

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 1301 Concord Terrace
 Check if different than previously reported. (ACC)
Sunrise FL 33323

2. **FEC IDENTIFICATION NUMBER** C00469205
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 02 01 2010 through 02 28 2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Karen Witte
Signature of Treasurer Electronically Filed by Karen Witte Date 03 19 2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only **FEC FORM 3X** (Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		99000.60
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	116866.47									
(c) Total Receipts (from Line 19)	106038.58	124079.35								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	222905.05	223079.95								
7. Total Disbursements (from Line 31)	279.71	454.61								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	222625.34	222625.34								
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	1	0

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)	103898.35	119196.05
(ii) Unitemized	2140.23	4883.30
(iii) TOTAL (add Lines 11(a)(i) and (ii)	106038.58	124079.35
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	106038.58	124079.35
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)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
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 Transfer (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))	106038.58	124079.35
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	106038.58	124079.35

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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.....	279.71	454.61
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	279.71	454.61
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	279.71	454.61
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	279.71	454.61

DETAILED SUMMARY PAGE
of Disbursements

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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)	106038.58	124079.35
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	106038.58	124079.35
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	279.71	454.61
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	279.71	454.61

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

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

FOR LINE NUMBER: PAGE 6 / 32
(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)
David Auerbach

Mailing Address 355 Primavera Cove

City State Zip Code
Altamonte Spring FL 32714

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

Name of Employer Occupation
Pediatrix Medical Group of FL Medical Director

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 6 / 2 0 1 0

Transaction ID: SA11AI.4295

Amount of Each Receipt this Period
5000.00

Political Contribution

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

Mailing Address 11 Orsinger Hill

City State Zip Code
San Antonio TX 78230

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

Name of Employer Occupation
Pediatrix Medical Services Inc Medical Director

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 1 2 / 2 0 1 0

Transaction ID: SA11AI.4296

Amount of Each Receipt this Period
250.00

Political Contribution

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

Mailing Address 11 Orsinger Hill

City State Zip Code
San Antonio TX 78230

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

Name of Employer Occupation
Pediatrix Medical Services Inc Medical Director

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 750.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 6 / 2 0 1 0

Transaction ID: SA11AI.4297

Amount of Each Receipt this Period
250.00

Political Contribution

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: PAGE 7 / 32
(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

<p>A. Full Name (Last, First, Middle Initial) Bill Benton</p> <p>Mailing Address 14001 Belle Pointe Dr.</p> <p>City State Zip Code Little Rock AR 72212</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Pediatrix Medical Group of AR</p> <p>Occupation Neonatologist</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 2000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 1 0</p> <p>Transaction ID: SA11AI.4299</p> <p>Amount of Each Receipt this Period 2000.00</p> <p>Political Contribution</p>
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<p>B. Full Name (Last, First, Middle Initial) James Berger</p> <p>Mailing Address 1802 Mohawk Lane</p> <p>City State Zip Code Ogden UT 84403</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Pediatrix Medical Group, Inc.</p> <p>Occupation Medical Director</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 5000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 1 0</p> <p>Transaction ID: SA11AI.4301</p> <p>Amount of Each Receipt this Period 5000.00</p> <p>Political Contribution</p>
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<p>C. Full Name (Last, First, Middle Initial) Howard Brenker</p> <p>Mailing Address 6566 NW 99th Lane</p> <p>City State Zip Code Parkland FL 33076</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Pediatrix Medical Group of FL</p> <p>Occupation Medical Director</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 250.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 1 0</p> <p>Transaction ID: SA11AI.4303</p> <p>Amount of Each Receipt this Period 250.00</p> <p>Political Contribution</p>
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SUBTOTAL of Receipts This Page (optional)	7250.00
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 8 / 32
(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. Full Name (Last, First, Middle Initial)
Jay Brenner

Mailing Address 16317 Wilson Creek Court

City State Zip Code
Chesterfield MO 63005

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

Name of Employer Occupation
Pediatrix Medical Group of MO Medical Director

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 6 / 2 0 1 0

Transaction ID: SA11AI.4305

Amount of Each Receipt this Period
2500.00

Political Contribution

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

Mailing Address 12717 W. Sunrise Blvd.

