2
 Amount of Each Receipt this Period 50.00
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	1100.00
TOTAL This Period (last page this line number only).....▶	

**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 45 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

A. Chien Oh MD
Full Name (Last, First, Middle Initial)

Mailing Address 10997 E Raintree Drive

City Scottsdale State AZ Zip Code 85255

FEC ID number of contributing federal political committee. **C**

Name of Employer: Obstetrix Medical Group of Phoenix, P.
Occupation: Medical Director PERI

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt: **03 / 30 / 2012**
Transaction ID : A7DCB00A5034C4A79A98

Amount of Each Receipt this Period: **125.00**

Payroll Deduction

B. Olufemi O Okanlami MD
Full Name (Last, First, Middle Initial)

Mailing Address 51310 Shamrock Hills Dr

City Granger State IN Zip Code 46530

FEC ID number of contributing federal political committee. **C**

Name of Employer: Pediatrix Medical Group of Indiana, P.
Occupation: Neonatologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt: **03 / 30 / 2012**
Transaction ID : A5ECC1B3A04EC426EB94

Amount of Each Receipt this Period: **250.00**

Payroll Deduction

c. Alan B Oliver
Full Name (Last, First, Middle Initial)

Mailing Address 130 Orion Circle

City Jupiter State FL Zip Code 33477

FEC ID number of contributing federal political committee. **C**

Name of Employer: Pediatrix Medical Group, Inc.
Occupation: Regional President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt: **03 / 30 / 2012**
Transaction ID : A1C119B900FB94BB380E

Amount of Each Receipt this Period: **250.00**

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... **625.00**

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

**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 46 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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. Carey D Osborne
Full Name (Last, First, Middle Initial)

Mailing Address 4095 NW 24th Avenue

City Boca Raton State FL Zip Code 33431

FEC ID number of contributing federal political committee. **C**

Name of Employer Mednax Services, Inc. Occupation Dir Recruiting

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
03 / 15 / 2012

Transaction ID : AA02D7EA71F3C4863A0D

Amount of Each Receipt this Period
60.00

Payroll Deduction

B. Carey D Osborne
Full Name (Last, First, Middle Initial)

Mailing Address 4095 NW 24th Avenue

City Boca Raton State FL Zip Code 33431

FEC ID number of contributing federal political committee. **C**

Name of Employer Mednax Services, Inc. Occupation Dir Recruiting

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 30 / 2012

Transaction ID : A75EBDDE0486D4E48B6C

Amount of Each Receipt this Period
60.00

Payroll Deduction

C. Eduardo A Otero MD
Full Name (Last, First, Middle Initial)

Mailing Address 2110 Alahmbra Crcl

City Coral Gables State FL Zip Code 33134

FEC ID number of contributing federal political committee. **C**

Name of Employer Pediatrix Medical Group of Florida, In Occupation Medical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 30 / 2012

Transaction ID : AEF132AA569D6473C821

Amount of Each Receipt this Period
150.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ **270.00**

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

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

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

FOR LINE NUMBER: PAGE 47 OF 84
(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 (Last, First, Middle Initial)
A. Francisco Paez MD

Mailing Address 3716 Oak Ridge Lane

City State Zip Code
 Weston FL 33331

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 Mednax Services, Inc. VP International Ops

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 2500.00

Date of Receipt
 03 / 15 / 2012
Transaction ID : A0F994FEBE2254090972

Amount of Each Receipt this Period
 2500.00

Payroll Deduction

Full Name (Last, First, Middle Initial)
B. Michael S Paranka MD

Mailing Address 10126 Summit View Pt

City State Zip Code
 Highland Ranch CO 80126

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 Obstetrix Medical Group of Colorado, P Neonatologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 03 / 30 / 2012
Transaction ID : A0FD9700D9F0643A3A56

Amount of Each Receipt this Period
 100.00

Payroll Deduction

Full Name (Last, First, Middle Initial)
C. Todd Patterson DO

Mailing Address 2700 Cline Street

City State Zip Code
 Tallahassee FL 32308

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 Pediatrix Medical Group of Florida, In Corporate Medical Directr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 03 / 30 / 2012
Transaction ID : A94BF49EAC3624D63AF3

Amount of Each Receipt this Period
 200.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 2800.00

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

**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 48 OF 84
<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. Hanoch Patt MD
Full Name (Last, First, Middle Initial)
Mailing Address 3005 Scenic Drive

City Austin	State TX	Zip Code 78703
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Pediatrix Medical Services, Inc.	Occupation Corporate Medical Director
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **843.75**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	30	/	2012

Transaction ID : AEC2F4F73736146E6818

Amount of Each Receipt this Period
281.25

Payroll Deduction

B. Darren Patz
Full Name (Last, First, Middle Initial)
Mailing Address 253 NE 99th Street

City Miami Shores	State FL	Zip Code 33138
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Mednax Services, Inc.	Occupation VP Government Affairs
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1041.65**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	15	/	2012

Transaction ID : A2BB696382A9E4B20BCD

Amount of Each Receipt this Period
208.33

Payroll Deduction

C. Darren Patz
Full Name (Last, First, Middle Initial)
Mailing Address 253 NE 99th Street

City Miami Shores	State FL	Zip Code 33138
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Mednax Services, Inc.	Occupation VP Government Affairs
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1249.98**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	30	/	2012

Transaction ID : A6E23ED36AF91444385F

Amount of Each Receipt this Period
208.33

Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	697.91
TOTAL This Period (last page this line number only).....▶	

**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 49 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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. John Pepia
Full Name (Last, First, Middle Initial)

Mailing Address 20160 Ocean Key Dr

City Boca Raton	State FL	Zip Code 33498
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Mednax Services, Inc.	Occupation VP Accounting & Finance
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	30	/	2012

Transaction ID : AA8704B7D4A384BAF8EC

Amount of Each Receipt this Period
400.00

Payroll Deduction

B. Manuel Peregrino MD
Full Name (Last, First, Middle Initial)

Mailing Address 4711 Appletree Dr

City Roanoke	State VA	Zip Code 24012
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Pediatrix Medical Group, P.C.	Occupation Medical Director NICU
---	-------------------------------------

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
03	/	30	/	2012

Transaction ID : A8EA1BC01DEBE4D4FB52

Amount of Each Receipt this Period
100.00

Payroll Deduction

C. Carlos Perez MD
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 3916

City Guaynabo	State PR	Zip Code 00970-3916
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Pediatrix Medical Group, S.P.	Occupation Regional President
---	----------------------------------

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
03	/	15	/	2012

Transaction ID : A9A1DDD1EF5984215A86

Amount of Each Receipt this Period
5000.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....	5500.00
TOTAL This Period (last page this line number only).....	

