

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 20 OF 27 |
| | <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)
I-VOTE Health of IASIS Healthcare Corporation Political Action Committee

A. Jared Spackman
Full Name (Last, First, Middle Initial)

Mailing Address 3717 W 12180 S

City Riverton State UT Zip Code 84065-7644

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

Name of Employer IASIS Occupation CFO, Davis Hospital

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 15 / 2013
Transaction ID : 4758148

Amount of Each Receipt this Period
 300.00

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

Mailing Address 181 Brightwater Dr, #5

City Clearwater State FL Zip Code 33767-2447

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

Name of Employer IASIS Occupation CEO, PGF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 15 / 2013
Transaction ID : 4758149

Amount of Each Receipt this Period
 500.00

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

Mailing Address 9 Cooper Road

City Scarsdale State NY Zip Code 10583-2801

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

Name of Employer Trimaran Capital Partners Occupation Managing Partner (IASIS BOD Member)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 15 / 2013
Transaction ID : 4758150

Amount of Each Receipt this Period
 3000.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 3800.00 |
| TOTAL This Period (last page this line number only).....▶ | |