City State Zip Code
Sunrise FL 33323

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

Name of Employer Occupation
MEDNAX Services, Inc. SVP and CIO

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 833.32

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 6 / 2 0 1 0

Transaction ID: SA11AI.4306

Amount of Each Receipt this Period
416.66

Political Contribution

C. Full Name (Last, First, Middle Initial)
Gary H. Burgess

Mailing Address 5933 Turtle Creek Drive

City State Zip Code
Plano TX 75093

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

Name of Employer Occupation
Pediatrix Medical Services Inc Neonatologist

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 6 / 2 0 1 0

Transaction ID: SA11AI.4308

Amount of Each Receipt this Period
5000.00

Political Contribution

SUBTOTAL of Receipts This Page (optional) ► 7916.66

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: PAGE 9 / 32
(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)
Andrew Sean Campbell

Mailing Address 423 S. Westridge Circle

City State Zip Code
Anaheim CA 92807

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

Name of Employer
Pediatrix Medical Group, Inc.

Occupation
Regional Director, Patient Accounts

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
MM / DD / YYYY
02 / 26 / 2010

Transaction ID: SA11AI.4310

Amount of Each Receipt this Period
60.00

Political Contribution

B.

Full Name (Last, First, Middle Initial)
Jose Colindres

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
Pediatrix Medical Group of FL

Occupation
Medical Director, NICU

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
02 / 26 / 2010

Transaction ID: SA11AI.4312

Amount of Each Receipt this Period
250.00

Political Contribution

C.

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

Mailing Address 304 Shaftsberry Ct.

City State Zip Code
Raleigh NC 27609

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 ▼
1000.00

Date of Receipt
MM / DD / YYYY
02 / 26 / 2010

Transaction ID: SA11AI.4314

Amount of Each Receipt this Period
1000.00

Political Contribution

SUBTOTAL of Receipts This Page (optional) ► **1310.00**

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 10 / 32
	<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) C. Andrews Combs		Date of Receipt MM / DD / YYYY 02 / 26 / 2010		
	Mailing Address 2269 Samarita		Transaction ID: SA11AI.4316		
	City San Jose	State CA	Zip Code 95124	Amount of Each Receipt this Period 5000.00	
	FEC ID number of contributing federal political committee. C		Political Contribution		
	Name of Employer Obstetrix Medical Group of CA	Occupation Medical Director	Aggregate Year-to-Date 5000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

B.	Full Name (Last, First, Middle Initial) Michael Crade		Date of Receipt MM / DD / YYYY 02 / 26 / 2010		
	Mailing Address 20 Marble Sands		Transaction ID: SA11AI.4320		
	City New Port Beach	State CA	Zip Code 92660	Amount of Each Receipt this Period 2000.00	
	FEC ID number of contributing federal political committee. C		Political Contribution		
	Name of Employer Magella Medical Group Inc	Occupation Radiologist	Aggregate Year-to-Date 2000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

C.	Full Name (Last, First, Middle Initial) Jorge DelToro		Date of Receipt MM / DD / YYYY 02 / 26 / 2010		
	Mailing Address 1059 Nautica Drive		Transaction ID: SA11AI.4324		
	City Weston	State FL	Zip Code 33327	Amount of Each Receipt this Period 416.67	
	FEC ID number of contributing federal political committee. C		Political Contribution		
	Name of Employer Pediatrix Medical Group, Inc.	Occupation RVP	Aggregate Year-to-Date 833.34		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

SUBTOTAL of Receipts This Page (optional)	7416.67
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 32
(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. Full Name (Last, First, Middle Initial)
Matthew J. Devine

Mailing Address 2902 Needham Court

City State Zip Code
Delray Beach FL 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 ▼ 624.99

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 1 2 / 2 0 1 0

Transaction ID: SA11AI.4325

Amount of Each Receipt this Period
208.33

Political Contribution

B. Full Name (Last, First, Middle Initial)
Matthew J. Devine

Mailing Address 2902 Needham Court

City State Zip Code
Delray Beach FL 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 ▼ 833.32

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 6 / 2 0 1 0

Transaction ID: SA11AI.4326

Amount of Each Receipt this Period
208.33

Political Contribution

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

Mailing Address 421 Canterbury Way

City State Zip Code
Jonesboro GA 30236

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

Name of Employer Occupation
Pediatrix Medical Group of GA Corporate Medical Director

