

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
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 13737 Noel Road, Suite 100
Check if different than previously reported. (ACC) Dallas TX 75240

2. **FEC IDENTIFICATION NUMBER** C00119354
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 2009 through 02 28 2009

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 Todd Plott
Signature of Treasurer Electronically Filed by Todd Plott Date 03 18 2009

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
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		24897.12
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	31190.90									
(c) Total Receipts (from Line 19)	4182.52	10476.30								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	35373.42	35373.42								
7. Total Disbursements (from Line 31)	8500.00	8500.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	26873.42	26873.42								
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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	0	9

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	1436.00	3140.00
(i) Itemized (use Schedule A)	2746.52	7336.30
(ii) Unitemized	4182.52	10476.30
(iii) TOTAL (add Lines 11(a)(i) and (ii)	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	4182.52	10476.30
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))	4182.52	10476.30
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	4182.52	10476.30

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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.....	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.....	8500.00	8500.00
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))..	8500.00	8500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8500.00	8500.00

DETAILED SUMMARY PAGE
of Disbursements

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	4182.52	10476.30
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4182.52	10476.30
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 / 10
	<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	

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.	Full Name (Last, First, Middle Initial) DANIEL WALDMANN	Date of Receipt MM / DD / YYYY 02 / 28 / 2009
	Mailing Address 2001 19TH STREET NW #5	Transaction ID: PR1814798521536
	City State Zip Code WASHINGTON DC 20009-1346	Amount of Each Receipt this Period 160.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$80.00 Bi-Weekly)
Name of Employer TENET HEALTHCARE CORPORATION	Occupation VP	
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) ROBERT J CUNNAH	Date of Receipt MM / DD / YYYY 02 / 28 / 2009
	Mailing Address 163 VILLAGIO WEST	Transaction ID: PR2174361621536
	City State Zip Code PALM SPRINGS CA 92262-6395	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$50.00 Bi-Weekly)
Name of Employer DESERT REGIONAL MEDICAL CENTER	Occupation CMO	
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) JEFFERY FLOCKEN	Date of Receipt MM / DD / YYYY 02 / 28 / 2009
	Mailing Address 27 NEW DAWN	Transaction ID: PR2174567321536
	City State Zip Code IRVINE CA 92620-1976	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$100.00 Bi-Weekly)
Name of Employer TENET HEALTHCARE CORPORATION	Occupation SVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	460.00
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 / 10
	<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)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) STEVE BROWN	Date of Receipt MM / DD / YYYY 02 / 28 / 2009
	Mailing Address 16 SARAH NASH CT	Transaction ID: PR407210621536
	City State Zip Code DALLAS TX 75225-2072	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation TENET HEALTHCARE CORPORAT-ION EVP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00 P/R Deduction (\$100.00 Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) ROBERT S HENDLER	Date of Receipt MM / DD / YYYY 02 / 28 / 2009
	Mailing Address 11122 W RICKS CIRCLE	Transaction ID: PR407222821536
	City State Zip Code DALLAS TX 75230-3032	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation TENET HEALTHCARE CORPORAT-ION REGIONAL CMO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00 P/R Deduction (\$50.00 Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) JOHN F HOLLAND	Date of Receipt MM / DD / YYYY 02 / 28 / 2009
	Mailing Address 3610 EDGEWATER STREET	Transaction ID: PR407242921536
	City State Zip Code DALLAS TX 75205-4317	Amount of Each Receipt this Period 192.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation TENET HEALTHCARE CORPORAT-ION SVP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00 P/R Deduction (\$96.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	492.00
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 / 10
(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)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
STEPHEN L NEWMAN MD

Mailing Address 11034 TIBBS STREET

City State Zip Code
DALLAS TX 75230-3450

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

Name of Employer Occupation
TENET HEALTHCARE CORPORAT- CHIEF OPERATING OFFICER
ION

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 960.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 8 / 2 0 0 9

Transaction ID: PR407257721536

Amount of Each Receipt this Period
384.00

P/R Deduction (\$192.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
PATRICIA L BRAINERD

Mailing Address 5412 GLENSHIRE DR

City State Zip Code
PLANO TX 75093-2800

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

Name of Employer Occupation
TENET HEALTHCARE CORPORAT- SR DIR
ION

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 8 / 2 0 0 9

Transaction ID: PR844644421536

Amount of Each Receipt this Period
100.00

P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	▶	484.00
TOTAL This Period (last page this line number only)	▶	1436.00

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

A.	Full Name (Last, First, Middle Initial) Friends of Jeb Hensarling Mailing Address PO Box 820504 City Dallas State TX Zip Code 75382 Purpose of Disbursement Jeb Hensarling, US Rep 5th TX Candidate Name Jeb Hensarling Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 05 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 29404311 Date of Disbursement 02 / 14 / 2009 Amount of Each Disbursement this Period 1000.00 Jeb Hensarling, US Rep 5th TX
B.	Full Name (Last, First, Middle Initial) Salazar for Senate Mailing Address PO Box 600 City Denver State CO Zip Code 80201 Purpose of Disbursement Void - Salazar for Senate / 1/20/09 confirmed as US Sec. of the Interior & resigned Senate seat Candidate Name Ken Salazar Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 29411757 Date of Disbursement 02 / 18 / 2009 Amount of Each Disbursement this Period -1000.00 Void - Salazar for Senate / 1/20/09 confirmed as US Sec. of the Interior & resigned Senate seat
C.	Full Name (Last, First, Middle Initial) Congressman Waxman Campaign Committee Mailing Address 6380 Wilshire Blvd. Suite 1612 City Los Angeles State CA Zip Code 90048 Purpose of Disbursement Henry Waxman, US Representative 30 CA Candidate Name Henry Waxman Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 30 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 29420202 Date of Disbursement 02 / 20 / 2009 Amount of Each Disbursement this Period 2500.00 Henry Waxman, US Representative 30 CA

SUBTOTAL of Disbursements This Page (optional) ▶

2500.00

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 checked="" 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)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Friends For Harry Reid	Transaction ID: 29420213 Date of Disbursement 02 / 20 / 2009
	Mailing Address PO Box 19163	Amount of Each Disbursement this Period 2500.00
	City Las Vegas State NV Zip Code 89132	
	Purpose of Disbursement Harry Reid, US Senate NV Candidate Name Sen. Harry Reid Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NV District:	011 Category/ Type Harry Reid, US Senate NV

B.	Full Name (Last, First, Middle Initial) Friends of Baucus	Transaction ID: 29420241 Date of Disbursement 02 / 20 / 2009
	Mailing Address PO Box 586	Amount of Each Disbursement this Period 2500.00
	City Helena State MT Zip Code 59624	
	Purpose of Disbursement Max Baucus, US Senate SH-511 MT Candidate Name Max Baucus Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MT District:	011 Category/ Type Max Baucus, US Senate SH-511 MT

C.	Full Name (Last, First, Middle Initial) Friends of Dennis Cardoza	Transaction ID: 29420269 Date of Disbursement 02 / 20 / 2009
	Mailing Address PO Box 2749	Amount of Each Disbursement this Period 1000.00
	City Merced State CA Zip Code 95340	
	Purpose of Disbursement Dennis Cardoza, US Representative 18 CA Candidate Name Dennis Cardoza Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CA District: 18	011 Category/ Type Dennis Cardoza, US Representative 18 CA

SUBTOTAL of Disbursements This Page (optional)	6000.00
TOTAL This Period (last page this line number only)	8500.00