

**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 29 OF 83
<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. Roger Mack Hinson MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 8320 84th Avenue SE
 City Mercer Island State WA Zip Code 98040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pediatrix Medical Group of Washington, Corp Med Director NICU
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 02 / 28 / 2013
Transaction ID : A9D061AF58ADC48E9957
 Amount of Each Receipt this Period
 5000.00
 Payroll Deduction

B. Patrick J Hodges MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 5205 Green Falls Ct
 City Austin State TX Zip Code 78746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pediatrix Medical Services, Inc. Neonatologist
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 02 / 28 / 2013
Transaction ID : A1392C7C17F0B46DD9F7
 Amount of Each Receipt this Period
 300.00
 Payroll Deduction

C. Ayne K Iafolla MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 14220 Cervantes Avenue
 City Darnestown State MD Zip Code 20874
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pediatrix of Maryland, P.A. Corp Med Director NICU
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 02 / 28 / 2013
Transaction ID : A17924DD6BED94519A11
 Amount of Each Receipt this Period
 150.00
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....	5450.00
TOTAL This Period (last page this line number only).....	