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 833.34

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 6 / 2 0 1 0

Transaction ID: SA11AI.4327

Amount of Each Receipt this Period
416.67

Political Contribution

SUBTOTAL of Receipts This Page (optional) ► **833.33**

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: PAGE 12 / 32
(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)
Alan Fishman

Mailing Address 125 Hill Top Drive

City State Zip Code
Los Gatos CA 95032

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

Name of Employer: Obstetrix Medical Group of CA
Occupation: Medical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt: 02 / 26 / 2010
Transaction ID: SA11AI.4331
Amount of Each Receipt this Period: 5000.00
Political Contribution

B.

Full Name (Last, First, Middle Initial)
Edgar Garrabrant

Mailing Address 3415 Landor Road

City State Zip Code
Raleigh NC 27609

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 ▼
500.00

Date of Receipt: 02 / 26 / 2010
Transaction ID: SA11AI.4335
Amount of Each Receipt this Period: 500.00
Political Contribution

C.

Full Name (Last, First, Middle Initial)
Lisa Goldberg

Mailing Address 1004 Dartmouth Road

City State Zip Code
Alexandria VA 22314

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

Name of Employer: Pediatrix Medical Group
Occupation: Medical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt: 02 / 26 / 2010
Transaction ID: SA11AI.4339
Amount of Each Receipt this Period: 2000.00
Political Contribution

SUBTOTAL of Receipts This Page (optional) ► **7500.00**

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 13 / 32
(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)
Jennifer Granberry

Mailing Address 7700 NW 120th Drive

City State Zip Code
Parkland FL 33076

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

Name of Employer MEDNAX Services, Inc. Occupation VP Medical Coding Ops & IM

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 3 / 2 0 1 0

Transaction ID: SA11AI.4341

Amount of Each Receipt this Period
1000.00

Political Contribution

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

Mailing Address 2109 Blue Oak Terrace

City State Zip Code
Raleigh NC 27608

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

Name of Employer American Anesthesiology of NC Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 6 / 2 0 1 0

Transaction ID: SA11AI.4343

Amount of Each Receipt this Period
1200.00

Political Contribution

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

Mailing Address 438 Forrest Park Circle

City State Zip Code
Franklin TN 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 ▼ 282.24

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 1 2 / 2 0 1 0

Transaction ID: SA11AI.4344

Amount of Each Receipt this Period
94.08

Political Contribution

SUBTOTAL of Receipts This Page (optional) ► **2294.08**

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 14 / 32
(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)
Sam Grossman

Mailing Address 438 Forrest Park Circle

City State Zip Code
Franklin TN 37064

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 376.32

Date of Receipt
MM / DD / YYYY
02 / 26 / 2010

Transaction ID: SA11AI.4345

Amount of Each Receipt this Period
94.08

Political Contribution

B.

Full Name (Last, First, Middle Initial)
Joseph Harlan

Mailing Address 2700 Kathwood Court

City State Zip Code
Florence SC 29501

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

Name of Employer Occupation
Pediatrix Medical Group of SC Medical Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
02 / 26 / 2010

Transaction ID: SA11AI.4348

Amount of Each Receipt this Period
400.00

Political Contribution

C.

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 Occupation
Pediatrix Medical Group of WA Neonatologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
MM / DD / YYYY
02 / 26 / 2010

Transaction ID: SA11AI.4350

Amount of Each Receipt this Period
2000.00

Political Contribution

SUBTOTAL of Receipts This Page (optional) ► **2494.08**

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 / 32
	<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"/>	<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) David Kanter	Date of Receipt MM / DD / YYYY 02 / 23 / 2010
	Mailing Address 1 Huntly Drive	Transaction ID: SA11AI.4354
	City State Zip Code Palm Beach Gardens FL 33418	Amount of Each Receipt this Period 3000.00
	FEC ID number of contributing federal political committee. C	Political Contribution
	Name of Employer Occupation Pediatrix Medical Group Medical Director of FL Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00

