

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 1445 Ross Avenue Suite 1400 Dallas TX 75202-2703 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00119354 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X] NEW (N) [] 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 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER) (b) Monthly Report Due On: Feb 20 (M2) Mar 20 (M3) Apr 20 (M4) May 20 (M5) Jun 20 (M6) Jul 20 (M7) Aug 20 (M8) Sep 20 (M9) Oct 20 (M10) Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE) (c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S) Election on M M / D D / Y Y Y Y Y Y in the State of (d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period 02 / 01 / 2018 through 02 / 28 / 2018

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Plott, Todd, Mr., Type or Print Name of Treasurer

Signature of Treasurer Plott, Todd, Mr., [Electronically Filed] Date 03 / 02 / 2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

TENET HEALTHCARE CORPORATION 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="2018"/>	<input type="text" value="150538.57"/>	<input type="text" value="150538.57"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="128500.45"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="9279.88"/>	<input type="text" value="19741.76"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="137780.33"/>	<input type="text" value="170280.33"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="29000.00"/>	<input type="text" value="61500.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="108780.33"/>	<input type="text" value="108780.33"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

Write or Type Committee Name

TENET HEALTHCARE CORPORATION 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).....	2408.00	3509.00
(ii) Unitemized	6871.88	16232.76
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	9279.88	19741.76
(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)	9279.88	19741.76
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 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)).....▶	9279.88	19741.76
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	9279.88	19741.76

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	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	19000.00	51500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	10000.00	10000.00
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	29000.00	61500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	29000.00	61500.00

DETAILED SUMMARY PAGE
of Disbursements

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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)	9279.88	19741.76
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	9279.88	19741.76
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

**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 6 OF 18
	<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)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. ANDREWS, AUDREY, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 702 Penfolds Ln
 City Coppel State TX Zip Code 75019-4544
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Tenet Healthcare Occupation (for Individual) SVP, General Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 768.00

Date of Receipt 02 / 17 / 2018
Transaction ID : A08BC4FEA91AC4371B7D
 Amount of Each Receipt this Period 384.00
 Memo Item
 Payroll Deduction: \$192.00/Bi-Weekly

B. PITTS, KEITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4441 S Versailles Ave
 City Dallas State TX Zip Code 75205-3012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Tenet Healthcare Occupation (for Individual) VICE CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 768.00

Date of Receipt 02 / 17 / 2018
Transaction ID : A6CF647E5B5E3418CA53
 Amount of Each Receipt this Period 384.00
 Memo Item
 Payroll Deduction: \$192.00/Bi-Weekly

C. BAILEY, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 Burton Hills Blvd
 City Nashville State TN Zip Code 37215-6197
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Tenet Healthcare Occupation (for Individual) VP, Ops Reimbursement
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 384.00

Date of Receipt 02 / 17 / 2018
Transaction ID : A5DDE8304D02941A5A21
 Amount of Each Receipt this Period 192.00
 Memo Item
 Payroll Deduction: \$96.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	960.00
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 7 OF 18
	<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)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. MOONEY, STEPHEN, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11549 Cromwell Cir
 City Dallas State TX Zip Code 75229-2533
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Tenet Patient Financial Services Occupation (for Individual) PRESIDENT, CONIFER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 384.00

Date of Receipt 02 / 17 / 2018
Transaction ID : A64F2EE0872C446C09A2
 Amount of Each Receipt this Period 192.00
 Memo Item
 Payroll Deduction: \$96.00/Bi-Weekly

B. DAVIS, PAMELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5760 Daniel Rd
 City Plano State TX Zip Code 75024-4224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Tenet Patient Financial Services Occupation (for Individual) Sr Director, AR Management Ops
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 288.00

Date of Receipt 02 / 03 / 2018
Transaction ID : A6A0123C86F2040AC8B6
 Amount of Each Receipt this Period 96.00
 Memo Item
 Payroll Deduction: \$96.00/Bi-Weekly