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 50 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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. Arnold Poole
Full Name (Last, First, Middle Initial)

Mailing Address 12149 Huske Road

City State Zip Code
Stony Creek VA 23882

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Pediatrix Medical Group, Inc. RVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
416.65

Date of Receipt
03 / 15 / 2012
Transaction ID : A6D34B649570F42508AE

Amount of Each Receipt this Period
83.33

Payroll Deduction

B. Arnold Poole
Full Name (Last, First, Middle Initial)

Mailing Address 12149 Huske Road

City State Zip Code
Stony Creek VA 23882

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Pediatrix Medical Group, Inc. RVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
499.98

Date of Receipt
03 / 30 / 2012
Transaction ID : A66791ADD5A6D495BB12

Amount of Each Receipt this Period
83.33

Payroll Deduction

C. Richard Porreco MD
Full Name (Last, First, Middle Initial)

Mailing Address 100 Detroit Street
406

City State Zip Code
Denver CO 80206

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Obstetrix Medical Group of Colorado, P Medical Director PERI

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
03 / 16 / 2012
Transaction ID : ADF8A7724B994CE79F8

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1166.66

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

**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 51 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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. Mary J Poulson
Full Name (Last, First, Middle Initial)

Mailing Address 1954 S Parfet Drive

City Lakewood State CO Zip Code 80227

FEC ID number of contributing federal political committee. **C**

Name of Employer Mednax Services, Inc. Occupation Dir Compliance

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
03 / 15 / 2012

Transaction ID : AFE857965B8734FAB99A

Amount of Each Receipt this Period
50.00

Payroll Deduction

B. Mary J Poulson
Full Name (Last, First, Middle Initial)

Mailing Address 1954 S Parfet Drive

City Lakewood State CO Zip Code 80227

FEC ID number of contributing federal political committee. **C**

Name of Employer Mednax Services, Inc. Occupation Dir Compliance

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
03 / 30 / 2012

Transaction ID : A1DE6606AB7844CFCA90

Amount of Each Receipt this Period
50.00

Payroll Deduction

C. George Powers MD
Full Name (Last, First, Middle Initial)

Mailing Address 1231 Vista Del Rio

City San Antonio State TX Zip Code 78216

FEC ID number of contributing federal political committee. **C**

Name of Employer Pediatrix Medical Services, Inc. Occupation Neonatologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 15 / 2012

Transaction ID : AB7EBD9D61206416299C

Amount of Each Receipt this Period
200.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... **300.00**

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

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 52 OF 84
<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

Full Name (Last, First, Middle Initial)
A. George Powers MD

Mailing Address 1231 Vista Del Rio

City San Antonio	State TX	Zip Code 78216
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Pediatrix Medical Services, Inc.	Occupation Neonatologist
--	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 30 / 2012

Transaction ID : A93FA0BA97F3B4ACAB0

Amount of Each Receipt this Period
100.00

Payroll Deduction

Full Name (Last, First, Middle Initial)
B. Richard Powers MD

Mailing Address 110 Gemini Ct

City Los Gatos	State CA	Zip Code 95032
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Pediatrix Medical Group of California,	Occupation Medical Director
--	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 30 / 2012

Transaction ID : A339DA75180894530BE4

Amount of Each Receipt this Period
100.00

Payroll Deduction

Full Name (Last, First, Middle Initial)
C. Alison Protain MD

Mailing Address 160 Talsman Dr
Unit 2

City Canfield	State OH	Zip Code 44406
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Pediatrix Medical Group, Inc.	Occupation Neonatologist
---	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 30 / 2012

Transaction ID : AFF6DF371844144E995D

Amount of Each Receipt this Period
1500.00

SUBTOTAL of Receipts This Page (optional).....▶	1700.00
TOTAL This Period (last page this line number only).....▶	

**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 53 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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. John L Prueitt MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 8500 54th Ave NE
 City Seattle State WA Zip Code 98115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pediatrix Medical Group, Inc. Director of Operations
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1249.98

Date of Receipt
 03 / 30 / 2012
Transaction ID : AFB8A78545925475D872
 Amount of Each Receipt this Period
 416.66
 Payroll Deduction

B. Patricia Ramsay MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 2581 Luberon Drive
 City Henderson State NV Zip Code 89044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pokroy Medical Group of Nevada, Ltd. Medical Director NICU
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 03 / 15 / 2012
Transaction ID : A97DF748A9A1F43149EC
 Amount of Each Receipt this Period
 50.00
 Payroll Deduction

C. Patricia Ramsay MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 2581 Luberon Drive
 City Henderson State NV Zip Code 89044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pokroy Medical Group of Nevada, Ltd. Medical Director NICU
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 03 / 30 / 2012
Transaction ID : A28A958432D604EFCB4B
 Amount of Each Receipt this Period
 50.00
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 516.66
TOTAL This Period (last page this line number only)..... ▶

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 54 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<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. Evelyn Rider MD
Full Name (Last, First, Middle Initial)

Mailing Address 6 Meadowlark Ridge Rd

City State Zip Code
Great Falls MT 59405

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Alaska Neonatology Associates, Inc. Neonatologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
03 / 15 / 2012
Transaction ID : A78034196B8D94ABA848

Amount of Each Receipt this Period
50.00

Payroll Deduction

B. Evelyn Rider MD
Full Name (Last, First, Middle Initial)

Mailing Address 6 Meadowlark Ridge Rd

City State Zip Code
Great Falls MT 59405

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Alaska Neonatology Associates, Inc. Neonatologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
03 / 30 / 2012
Transaction ID : ADD23DA3AB0BE41FFA80