B.	Full Name (Last, First, Middle Initial) Debra Kaspar	Date of Receipt MM / DD / YYYY 02 / 26 / 2010
	Mailing Address 11224 Handlebar Road	Transaction ID: SA11AI.4356
	City State Zip Code Reston VA 20191	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	Political Contribution
	Name of Employer Occupation Pediatrix Medical Group, Inc. Director of Operations, Central Region Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00

C.	Full Name (Last, First, Middle Initial) Alexander Kenton	Date of Receipt MM / DD / YYYY 02 / 12 / 2010
	Mailing Address 55 Westelm Circle	Transaction ID: SA11AI.4357
	City State Zip Code San Antonio TX 78230	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	Political Contribution
	Name of Employer Occupation Pediatrix Medical Services Inc Neonatologist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00

SUBTOTAL of Receipts This Page (optional)	8200.00
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 16 / 32
(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. Full Name (Last, First, Middle Initial)
Alexander Kenton
 Mailing Address 55 Westelm Circle
 City San Antonio State TX Zip Code 78230
 Date of Receipt 02 / 26 / 2010
Transaction ID: SA11AI.4358
 Amount of Each Receipt this Period 200.00
 Political Contribution
 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 800.00

B. Full Name (Last, First, Middle Initial)
Maria Kong
 Mailing Address 900 Wards Landing SE
 City Winter Haven State FL Zip Code 33880
 Date of Receipt 02 / 26 / 2010
Transaction ID: SA11AI.4360
 Amount of Each Receipt this Period 500.00
 Political Contribution
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Pediatrix Medical Group of FL Occupation: Corporate Medical Director, NICU
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 500.00

C. Full Name (Last, First, Middle Initial)
Meredith Lester
 Mailing Address 3055 NW 126th Avenue Unit 314
 City Sunrise State FL Zip Code 33323
 Date of Receipt 02 / 26 / 2010
Transaction ID: SA11AI.4364
 Amount of Each Receipt this Period 900.00
 Political Contribution
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: MEDNAX Services, Inc. Occupation: Staff Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 900.00

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 17 / 32
	<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.	Full Name (Last, First, Middle Initial) Beverly Gail Lim	Date of Receipt MM / DD / YYYY 02 / 26 / 2010
	Mailing Address 201 NE 4th Street	Transaction ID: SA11AI.4366
	City State Zip Code Boca Raton FL 33432	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. C	Political Contribution
	Name of Employer MEDNAX Services, Inc. Occupation VP Program Development Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00	

B.	Full Name (Last, First, Middle Initial) David Luthy	Date of Receipt MM / DD / YYYY 02 / 26 / 2010
	Mailing Address 4505 NE 33rd St.	Transaction ID: SA11AI.4368
	City State Zip Code Seattle WA 98105	Amount of Each Receipt this Period 4000.00
	FEC ID number of contributing federal political committee. C	Political Contribution
	Name of Employer Obstetrix Medical Group of WA Occupation Medical Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 4000.00	

C.	Full Name (Last, First, Middle Initial) Bruce Manno	Date of Receipt MM / DD / YYYY 02 / 12 / 2010
	Mailing Address 1257 Ginger Circle	Transaction ID: SA11AI.4369
	City State Zip Code Weston FL 33326	Amount of Each Receipt this Period 107.50
	FEC ID number of contributing federal political committee. C	Political Contribution
	Name of Employer MEDNAX Services, Inc. Occupation Dir. Internal Audit Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 322.50	

SUBTOTAL of Receipts This Page (optional)	4507.50
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: (check only one)	PAGE 18 / 32
	<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) Bruce Manno	Date of Receipt MM / DD / YYYY 02 / 26 / 2010
	Mailing Address 1257 Ginger Circle	Transaction ID: SA11AI.4370
	City State Zip Code Weston FL 33326	Amount of Each Receipt this Period 107.50
	FEC ID number of contributing federal political committee. C	Political Contribution
	Name of Employer Occupation MEDNAX Services, Inc. Dir. Internal Audit	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 430.00	

B.	Full Name (Last, First, Middle Initial) Dushan Martinasek	Date of Receipt MM / DD / YYYY 02 / 26 / 2010
	Mailing Address 11411 Carrollwood Drive	Transaction ID: SA11AI.4372
	City State Zip Code Tampa FL 33618	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	Political Contribution
	Name of Employer Occupation Pediatrix Medical Group of FL Neonatologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