C. CROCKER, LERRYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2386 Liledoun Rd
 City Taylorsville State NC Zip Code 28681-8892
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FRYE REGIONAL MEDICAL CENTER Occupation (for Individual) CNO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 384.00

Date of Receipt 02 / 17 / 2018
Transaction ID : A8D337F064C384BCF8F0
 Amount of Each Receipt this Period 192.00
 Memo Item
 Payroll Deduction: \$96.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	480.00
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 18
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. DAVISON, COREY, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1224 Blairwood Dr
 City Flower Mound State TX Zip Code 75028-8910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Tenet Healthcare Occupation (for Individual) VP, GOVERNMENT RELATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 384.00

Date of Receipt 02 / 17 / 2018
Transaction ID : AA6C8F386DAFF45B48A7
 Amount of Each Receipt this Period 192.00
 Memo Item
 Payroll Deduction: \$96.00/Bi-Weekly

B. HONTS, JR., GARY, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 78795 Saint Thomas Dr
 City Bermuda Dunes State CA Zip Code 92203-1330
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) John F Kennedy Memorial Hospital Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 02 / 17 / 2018
Transaction ID : A976B016A1F184F5B9D4
 Amount of Each Receipt this Period 200.00
 Memo Item
 Payroll Deduction: \$100.00/Bi-Weekly

C. BEITER, AMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1601 W Saint Marys Rd
 City Tucson State AZ Zip Code 85745-2623
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Carondelet St Marys Hospital Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 384.00

Date of Receipt 02 / 17 / 2018
Transaction ID : AF0B7DDAC348F4328B5E
 Amount of Each Receipt this Period 192.00
 Memo Item
 Payroll Deduction: \$96.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	584.00
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 9 OF 18
<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)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. WALDMANN, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1111 N Montclair Ave
 City Dallas State TX Zip Code 75208-3520
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Tenet Healthcare Occupation (for Individual) SVP, Public Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 384.00

Date of Receipt 02 / 17 / 2018
Transaction ID : A3112D859AC254A01869
 Amount of Each Receipt this Period 192.00
 Memo Item
 Payroll Deduction: \$96.00/Bi-Weekly

B. BRASHEAR, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3560 Dallas Pkwy
 City Frisco State TX Zip Code 75034-8635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Tenet Patient Financial Services Occupation (for Individual) SVP, General Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 384.00

Date of Receipt 02 / 17 / 2018
Transaction ID : A7A7295ECD12B42DF99E
 Amount of Each Receipt this Period 192.00
 Memo Item
 Payroll Deduction: \$96.00/Bi-Weekly

C.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼

Date of Receipt
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	384.00
TOTAL This Period (last page this line number only).....	2408.00

**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"/> 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)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Friends of Jim Clyburn

Mailing Address PO Box 12567

City: Columbia State: SC Zip Code: 29211-2567

Purpose of Disbursement: Political Contribution

Candidate Name: **Clyburn, James, E., Rep.,**

Office Sought: House Senate President
 Disbursement For: 2018 Primary General Other (specify) ▼
 State: SC District: 06

Date of Disbursement

MM / DD / YYYY
02 / 06 / 2018

FEC Identification Number

C H2SC02042

Transaction ID : B109548C73C

Amount of Each Disbursement this Period

4000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. RALPH NORMAN FOR CONGRESS

Mailing Address PO BOX 36973

City: ROCK HILL State: SC Zip Code: 29732

Purpose of Disbursement: Political Contribution

Candidate Name: **Norman, Ralph, W., Rep., Jr.**

Office Sought: House Senate President
 Disbursement For: 2018 Primary General Other (specify) ▼
 State: SC District: 05

Date of Disbursement

MM / DD / YYYY
02 / 13 / 2018

FEC Identification Number

C C00633610

Transaction ID : BE13B5A27F:

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. LEA MARQUEZ PETERSON FOR CONGRESS