Amount of Each Receipt this Period
50.00

Payroll Deduction

C. Linda Sacks MD
Full Name (Last, First, Middle Initial)

Mailing Address 406 Wheeler Street

City State Zip Code
Savannah GA 31405

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Magella Medical Associates of Georgia, Medical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
03 / 15 / 2012
Transaction ID : AADE09262578240B08EA

Amount of Each Receipt this Period
100.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00

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

**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 55 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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. Linda Sacks MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 406 Wheeler Street
 City Savannah State GA Zip Code 31405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Magella Medical Associates of Georgia, Occupation Medical Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **600.00**

Date of Receipt **03 / 30 / 2012**
Transaction ID : A9FE1B4BB1B8D48AD8BE
 Amount of Each Receipt this Period **100.00**
 Payroll Deduction

B. Idelsi Sanchez
 Full Name (Last, First, Middle Initial)
 Mailing Address 3941 SW 186th Way
 City Miramar State FL Zip Code 33029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mednax Services, Inc. Occupation Associate General Counsel
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **422.65**

Date of Receipt **03 / 15 / 2012**
Transaction ID : A76C65D87EE3340EE9A2
 Amount of Each Receipt this Period **84.53**
 Payroll Deduction

C. Idelsi Sanchez
 Full Name (Last, First, Middle Initial)
 Mailing Address 3941 SW 186th Way
 City Miramar State FL Zip Code 33029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mednax Services, Inc. Occupation Associate General Counsel
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **507.18**

Date of Receipt **03 / 30 / 2012**
Transaction ID : A7320E5DADD2C4583938
 Amount of Each Receipt this Period **84.53**
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... **269.06**
TOTAL This Period (last page this line number only).....

**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 56 OF 84
<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

Full Name (Last, First, Middle Initial) A. Debra Sansoucie		Date of Receipt MM / DD / YYYY 03 / 15 / 2012 Transaction ID : A52C7602272B6433A943
Mailing Address 3663 Whipoorwill Blvd		Amount of Each Receipt this Period 62.50
City Punta Gorda	State FL	Zip Code 33950
FEC ID number of contributing federal political committee. C	Name of Employer Pediatrix Medical Group, Inc.	Occupation VP NNP Program
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 312.50	Payroll Deduction

Full Name (Last, First, Middle Initial) B. Debra Sansoucie		Date of Receipt MM / DD / YYYY 03 / 30 / 2012 Transaction ID : A75AC2366FC40487EB72
Mailing Address 3663 Whipoorwill Blvd		Amount of Each Receipt this Period 62.50
City Punta Gorda	State FL	Zip Code 33950
FEC ID number of contributing federal political committee. C	Name of Employer Pediatrix Medical Group, Inc.	Occupation VP NNP Program
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	Payroll Deduction

Full Name (Last, First, Middle Initial) C. Jeffrey A Scheidlinger MD		Date of Receipt MM / DD / YYYY 03 / 16 / 2012 Transaction ID : A14C543079373456F9B0
Mailing Address 8400 Woodbranch Ct		Amount of Each Receipt this Period 500.00
City McLean	State VA	Zip Code 22102
FEC ID number of contributing federal political committee. C	Name of Employer American Anesthesiology of Virginia, P	Occupation Medical Director Anesth
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	625.00
TOTAL This Period (last page this line number only).....▶	

**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 57 OF 84
<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

Full Name (Last, First, Middle Initial) A. Clair A Schwendeman MD		Date of Receipt
Mailing Address 17616 Ivy Hill Drive		<input type="text" value="03"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City	State	Zip Code
Dallas	TX	75287
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Pediatrix Medical Services, Inc.	Medical Director NICU	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="500.00"/>	
		Amount of Each Receipt this Period <input type="text" value="100.00"/>
		Payroll Deduction

Full Name (Last, First, Middle Initial) B. Clair A Schwendeman MD		Date of Receipt
Mailing Address 17616 Ivy Hill Drive		<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2012"/>
City	State	Zip Code
Dallas	TX	75287
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Pediatrix Medical Services, Inc.	Medical Director NICU	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="600.00"/>	
		Amount of Each Receipt this Period <input type="text" value="100.00"/>
		Payroll Deduction

Full Name (Last, First, Middle Initial) C. Kenneth Shaffer MD		Date of Receipt
Mailing Address 1622 Resaca Blvd		<input type="text" value="03"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City	State	Zip Code
Austin	TX	78738
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Pediatrix Medical Services, Inc.	Medical Director Cardi	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="5000.00"/>	
		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
		Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="5200.00"/>
TOTAL This Period (last page this line number only).....	<input type="text" value="5200.00"/>

**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 58 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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. Richard A Sidebottom MD
Full Name (Last, First, Middle Initial)

Mailing Address 1305 Byron Nelson Pkwy

City	State	Zip Code
Southlake	TX	76092

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Pediatrix Medical Services, Inc.	Neonatologist

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
03	/	30	/	2012

Transaction ID : A662FA003CFCD4DD79B4

Amount of Each Receipt this Period

100.00

Payroll Deduction

B. Richard Simon
Full Name (Last, First, Middle Initial)

Mailing Address 2111 34th St

City	State	Zip Code
West Palm Beach	FL	33407

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Pediatrix Medical Group, Inc.	Director Of Operations

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
03	/	15	/	2012

Transaction ID : AFF10AF567F50467CB60

Amount of Each Receipt this Period

50.00

Payroll Deduction

C. Richard Simon
Full Name (Last, First, Middle Initial)

Mailing Address 2111 34th St

City	State	Zip Code
West Palm Beach	FL	33407

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Pediatrix Medical Group, Inc.	Director Of Operations

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
03	/	30	/	2012

Transaction ID : AA9A6522514B24B619AE

Amount of Each Receipt this Period

50.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**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 59 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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. M A Siriwardena MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 102 Stonebridge Court
 City New Hartford State NY Zip Code 13413
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pediatrix Medical Group Neonatology an Medical Director NICU
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 321.42

