

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

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

FOR LINE NUMBER: PAGE 42 / 102  
(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.**

Full Name (Last, First, Middle Initial)  
Roger M. Hinson

Mailing Address 7440 Mercer Terrace Drive

City State Zip Code  
Mercer Island WA 98040

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

Name of Employer  
Pediatrix Medical Group  
of WA

Occupation  
Neonatologist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	1	1

Transaction ID: SA11AI.7463

Amount of Each Receipt this Period

3000.00
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**B.**

Full Name (Last, First, Middle Initial)  
David Hoskinson

Mailing Address 1901 Ocean Drive  
8E

City State Zip Code  
Ft. Lauderdale FL 33305

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

Name of Employer  
MEDNAX Services, Inc.

Occupation  
VP Managed Care

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
80.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	1	1

Transaction ID: SA11AI.7464

Amount of Each Receipt this Period

40.00
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**C.**

Full Name (Last, First, Middle Initial)  
William Hyde

Mailing Address 1706 Crested Butte Dr.

City State Zip Code  
Austin TX 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 ▼  
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	1	1

Transaction ID: SA11AI.7537

Amount of Each Receipt this Period

250.00
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**SUBTOTAL** of Receipts This Page (optional) .....

3290.00
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**TOTAL** This Period (last page this line number only) .....

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