C.	Full Name (Last, First, Middle Initial) John McKay	Date of Receipt MM / DD / YYYY 02 / 26 / 2010
	Mailing Address 28 Highfield Court	Transaction ID: SA11AI.4377
	City State Zip Code Greenville SC 29650	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	Political Contribution
	Name of Employer Occupation Pediatrix Medical Group of SC Medical Director - NICU	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional)	▶	4107.50
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 19 / 32
(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)
David Mintz

Mailing Address 2006 Havemeyer Lane

City State Zip Code
Redondo Beach CA 90278

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

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

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 6 / 2 0 1 0

Transaction ID: SA11AI.4381

Amount of Each Receipt this Period
2000.00

Political Contribution

B.

Full Name (Last, First, Middle Initial)
Ricardo Miranda

Mailing Address 1923 S. Utica Avenue

City State Zip Code
Tulsa OK 74104

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

Name of Employer Occupation
Pediatrix Medical Group of OK Neonatologist

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 6 / 2 0 1 0

Transaction ID: SA11AI.4383

Amount of Each Receipt this Period
1000.00

Political Contribution

C.

Full Name (Last, First, Middle Initial)
Thomas J. Monaco, Jr.

Mailing Address 3504 William Pone

City State Zip Code
Raleigh NC 27612

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

Name of Employer Occupation
American Anesthesiology of NC Anesthesiologist

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 6 / 2 0 1 0

Transaction ID: SA11AI.4466

Amount of Each Receipt this Period
1000.00

Political Contribution

SUBTOTAL of Receipts This Page (optional) ► **4000.00**

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 20 / 32
(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) Melissa Montague		Date of Receipt MM / DD / YYYY 02 / 12 / 2010
Mailing Address 6525 Monument Avenue		Transaction ID: SA11AI.4387
City Richmond	State VA	Zip Code 23226
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 95.00
Name of Employer Pediatrix Medical Group, Inc.	Occupation Director of Operations	Political Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.00	

B.

Full Name (Last, First, Middle Initial) Melissa Montague		Date of Receipt MM / DD / YYYY 02 / 26 / 2010
Mailing Address 6525 Monument Avenue		Transaction ID: SA11AI.4388
City Richmond	State VA	Zip Code 23226
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 95.00
Name of Employer Pediatrix Medical Group, Inc.	Occupation Director of Operations	Political Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.00	

C.

Full Name (Last, First, Middle Initial) Thomas P. O'Brien		Date of Receipt MM / DD / YYYY 02 / 26 / 2010
Mailing Address 103 Ridgewood Road		Transaction ID: SA11AI.4390
City Baltimore	State MD	Zip Code 21210
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer Pediatrix of Maryland, P.-A.	Occupation Medical Director	Political Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	5190.00
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 21 / 32
	(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) Kathleen O'Hara	Date of Receipt MM / DD / YYYY 02 / 23 / 2010
	Mailing Address 760 Azalea Court	Transaction ID: SA11AI.4392
	City State Zip Code Plantation FL 33317	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Political Contribution
	Name of Employer Occupation MEDNAX Services, Inc. Manager, Managed Care	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) Olufemi Okanlami	Date of Receipt MM / DD / YYYY 02 / 26 / 2010
	Mailing Address 51310 Shamrock Hills Drive	Transaction ID: SA11AI.4394
	City State Zip Code Granger IN 46530	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Political Contribution
	Name of Employer Occupation Pediatrix Medical Group of IN Medical Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Marta Papp	Date of Receipt MM / DD / YYYY 02 / 26 / 2010
	Mailing Address 1421 Beddington Park	Transaction ID: SA11AI.4396
	City State Zip Code Nashville TN 37315	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Political Contribution
	Name of Employer Occupation Pediatrix Medical Group of TN Neonatologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	2250.00
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 22 / 32

(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)
Darren Patz

Mailing Address 46 NE 100th Street

City State Zip Code
Miami Shores FL 33138

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 ▼ 459.69

Date of Receipt

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

Transaction ID: SA11AI.4397

Amount of Each Receipt this Period

153.23

Political Contribution

B.