Mailing Address PO BOX 40935

City: Tucson State: AZ Zip Code: 85717-0935

Purpose of Disbursement: Political Contribution

Candidate Name: **Lea, Marquez, Peterson, ,**

Office Sought: House Senate President
 Disbursement For: 2018 Primary General Other (specify) ▼
 State: AZ District: 02

Date of Disbursement

MM / DD / YYYY
02 / 13 / 2018

FEC Identification Number

C C00663054

Transaction ID : BF0B8F24DC

Amount of Each Disbursement this Period

1500.00

Memo Item

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

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

6500.00

**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"/> 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)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. FILEMON VELA FOR CONGRESS

Mailing Address 10715 GULFDALE ST
STE 235

City San Antonio State TX Zip Code 78216-3666

Purpose of Disbursement
Political Contribution

Candidate Name

Vela, Filemon, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: TX District: 34

Date of Disbursement

MM / DD / YYYY
02 / 16 / 2018

FEC Identification Number

C C00513531

Transaction ID : BD2B15C8A3

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. National Republican Congressional Committee (NRCC)

Mailing Address 320 First Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) Other

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 13 / 2018

FEC Identification Number

C

Transaction ID : B3A086EDD3

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. KAINE VICTORY FUND

Mailing Address 1751 POTOMAC GREENS DR

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
Political Contribution

Candidate Name

KAINE VICTORY FUND

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) Other

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 13 / 2018

FEC Identification Number

C C00629378

Transaction ID : BAD8331889

Amount of Each Disbursement this Period

5000.00

Memo Item

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

12500.00

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

19000.00

**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"/> 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)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Cindy Burkett Campaign

Mailing Address P.O. Box 850975

City
Mesquite

State
TX

Zip Code
75185-0975

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 16 / 2018

FEC Identification Number

C
Transaction ID : B57D8887C8:
Amount of Each Disbursement this Period
500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Charlie Geren Campaign

Mailing Address P.O. Box 1440

City
Fort Worth

State
TX

Zip Code
76101-1440

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 16 / 2018

FEC Identification Number

C
Transaction ID : B986204AF7E
Amount of Each Disbursement this Period
500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. JD Sheffield, DO, Campaign

Mailing Address P.O. Box 1072

City
Gatesville

State
TX

Zip Code
76528-6072

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 16 / 2018

FEC Identification Number

C
Transaction ID : BB827FCC14
Amount of Each Disbursement this Period
250.00

Memo Item

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

1250.00

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 type="checkbox"/> 23	<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)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Armando Walle Campaign

Mailing Address 2907 Travick Lane

City
Houston

State
TX

Zip Code
77073-2920

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 16 / 2018

FEC Identification Number

C
Transaction ID : BF02426CFC
Amount of Each Disbursement this Period
250.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Trent Ashby Campaign

Mailing Address PO Box 412

City
Lufkin

State
TX

Zip Code
75902-0412

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 16 / 2018

FEC Identification Number

C
Transaction ID : B55922ACF51
Amount of Each Disbursement this Period
250.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Trey Martinez Fisher Campaign

Mailing Address 115 East Travis Street
Suite 1235

City
San Antonio

State
TX

Zip Code
78205-1734

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 16 / 2018

FEC Identification Number

C
Transaction ID : BD95C0FBC:
Amount of Each Disbursement this Period
250.00

Memo Item

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

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

750.00

**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"/> 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)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Sarah Davis for State Representative

Mailing Address 4203 Tennyson St.