Date of Receipt
 03 / 30 / 2012
Transaction ID : A3FB39517F28C467F984
 Amount of Each Receipt this Period
 107.14
 Payroll Deduction

B. Kim G Smith MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 3050 FM 1799
 City Mineola State TX Zip Code 75773-4076
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pediatrix Medical Services, Inc. Neonatologist
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1300.00

Date of Receipt
 03 / 30 / 2012
Transaction ID : AB6362EFB9F654A3F989
 Amount of Each Receipt this Period
 100.00
 Payroll Deduction

C. Brenda Sommer
 Full Name (Last, First, Middle Initial)
 Mailing Address 4871 Acorn Street
 City Boca Raton State FL Zip Code 33487
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pediatrix Medical Group, Inc. Clin MgrChart Abstractor
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 305.80

Date of Receipt
 03 / 15 / 2012
Transaction ID : A0294CE977B15437CBEE
 Amount of Each Receipt this Period
 61.16
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶ 268.30
TOTAL This Period (last page this line number only).....▶

**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 60 OF 84
<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. Brenda Sommer
Full Name (Last, First, Middle Initial)
Mailing Address 4871 Acorn Street

City Boca Raton	State FL	Zip Code 33487
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Pediatrix Medical Group, Inc.	Occupation Clin MgrChart Abstractor
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
366.96

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	30	/	2012

Transaction ID : A303A3C0987A2485989

Amount of Each Receipt this Period
61.16

Payroll Deduction

B. Leann Steinberg
Full Name (Last, First, Middle Initial)
Mailing Address 12020 N W 18 Street

City Plantation	State FL	Zip Code 33323
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Mednax Services, Inc.	Occupation VP Tax
---	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	15	/	2012

Transaction ID : A3B63A6B4DF9B4A288BB

Amount of Each Receipt this Period
1000.00

Payroll Deduction

C. 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 ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	30	/	2012

Transaction ID : A15615DC822594C36A32

Amount of Each Receipt this Period
100.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	1161.16
TOTAL This Period (last page this line number only).....▶	

**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 61 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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

Full Name (Last, First, Middle Initial) A. Paul Stern		Date of Receipt
Mailing Address 275 NE Olive Way		<input type="text" value="03"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City	State	Zip Code
Boca Raton	FL	33432
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Mednax Services, Inc.	VP Tech Svcs	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="750.00"/>	
		Transaction ID : AB63826EBE7824EC48C6
		Amount of Each Receipt this Period
		<input type="text" value="150.00"/>
		Payroll Deduction

Full Name (Last, First, Middle Initial) B. Paul Stern		Date of Receipt
Mailing Address 275 NE Olive Way		<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2012"/>
City	State	Zip Code
Boca Raton	FL	33432
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Mednax Services, Inc.	VP Tech Svcs	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="900.00"/>	
		Transaction ID : A7E8A393B443F494DA2A
		Amount of Each Receipt this Period
		<input type="text" value="150.00"/>
		Payroll Deduction

Full Name (Last, First, Middle Initial) C. Julia L Stones		Date of Receipt
Mailing Address 6541 Ne 20 Terrace		<input type="text" value="03"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City	State	Zip Code
Ft Lauderdale	FL	33308
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Mednax Services, Inc.	Dir Marketing	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="425.00"/>	
		Transaction ID : A89B8ED472D414E00822
		Amount of Each Receipt this Period
		<input type="text" value="85.00"/>
		Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="385.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 62 OF 84
(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

A. Julia L Stones
 Full Name (Last, First, Middle Initial)
 Mailing Address 6541 Ne 20 Terrace
 City Ft Lauderdale State FL Zip Code 33308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mednax Services, Inc. Occupation Dir Marketing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 03 / 30 / 2012
Transaction ID : A9AC36108EE06492BA4C
 Amount of Each Receipt this Period 85.00
 Payroll Deduction

B. Terrence J Sweeney MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 727 17th Avenue East
 City Seattle State WA Zip Code 98112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pediatrix Medical Group of Washington, Occupation Medical Director NICU
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 03 / 30 / 2012
Transaction ID : AA05FE90542C3404F8FA
 Amount of Each Receipt this Period 140.00
 Payroll Deduction

C. Gregory D Sysyn MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 625 Spindewick Drive
 City Atlanta State GA Zip Code 30350
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Neonatology Associates of Atlanta, P.C Occupation Neonatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 16 / 2012
Transaction ID : A54146833B75740E8952
 Amount of Each Receipt this Period 300.00
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 525.00
TOTAL This Period (last page this line number only)..... ▶

**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 63 OF 84
<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. Bannie Lee Tabor MD
Full Name (Last, First, Middle Initial)
Mailing Address 5020 Still Meadow Drive

City Ft Worth	State TX	Zip Code 76132
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FEC ID number of contributing federal political committee. **C**

Name of Employer Pediatrix Medical Services, Inc.	Occupation Medical Director PERI
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	30	/	2012

Transaction ID : A6E8219F8BDA646EFA7D

Amount of Each Receipt this Period

200.00

Payroll Deduction

B. Sandy Tarant MD
Full Name (Last, First, Middle Initial)
Mailing Address 2710 Aylesford Drive

City Midlothian	State VA	Zip Code 23113
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Pediatrix Medical Group, P.C.	Occupation Corporate Medical Directr
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1200.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	30	/	2012

Transaction ID : ADB7F6E0491DF4A3986E

Amount of Each Receipt this Period

400.00

Payroll Deduction

C. B Keith Taylor MD
Full Name (Last, First, Middle Initial)
Mailing Address 108 Linden Avenue

City Lynchburg	State VA	Zip Code 24503
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FEC ID number of contributing federal political committee. **C**

Name of Employer Pediatrix Medical Group, P.C.	Occupation Corp Med Director NICU
---	--------------------------------------

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
03	/	30	/	2012

Transaction ID : ACD8174BE5F524612A05

Amount of Each Receipt this Period

100.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	700.00
TOTAL This Period (last page this line number only).....▶	