Full Name (Last, First, Middle Initial)
Darren Patz

Mailing Address 46 NE 100th Street

City State Zip Code
Miami Shores FL 33138

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 ▼ 612.92

Date of Receipt

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

Transaction ID: SA11AI.4398

Amount of Each Receipt this Period

153.23

Political Contribution

C.

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

Mailing Address 4711 Appletree Drive

City State Zip Code
Roanoke VA 24012

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

Name of Employer Occupation
Pediatrix Medical Group, PC Medical Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

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

Transaction ID: SA11AI.4400

Amount of Each Receipt this Period

1000.00

Political Contribution

SUBTOTAL of Receipts This Page (optional)

1306.46

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 23 / 32
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<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)
Carlos Perez

Mailing Address PO Box 3916

City State Zip Code
Guaynabo PR 00970-3916

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

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

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 5000.00

Date of Receipt
MM / DD / YYYY
02 / 26 / 2010

Transaction ID: SA11AI.4402

Amount of Each Receipt this Period
5000.00

Political Contribution

B.

Full Name (Last, First, Middle Initial)
Jose A. Perez-Diaz

Mailing Address Pine Grove Cond.
Apt. 44-A

City State Zip Code
Isla Verde PR 00979

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

Name of Employer Occupation
Pediatrix Medical Group, S.P. Director of Operations

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00

Date of Receipt
MM / DD / YYYY
02 / 26 / 2010

Transaction ID: SA11AI.4404

Amount of Each Receipt this Period
2000.00

Political Contribution

C.

Full Name (Last, First, Middle Initial)
Mary Poulson

Mailing Address 1954 S. Parfet Drive

City State Zip Code
Lakewood CO 80227

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

Name of Employer Occupation
MEDNAX Services, Inc. Dir Compliance

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 310.95

Date of Receipt
MM / DD / YYYY
02 / 12 / 2010

Transaction ID: SA11AI.4407

Amount of Each Receipt this Period
103.65

Political Contribution

SUBTOTAL of Receipts This Page (optional) ► **7103.65**

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 24 / 32
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<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) Mary Poulson		Date of Receipt
	Mailing Address 1954 S. Parfet Drive		<input type="text" value="02"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Lakewood	CO	80227
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4408
Name of Employer MEDNAX Services, Inc.		Occupation Dir Compliance	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="103.65"/>
		<input type="text" value="414.60"/>	Political Contribution

B.	Full Name (Last, First, Middle Initial) Richard Powers		Date of Receipt
	Mailing Address 110 Gemini Ct.		<input type="text" value="02"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Los Gatos	CA	95032
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4410
Name of Employer Pediatrix Medical Group of CA		Occupation Medical Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="2600.00"/>
		<input type="text" value="2600.00"/>	Political Contribution

C.	Full Name (Last, First, Middle Initial) John Prueitt		Date of Receipt
	Mailing Address 8500 54th Avenue NE		<input type="text" value="02"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Seattle	WA	98115
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4412
Name of Employer Pediatrix Medical Group, Inc.		Occupation Director of Operations	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="416.66"/>
		<input type="text" value="833.32"/>	Political Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="3120.31"/>
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 25 / 32
(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) Carey Purre		Date of Receipt MM / DD / YYYY 02 / 26 / 2010
Mailing Address 3603 NW 23 Terrace		Transaction ID: SA11AI.4414
City Boca Raton	State FL	Zip Code 33431
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
Name of Employer MEDNAX, Inc.	Occupation Director Recruiting	Political Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

B.

Full Name (Last, First, Middle Initial) Linda Sacks		Date of Receipt MM / DD / YYYY 02 / 12 / 2010
Mailing Address 406 Wheaton Street		Transaction ID: SA11AI.4421
City Savannah	State GA	Zip Code 31405
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Magella Med. Assoc. of GA	Occupation Medical Director	Political Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C.

Full Name (Last, First, Middle Initial) Linda Sacks		Date of Receipt MM / DD / YYYY 02 / 26 / 2010
Mailing Address 406 Wheaton Street		Transaction ID: SA11AI.4422
City Savannah	State GA	Zip Code 31405
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Magella Med. Assoc. of GA	Occupation Medical Director	Political Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

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: PAGE 26 / 32
(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)
Robert Seymour, III

Mailing Address 1173 Crabtree Crossing Parkway

City State Zip Code
Morrisville NC 27560

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 ▼ 500.00

Date of Receipt: 02 / 26 / 2010
Transaction ID: SA11AI.4427

Amount of Each Receipt this Period: 500.00

Political Contribution

B. Full Name (Last, First, Middle Initial)
Kenneth M. Shaffer

Mailing Address 1622 Resaca Blvd.