City
Houston

State
TX

Zip Code
77005-2751

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 16 / 2018

FEC Identification Number

C
Transaction ID : B23068CA06
Amount of Each Disbursement this Period
1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Kirk Watson Campaign

Mailing Address P.O.Box 2004

City
Austin

State
TX

Zip Code
78768-2004

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 16 / 2018

FEC Identification Number

C
Transaction ID : B01A5AAF70
Amount of Each Disbursement this Period
500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Richard Raymond Campaign

Mailing Address P.O. Box 450349

City
Laredo

State
TX

Zip Code
78045-0008

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 16 / 2018

FEC Identification Number

C
Transaction ID : BE03B58353
Amount of Each Disbursement this Period
500.00

Memo Item

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

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

2000.00

**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"/> 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)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. Jessica Farrar Campaign

Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 30099

City Houston State TX Zip Code 77249-0099

Purpose of Disbursement Political Contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2018
 Primary General
 Other (specify) ▼

Date of Disbursement: 02 / 16 / 2018

FEC Identification Number: C
Transaction ID : BDE57A99EA
Amount of Each Disbursement this Period: 250.00

Memo Item

B. Justin Rodriguez Campaign

Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 100153

City San Antonio State TX Zip Code 78201-1079

Purpose of Disbursement Political Contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2018
 Primary General
 Other (specify) ▼

Date of Disbursement: 02 / 16 / 2018

FEC Identification Number: C
Transaction ID : BA99B61681f
Amount of Each Disbursement this Period: 250.00

Memo Item

C. Gene Wu Campaign

Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 742442

City Houston State TX Zip Code 77274-2442

Purpose of Disbursement Political Contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2018
 Primary General
 Other (specify) ▼

Date of Disbursement: 02 / 16 / 2018

FEC Identification Number: C
Transaction ID : B761D978DF
Amount of Each Disbursement this Period: 250.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 750.00

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 type="checkbox"/> 23	<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)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Four Price Campaign

Mailing Address P.O. Box 1749

City
Amarillo

State
TX

Zip Code
79105-1749

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 16 / 2018

FEC Identification Number

C []

Transaction ID : BA5AF98FAF

Amount of Each Disbursement this Period

[] 1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Drew Darby Campaign

Mailing Address P.O. Box 3284

City
San Angelo

State
TX

Zip Code
76902-3284

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 16 / 2018

FEC Identification Number

C []

Transaction ID : BE0819BF32f

Amount of Each Disbursement this Period

[] 250.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Donna Howard Campaign

Mailing Address P.O. Box 5375

City
Austin

State
TX

Zip Code
78763-5375

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 16 / 2018

FEC Identification Number

C []

Transaction ID : B915699D38f

Amount of Each Disbursement this Period

[] 250.00

Memo Item

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

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

[] 1500.00

[]

**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"/> 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)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Texans for Kelly Hancock

Mailing Address P.O. Box 821349

City
North Richland Hills

State
TX

Zip Code
76182-1349

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 16 / 2018

FEC Identification Number

C

Transaction ID : B77C2284D3I

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Texans for Chris Paddie

Mailing Address P.O. Box 8259

City
Marshall

State
TX

Zip Code
75671-8259

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 16 / 2018

FEC Identification Number

C

Transaction ID : B4B250665E/

Amount of Each Disbursement this Period

250.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Texans for Charles Schwertner

Mailing Address PO Box 2448

City
Georgetown

State
TX

Zip Code
78627-2448

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 16 / 2018

FEC Identification Number

C

Transaction ID : B906B886A2

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

1750.00

**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"/> 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)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Texas House Leadership Fund

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2018

Mailing Address 1108 Lavaca
Suite 110-262

City Austin State TX Zip Code 78701-2172

Purpose of Disbursement
Political Contribution

FEC Identification Number

C

Transaction ID : BAFF768488

Amount of Each Disbursement this Period

2000.00

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: 2018
 Primary General
 Other (specify) Other

Memo Item

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City State Zip Code

Purpose of Disbursement

FEC Identification Number

C

Amount of Each Disbursement this Period

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For:
 Primary General
 Other (specify)

Memo Item

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City State Zip Code

Purpose of Disbursement

FEC Identification Number

C

Amount of Each Disbursement this Period

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For:
 Primary General
 Other (specify)

Memo Item

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

2000.00

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

10000.00