**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 64 OF 84
<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

Full Name (Last, First, Middle Initial) A. Harris Thompson		Date of Receipt 03 / 15 / 2012 Transaction ID : A2308BAE1FE6248759C1
Mailing Address 4711 NW 119th Avenue		Amount of Each Receipt this Period 166.00
City Coral Springs	State FL	Zip Code 33076
FEC ID number of contributing federal political committee. C	Payroll Deduction	
Name of Employer Mednax Services, Inc.	Occupation VP Business Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 830.00	

Full Name (Last, First, Middle Initial) B. Harris Thompson		Date of Receipt 03 / 30 / 2012 Transaction ID : AB5419B24A8954FF98D9
Mailing Address 4711 NW 119th Avenue		Amount of Each Receipt this Period 166.00
City Coral Springs	State FL	Zip Code 33076
FEC ID number of contributing federal political committee. C	Payroll Deduction	
Name of Employer Mednax Services, Inc.	Occupation VP Business Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 996.00	

Full Name (Last, First, Middle Initial) C. Scott Tisdell MD		Date of Receipt 03 / 30 / 2012 Transaction ID : A2175FEB1D7E54E15A26
Mailing Address 1420 Crownhill DR		Amount of Each Receipt this Period 227.27
City Arlington	State TX	Zip Code 76012
FEC ID number of contributing federal political committee. C	Payroll Deduction	
Name of Employer Pediatrix Medical Services, Inc.	Occupation Medical Director NICU	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 454.54	

SUBTOTAL of Receipts This Page (optional).....▶	559.27
TOTAL This Period (last page this line number only).....▶	

**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 65 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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. Joe Toney MD
Full Name (Last, First, Middle Initial)

Mailing Address 5459 S Krameria St

City Greenwood Village State CO Zip Code 80111

FEC ID number of contributing federal political committee. **C**

Name of Employer: Obstetrix Medical Group of Colorado, P
Occupation: Medical Director NICU

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt: **03 / 30 / 2012**
Transaction ID : A03FDE9640C404FFAA28

Amount of Each Receipt this Period: **200.00**

Payroll Deduction

B. Susan F Townsend MD
Full Name (Last, First, Middle Initial)

Mailing Address 5450 Autumn Court

City Greenwood Village State CO Zip Code 80111

FEC ID number of contributing federal political committee. **C**

Name of Employer: Pediatrix Medical Group of Colorado, P
Occupation: Neonatologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt: **03 / 30 / 2012**
Transaction ID : A9654866C0DA249FEB00

Amount of Each Receipt this Period: **125.00**

Payroll Deduction

C. Robert M Treadway MD
Full Name (Last, First, Middle Initial)

Mailing Address 3100 Briar Stream Run

City Raleigh State NC Zip Code 27612

FEC ID number of contributing federal political committee. **C**

Name of Employer: American Anesthesiology of North Carol
Occupation: Anesthesiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt: **03 / 30 / 2012**
Transaction ID : A03A211723FAC4CDA914

Amount of Each Receipt this Period: **100.00**

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... **425.00**

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

**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 66 OF 84
<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. Wendy Troyer MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 1274 Redfield Ridge
 City Atlanta State GA Zip Code 30338
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Neonatology Associates of Atlanta, P.C. Occupation Corporate Medical Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 30 / 2012
Transaction ID : A5EF46F5026F1410F8EB
 Amount of Each Receipt this Period 200.00
 Payroll Deduction

B. Gary A Twiggs MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 24761 Judi Court Suite 4000
 City Laguna Niguel State CA Zip Code 92677
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pediatrix Medical Group, Inc. Occupation Regional President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.01

Date of Receipt 03 / 30 / 2012
Transaction ID : A9E13D2CF54EF410AA51
 Amount of Each Receipt this Period 416.67
 Payroll Deduction

C. Martin P Walker MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 7960 Simonds Road NE
 City Kenmore State WA Zip Code 98028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Obstetrix Medical Group of Washington, Occupation Practice Med DirPERI
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 03 / 30 / 2012
Transaction ID : A322654BC79DC4BA987E
 Amount of Each Receipt this Period 125.00
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 741.67
TOTAL This Period (last page this line number only)..... ▶

**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 67 OF 84
<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. Marshall W Walker MD
Full Name (Last, First, Middle Initial)

Mailing Address 53 Forest Lane

City Greenville State SC Zip Code 29605

FEC ID number of contributing federal political committee. **C**

Name of Employer: Pediatrix Medical Group of South Carol
Occupation: Medical Director NICU

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt: **03 / 30 / 2012**

Transaction ID : ABEA8D08FCFAD4A8EB6

Amount of Each Receipt this Period: **250.00**

Payroll Deduction

B. Michele M Wallace
Full Name (Last, First, Middle Initial)

Mailing Address 10080 Nw 10th St

City Plantation State FL Zip Code 33322

FEC ID number of contributing federal political committee. **C**

Name of Employer: Mednax Services, Inc.
Occupation: Dir Clinical Systems

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt: **03 / 15 / 2012**

Transaction ID : AF4F88202DEFF4E52B57

Amount of Each Receipt this Period: **220.00**

Payroll Deduction

C. Michele M Wallace
Full Name (Last, First, Middle Initial)

Mailing Address 10080 Nw 10th St

City Plantation State FL Zip Code 33322

FEC ID number of contributing federal political committee. **C**

Name of Employer: Mednax Services, Inc.
Occupation: Dir Clinical Systems

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **280.00**

Date of Receipt: **03 / 30 / 2012**

Transaction ID : A622B807098734D1C99D

Amount of Each Receipt this Period: **20.00**

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... **490.00**

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

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 68 OF 84
<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. TungHo Wang MD
Full Name (Last, First, Middle Initial)
Mailing Address 1234 Collins Lane

City San Jose	State CA	Zip Code 95129
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Pediatrix Medical Group of California,	Occupation Neonatologist
--	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	27	/	2012