City State Zip Code
Arstia TX 78738

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

Name of Employer Pediatrix Medical Services Inc Occupation Medical Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt: 02 / 26 / 2010
Transaction ID: SA11AI.4429

Amount of Each Receipt this Period: 3000.00

Political Contribution

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

Mailing Address 1923 S. Utica Avenue

City State Zip Code
Tulsa OK 74104

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

Name of Employer Pediatrix Medical Group of OK Occupation Medical Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 02 / 26 / 2010
Transaction ID: SA11AI.4432

Amount of Each Receipt this Period: 1000.00

Political Contribution

SUBTOTAL of Receipts This Page (optional) ► **4500.00**

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 27 / 32
	<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.	Full Name (Last, First, Middle Initial) Melinda Slack-Hendrix	Date of Receipt MM / DD / YYYY 02 / 26 / 2010
	Mailing Address 5822 East Spring Drive	Transaction ID: SA11AI.4436
	City State Zip Code Springfield MO 65809	Amount of Each Receipt this Period 1642.63
	FEC ID number of contributing federal political committee. C	Political Contribution
	Name of Employer Occupation Ozark Neonatal Associates, Inc. Medical Director, NICU Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1642.63	

B.	Full Name (Last, First, Middle Initial) Brenda Sommer	Date of Receipt MM / DD / YYYY 02 / 26 / 2010
	Mailing Address 4871 Acorn Drive	Transaction ID: SA11AI.4438
	City State Zip Code Boca Raton FL 33487	Amount of Each Receipt this Period 56.54
	FEC ID number of contributing federal political committee. C	Political Contribution
	Name of Employer Occupation Pediatrix Medical Group, Inc. Clin Mgr, Chart Abstractor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 226.16	

C.	Full Name (Last, First, Middle Initial) Teresa Spence	Date of Receipt MM / DD / YYYY 02 / 12 / 2010
	Mailing Address 148 N. Cleveland Street	Transaction ID: SA11AI.4441
	City State Zip Code Orange CA 92866	Amount of Each Receipt this Period 94.47
	FEC ID number of contributing federal political committee. C	Political Contribution
	Name of Employer Occupation Pediatrix Medical Group, Inc. Reg Mgr Man Care Cont-15 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 283.41	

SUBTOTAL of Receipts This Page (optional)	1793.64
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: PAGE 28 / 32
(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. Full Name (Last, First, Middle Initial)
Teresa Spence

Mailing Address 148 N. Cleveland Street

City State Zip Code
Orange CA 92866

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

Name of Employer: Pediatrix Medical Group, Inc.
Occupation: Reg Mgr Man Care Cont-15

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 377.88

Date of Receipt: 02 / 26 / 2010
Transaction ID: SA11AI.4442
 Amount of Each Receipt this Period: 94.47
 Political Contribution

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

Mailing Address 272 NW 97th Avenue

City State Zip Code
Plantation FL 33324

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

Name of Employer: MEDNAX Services, Inc.
Occupation: VP Advance Practitioners

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 02 / 26 / 2010
Transaction ID: SA11AI.4444
 Amount of Each Receipt this Period: 400.00
 Political Contribution

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

Mailing Address 275 NE Olive Way

City State Zip Code
Boca Raton FL 33432

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

Name of Employer: MEDNAX Services, Inc.
Occupation: Director Technical Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 02 / 12 / 2010
Transaction ID: SA11AI.4445
 Amount of Each Receipt this Period: 150.00
 Political Contribution

SUBTOTAL of Receipts This Page (optional) ► **644.47**

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 29 / 32
(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)
Paul Stern

Mailing Address 275 NE Olive Way

City State Zip Code
Boca Raton FL 33432

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

Name of Employer Occupation
MEDNAX Services, Inc. Director Technical Services

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
MM / DD / YYYY
02 / 26 / 2010

Transaction ID: SA11AI.4446

Amount of Each Receipt this Period
150.00

Political Contribution

B.

