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)
☒ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. Full Name (Last, First, Middle Initial)
Pascal Goldschmidt MD

Mailing Address 1120 NW 14th St
Ste 360

City: Miami | State: FL | Zip Code: 33136-2107

FEC ID number of contributing federal political committee: C

Name of Employer: Leonard M. Miller School of Medicine a

Occupation: Senior Vice President for Medical Affa

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 3750.00

Date of Receipt: 08 / 03 / 2016

Transaction ID : AB57DB0B20ED146799CA

Amount of Each Receipt this Period: 1250.00

☐ Memo Item

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

Mailing Address 121 Alhambra Plz
Ste 1100

City: Coral Gables | State: FL | Zip Code: 33134-4522

FEC ID number of contributing federal political committee: C

Name of Employer: Mednax, Inc.

Occupation: Director, Mednax, Inc. Board O

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 2500.00

Date of Receipt: 08 / 03 / 2016

Transaction ID : A3E803503C7D449EA833

Amount of Each Receipt this Period: 2500.00

☐ Memo Item

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

Mailing Address 7742 Still Lakes Dr

City: Odessa | State: FL | Zip Code: 33556-2260

FEC ID number of contributing federal political committee: C

Name of Employer: Mednax Inc.

Occupation: Mednax Board Of Directors

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 5000.00

Date of Receipt: 08 / 26 / 2016

Transaction ID : AB47D3751DC5B44DAA76

Amount of Each Receipt this Period: 5000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 8750.00

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