Transaction ID : A2D623C8DF91E47D5ABD

Amount of Each Receipt this Period
500.00

B. Charlene Warren
Full Name (Last, First, Middle Initial)
Mailing Address 4851 NE 29th Ave

City Lighthouse Point	State FL	Zip Code 33064
--------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Mednax Services, Inc.	Occupation VP Risk Mgmt & Creden
---	-------------------------------------

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
03	/	15	/	2012

Transaction ID : A1DB875425D11405CA1F

Amount of Each Receipt this Period
5000.00

Payroll Deduction

C. Mary Wearden MD
Full Name (Last, First, Middle Initial)
Mailing Address 22535 Lynridge

City San Antonio	State TX	Zip Code 78258
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Pediatrix Medical Services, Inc.	Occupation Neonatologist
--	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	15	/	2012

Transaction ID : A5925A9FA99BB47F4AFD

Amount of Each Receipt this Period
200.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	5700.00
TOTAL This Period (last page this line number only).....▶	

**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 84
<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. Mary Wearden MD
Full Name (Last, First, Middle Initial)
Mailing Address 22535 Lynridge
City San Antonio State TX Zip Code 78258
FEC ID number of contributing federal political committee. **C**
Name of Employer: Pediatrix Medical Services, Inc. Occupation: Neonatologist
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1200.00**

Date of Receipt: 03 / 30 / 2012
Transaction ID : ABF7460DE15214BA5B4F
Amount of Each Receipt this Period: 200.00
Payroll Deduction

B. Richard Weissmark
Full Name (Last, First, Middle Initial)
Mailing Address 3314 Oak Drive
City Hollywood State FL Zip Code 33021
FEC ID number of contributing federal political committee. **C**
Name of Employer: Mednax Services, Inc. Occupation: Manager Information Mgt
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **250.00**

Date of Receipt: 03 / 15 / 2012
Transaction ID : A482487FC0EE94DC39AA
Amount of Each Receipt this Period: 250.00
Payroll Deduction

C. Scott T Wiles
Full Name (Last, First, Middle Initial)
Mailing Address 734 Marble Way
City Boca Raton State FL Zip Code 33432
FEC ID number of contributing federal political committee. **C**
Name of Employer: Mednax Services, Inc. Occupation: Director Of Tax
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **300.00**

Date of Receipt: 03 / 15 / 2012
Transaction ID : A8A904772911B4D41B04
Amount of Each Receipt this Period: 60.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... **510.00**
TOTAL This Period (last page this line number only).....

**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 70 OF 84
<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. Scott T Wiles
Full Name (Last, First, Middle Initial)

Mailing Address 734 Marble Way

City Boca Raton State FL Zip Code 33432

FEC ID number of contributing federal political committee. **C**

Name of Employer Mednax Services, Inc. Occupation Director Of Tax

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt **03 / 30 / 2012**

Transaction ID : A2E89361D10B643DCAE4

Amount of Each Receipt this Period **60.00**

Payroll Deduction

B. Mike Williams
Full Name (Last, First, Middle Initial)

Mailing Address 4824 Studbury Hall Ct

City Wake Forest State NC Zip Code 27587

FEC ID number of contributing federal political committee. **C**

Name of Employer Critical Health Systems, Inc. Occupation VP Revenue Cycle Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **03 / 15 / 2012**

Transaction ID : A4AFBFC3EF422473E952

Amount of Each Receipt this Period **100.00**

Payroll Deduction

C. Mike Williams
Full Name (Last, First, Middle Initial)

Mailing Address 4824 Studbury Hall Ct

City Wake Forest State NC Zip Code 27587

FEC ID number of contributing federal political committee. **C**

Name of Employer Critical Health Systems, Inc. Occupation VP Revenue Cycle Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt **03 / 30 / 2012**

Transaction ID : A813E8DEE7C774CE897A

Amount of Each Receipt this Period **100.00**

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ **260.00**

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

**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 71 OF 84
<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. Pamela Williams
Full Name (Last, First, Middle Initial)
Mailing Address 5715 Walcott Ave
City Fairfax State VA Zip Code 22030
FEC ID number of contributing federal political committee. **C**
Name of Employer American Anesthesiology of Virginia, P Occupation Practice Administrator10
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 15 / 2012
Transaction ID : A95ADFB7B74CE4A5C91F
Amount of Each Receipt this Period 500.00
Payroll Deduction

B. Lee Wood
Full Name (Last, First, Middle Initial)
Mailing Address 208 W Portland St Unit 458
City Phoenix State AZ Zip Code 85003
FEC ID number of contributing federal political committee. **C**
Name of Employer Pediatrix Medical Group, Inc. Occupation RVP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 03 / 15 / 2012
Transaction ID : A764A236A3A354C68B21
Amount of Each Receipt this Period 2000.00
Payroll Deduction

C. Peter K Wu MD
Full Name (Last, First, Middle Initial)
Mailing Address 1615 N. Queen St Apt. 502
City Arlington State VA Zip Code 22209
FEC ID number of contributing federal political committee. **C**
Name of Employer American Anesthesiology Of Nc Occupation Anesthesiologist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 30 / 2012
Transaction ID : A34B3F8A50A1642E8958
Amount of Each Receipt this Period 100.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....	2600.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 72 OF 84
(check only one)

<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. Gary L Yup MD
Full Name (Last, First, Middle Initial)

Mailing Address 2301 Fireside Circle

City Reno	State NV	Zip Code 89509
--------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Pokroy Medical Group of Nevada, Ltd.	Occupation Medical Director NICU
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	30	/	2012

Transaction ID : A655929A680B0465C9C5

Amount of Each Receipt this Period

200.00

Payroll Deduction

B. Terrance J Zuerlein MD
Full Name (Last, First, Middle Initial)

Mailing Address 21 Fontenay Circle

City Little Rock	State AR	Zip Code 72223
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Pediatrix Medical Group of Arkansas, P	Occupation Medical Director NICU
--	-------------------------------------

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
03	/	30	/	2012

Transaction ID : A3F5BB929F0834652917

Amount of Each Receipt this Period

250.00

Payroll Deduction

C.
Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

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SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	103766.63

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

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

FOR LINE NUMBER: PAGE 73 OF 84
(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 (Last, First, Middle Initial)
A. Mednax, Inc

Mailing Address 1301 Concord Terrace

City Sunrise State FL Zip Code 33323

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1698.32

Date of Receipt
 03 / 05 / 2012
Transaction ID : A352ED1E038694A1CA1B

Amount of Each Receipt this Period
 1308.73

Reimbursement for Banking Fee

Full Name (Last, First, Middle Initial)
B.