Full Name (Last, First, Middle Initial)
Kenneth Tan

Mailing Address 15680 Shannon Heights Road

City State Zip Code
Los Gatos CA 95032

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

Name of Employer Occupation
Pediatrix Medical Group of CA Medical Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
02 / 26 / 2010

Transaction ID: SA11AI.4448

Amount of Each Receipt this Period
1000.00

Political Contribution

C.

Full Name (Last, First, Middle Initial)
Sandy Tarant

Mailing Address 2710 Aylesford Dr.

City State Zip Code
Midlothian VA 23112

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

Name of Employer Occupation
Pediatrix Medical Group, PC Corporate Medical Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt
MM / DD / YYYY
02 / 26 / 2010

Transaction ID: SA11AI.4449

Amount of Each Receipt this Period
400.00

Political Contribution

SUBTOTAL of Receipts This Page (optional) ► **1550.00**

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 30 / 32
(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)
Susan Townsend

Mailing Address 5450 S. Autumn Ct.

City Greenwood Village State CO Zip Code 80111

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

Name of Employer: Pediatrix Medical Group of CO
Occupation: Medical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 02 / 26 / 2010
Transaction ID: SA11AI.4451
Amount of Each Receipt this Period: 1000.00
Political Contribution

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

Mailing Address 3765 NE 209 Terrace

City Aventura State FL Zip Code 33180

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

Name of Employer: Pediatrix Medical Group of FL
Occupation: Neonatologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 02 / 26 / 2010
Transaction ID: SA11AI.4455
Amount of Each Receipt this Period: 750.00
Political Contribution

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

Mailing Address 11609 S. Hudson Ct.

City Tulsa State OK Zip Code 74137

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

Name of Employer: Pediatrix Medical Group of OK
Occupation: Neonatologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 02 / 26 / 2010
Transaction ID: SA11AI.4457
Amount of Each Receipt this Period: 1000.00
Political Contribution

SUBTOTAL of Receipts This Page (optional) ► 2750.00

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 / 32
	<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) Charlene Warren	Date of Receipt MM / DD / YYYY 02 / 26 / 2010
	Mailing Address 12761 SW 26 Street	Transaction ID: SA11AI.4461
	City State Zip Code Davie FL 33325	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	Political Contribution
	Name of Employer Occupation MEDNAX Services, Inc. VP Risk Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

B.	Full Name (Last, First, Middle Initial) Lee Wood	Date of Receipt MM / DD / YYYY 02 / 26 / 2010
	Mailing Address 425 N. Andrews Avenue #301	Transaction ID: SA11AI.4463
	City State Zip Code Ft. Lauderdale FL 33301	Amount of Each Receipt this Period 1500.00
	FEC ID number of contributing federal political committee. C	Political Contribution
	Name of Employer Occupation Pediatrix Medical Group, Inc. Director of Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

C.	Full Name (Last, First, Middle Initial) Terrance Zuerlein	Date of Receipt MM / DD / YYYY 02 / 26 / 2010
	Mailing Address 21 Fontenay Circle	Transaction ID: SA11AI.4465
	City State Zip Code Little Rock AR 72223	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	Political Contribution
	Name of Employer Occupation Pediatrix Medical Group of AK Neonatologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional)	8500.00
TOTAL This Period (last page this line number only)	103898.35

**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

A.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: SB21B.4467 Date of Disbursement 02 / 10 / 2010
	Mailing Address 600 Peachtree Street	Amount of Each Disbursement this Period 124.60
	City Atlanta State GA Zip Code 30308	
	Purpose of Disbursement Bank Fee Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: SB21B.4468 Date of Disbursement 02 / 10 / 2010
	Mailing Address 600 Peachtree Street	Amount of Each Disbursement this Period 92.21
	City Atlanta State GA Zip Code 30308	
	Purpose of Disbursement Bank Fee Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: SB21B.4469 Date of Disbursement 02 / 12 / 2010
	Mailing Address 600 Peachtree Street	Amount of Each Disbursement this Period 62.90
	City Atlanta State GA Zip Code 30308	
	Purpose of Disbursement Bank Fee Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	279.71
TOTAL This Period (last page this line number only)	▶	279.71