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)
C.

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	1308.73
TOTAL This Period (last page this line number only).....▶	1308.73

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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. Bank Of America

Mailing Address 600 Peachtree Street

City Atlanta State GA Zip Code 30308

Purpose of Disbursement
Bank Fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 15 / 2012

Transaction ID : B4BB3908F253F4F4A8C3

Amount of Each Disbursement this Period

95.31

Full Name (Last, First, Middle Initial)

B. Paypal, Inc.

Mailing Address 2145 Hamilton Avenue

City San Jose State CA Zip Code 95125

Purpose of Disbursement
Bank Fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 30 / 2012

Transaction ID : B591C573616D1481882D

Amount of Each Disbursement this Period

30.00

Full Name (Last, First, Middle Initial)

C. Paypal, Inc.

Mailing Address 2145 Hamilton Avenue

City San Jose State CA Zip Code 95125

Purpose of Disbursement
Processing Fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 30 / 2012

Transaction ID : B651272595CB6452DBEB

Amount of Each Disbursement this Period

21.45

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

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

146.76

146.76

**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. ADAM HASNER FOR US HOUSE

Mailing Address PO BOX 276093

City BOCA RATON State FL Zip Code 33427

Purpose of Disbursement
Political Contribution

Candidate Name

Rep. Adam Hasner

Office Sought: House
 Senate
 President
State: FL District: 22

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 02 / 2012

Transaction ID : B7051DC1E925841E5B03

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. Berkley for Senate

Mailing Address 7437 S EASTERN AVE SUITE 427

City Las Vegas State NV Zip Code 89123

Purpose of Disbursement
Political Contribution

Candidate Name

Rep. Shelley Berkley

Office Sought: House
 Senate
 President
State: NV District: 01

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 26 / 2012

Transaction ID : B029FB89B0E5041A0AE7

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Castro for Congress

Mailing Address PO Box 544

City San Antonio State TX Zip Code 78292

Purpose of Disbursement
Political Contribution

Candidate Name

Rep. Joaquin Castro

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 02 / 2012

Transaction ID : B599FB899B46E46A5AF4

Amount of Each Disbursement this Period

2000.00

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

5000.00

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

**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. CHARLES BOUSTANY JR. MD FOR CONGRESS, INC.

Mailing Address PO BOX 80126

City LAFAYETTE State LA Zip Code 70598

Purpose of Disbursement
Political Contribution

Candidate Name

Rep. Charles W. Boustany Jr.

Office Sought: House
 Senate
 President
State: LA District: 07

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 02 / 2012

Transaction ID : BCB50E03F7C9D4929AAF

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Freedom Fund

Mailing Address 701 8th Street, NW

City Washington State DC Zip Code 20001

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼ Other2012

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 02 / 2012

Transaction ID : BC2A7516A24A64799B87

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. Friends Of Joe Heck

Mailing Address PO Box 750114

City Las Vegas State NV Zip Code 89136

Purpose of Disbursement
Political Contribution

Candidate Name

Rep. Joseph J. Heck

Office Sought: House
 Senate
 President
State: NV District: 03

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 02 / 2012

Transaction ID : B6239D653441C4E7C8C5

Amount of Each Disbursement this Period

1500.00

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

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

6000.00

**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. FRIENDS OF JOHN THUNE

Mailing Address PO BOX 841

City SIOUX FALLS State SD Zip Code 57101

Purpose of Disbursement
Political Contribution

Candidate Name
Sen. John Thune

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: SD District:

Date of Disbursement

MM / DD / YYYY
03 / 23 / 2012

Transaction ID : B037B131BF4AF475B9F2

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Friends of Nan Hayworth

Mailing Address PO Box 188

City Carmel State NY Zip Code 10512

Purpose of Disbursement
Political Contribution

Candidate Name
Rep. Nan A.S. Hayworth

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: NY District: 19

Date of Disbursement

MM / DD / YYYY
03 / 02 / 2012

Transaction ID : BAE99D34206AA44ABA69

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. Friends Of Schumer

Mailing Address 509 Madison Ave.
Suite 1902

City New York State NY Zip Code 10022

Purpose of Disbursement
Political Contribution

Candidate Name
Sen. Charles E. Schumer

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: NY District:

Date of Disbursement

MM / DD / YYYY
03 / 26 / 2012

Transaction ID : BA8D45E1FC9AD4E84A61

Amount of Each Disbursement this Period

5000.00

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

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

9500.00

**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. Hawkeye PAC

Mailing Address PO Box 192

City Des Moines State IA Zip Code 50301

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: 2012
 Primary General
 Other (specify) Other2012

Date of Disbursement

MM / DD / YYYY
03 / 26 / 2012

Transaction ID : BBB7B62B15708440280C

Amount of Each Disbursement this Period

1000.00

B. KENNY MARCHANT FOR CONGRESS

Mailing Address PO BOX 110187

City CARROLLTON State TX Zip Code 75011

Purpose of Disbursement
Political Contribution

Candidate Name

Rep. Kenny E. Marchant

Office Sought: House Senate President

State: TX District: 24

Disbursement For: 2012
 Primary General
 Other (specify)

Date of Disbursement

MM / DD / YYYY
03 / 26 / 2012

Transaction ID : BACCAFF338BEB48D3838

Amount of Each Disbursement this Period

1000.00

C. Lone Star Leadership

Mailing Address PO Box 30844

City Bethesda State MD Zip Code 20824

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: 2012
 Primary General
 Other (specify) Other2012

Date of Disbursement

MM / DD / YYYY
03 / 23 / 2012

Transaction ID : B92D9BA0558A8497EB5E

Amount of Each Disbursement this Period

3000.00

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

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

5000.00

**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. Marsha Blackburn For Congress Inc.

Mailing Address PO Box 682185

City State Zip Code
Franklin TN 37068

Purpose of Disbursement
Political Contribution

Candidate Name
Rep. Marsha Blackburn

Office Sought: House Senate President
State: TN District: 07
Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
03			26			2012			

Transaction ID : **B4A20550F8D154E44B02**

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. Matheson For Congress

Mailing Address P.O. Box 521048

City State Zip Code
Salt Lake City UT 84152

Purpose of Disbursement
Political Contribution

Candidate Name
Rep. Jim Matheson

Office Sought: House Senate President
State: UT District: 02
Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
03			02			2012			

Transaction ID : **BBD2752FB782A4A9EA16**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Mike McIntyre For Congress

Mailing Address P.O. Box 1

City State Zip Code
Lumberton NC 28359

Purpose of Disbursement
Political Contribution

Candidate Name
Rep. Mike McIntyre

Office Sought: House Senate President
State: NC District: 07
Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
03			23			2012			

Transaction ID : **BFF2015D1D8524391A74**

Amount of Each Disbursement this Period

2500.00

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

5000.00

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

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**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. Pete Stark Re-election Committee

Mailing Address P.O. Box 8331

City State Zip Code
Fremont CA 94537

Purpose of Disbursement
Political Contribution

Candidate Name

Rep. Pete Stark

Office Sought: House
 Senate
 President
State: CA District: 13

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	02	/	2012

Transaction ID : B738D77222F5141BC8F0

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. Richard E. Neal For Congress Committee

Mailing Address 76 Magnolia Terrace

City State Zip Code
Springfield MA 01108

Purpose of Disbursement
Political Contribution

Candidate Name

Rep. Richard E. Neal

Office Sought: House
 Senate
 President
State: MA District: 02

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	02	/	2012

Transaction ID : BE807F2CF38A5480382E

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Scott Brown for US Senate

Mailing Address 200 Reservoir Street
Suite 100

City State Zip Code
Needham MA 02494

Purpose of Disbursement
Political Contribution

Candidate Name

Sen. Scott P. Brown

Office Sought: House
 Senate
 President
State: MA District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	23	/	2012

Transaction ID : B7962478B8AC64C79B13

Amount of Each Disbursement this Period

2500.00

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

5000.00

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

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**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. Scott Brown for US Senate

Mailing Address 200 Reservoir Street
Suite 100

City Needham State MA Zip Code 02494

Purpose of Disbursement
Political Contribution

Candidate Name
Sen. Scott P. Brown

Office Sought: House
 Senate
 President
State: MA District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	3		2	0	1	2

Transaction ID : **B035D2D5589774242AE2**

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
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Full Name (Last, First, Middle Initial)

B. Stabenow For U.S. Senate

Mailing Address P.O. Box 4945

City East Lansing State MI Zip Code 48826

Purpose of Disbursement
Political Contribution

Candidate Name
Sen. Debbie Stabenow

Office Sought: House
 Senate
 President
State: MI District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	3		2	0	1	2

Transaction ID : **B87DD3D40883934A0C81C**

Amount of Each Disbursement this Period

5	0	0	.	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. STRATEGY PAC

Mailing Address 3048 SHOREWOOD DRIVE

City OSHKOSH State WI Zip Code 54901

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼
Other2012

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	1	2

Transaction ID : **B91C8F4C7504A4A2DBD4**

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
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SUBTOTAL of Disbursements This Page (optional)..... ▶

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

1	0	0	0	.	0	0
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2	5	0	0	.	0	0
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**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. Voice for Freedom

Mailing Address 3502 Halcyon Drive

City Alexandria State VA Zip Code 22305

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: 2012
 Primary General
 Other (specify) Other2012

Date of Disbursement

/ /

03 / 16 / 2012

Transaction ID : BB0034FBED6EE4323913

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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

1000.00

46500.00

**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 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 checked="" 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. Friends of Josh Belinfante

Mailing Address PO Box 550064

City Atlanta State GA Zip Code 30355

Purpose of Disbursement
State Senate Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	9		2	0	1	2

Transaction ID : B84471BE329D247D2AD4

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

B. John Zerwas Campaign

Mailing Address PO Box 852

City Fulshear State TX Zip Code 77441

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	0		2	0	1	2

Transaction ID : BC529BD99A2484EC0ADF

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

C. Nikki Haley For Governor

Mailing Address P.O. Box 47

City Lexington State SC Zip Code 29071

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District: Other2012

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	9		2	0	1	2

Transaction ID : B13D14059D4CE46C286A

Amount of Each Disbursement this Period

3	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

8	0	0	0	0	0	0	0	0	0
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TOTAL This Period (last page this line number only)..... ▶

8	0	0	0	0	0	0	0	0	0
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" 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. Palmetto Leadership Council

Mailing Address P.O. Box 8883

City Columbia State SC Zip Code 29201

Purpose of Disbursement
SC State Committee Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼
Other2012

Date of Disbursement

MM / DD / YYYY
03 / 29 / 2012

Transaction ID : BE13D5C60A5FC462F93E

Amount of Each Disbursement this Period

3500.00

Full Name (Last, First, Middle Initial)

B. SC Leadership PAC

Mailing Address PO Box 8881

City Columbia State SC Zip Code 29202

Purpose of Disbursement
SC State Committee Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼
Other2012

Date of Disbursement

MM / DD / YYYY
03 / 29 / 2012

Transaction ID : BE9579CB4BBE34D168F4

Amount of Each Disbursement this Period

3500.00

Full Name (Last, First, Middle Initial)

C. Senator Jack Hill Campaign

Mailing Address 109 College Ave

City Reidsville State GA Zip Code 30453

Purpose of Disbursement
Voided State Contribution report on 9/29/2011

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2011
 Primary General
 Other (specify) ▼
Other2011

Date of Disbursement

MM / DD / YYYY
03 / 01 / 2012

Transaction ID : BE521851305274AAAAD7

Amount of Each Disbursement this Period

-1000.00

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

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

6000.00

14000.00