

Franklin, Brylon

From: Catherine Crane <Catherine.Crane@aristotle.com>
Sent: Monday, June 05, 2017 9:11 AM
To: Franklin, Brylon
Cc: Outsourcing
Subject: Tenet Healthcare Corporation Political Action Committee (FEC ID #C00119354) June FEC Report Disclosing Dallas City Council Contributions
Attachments: 05 2017 Tenet FEC Report.pdf

Greetings Brylon,

Please find attached Tenet's June FEC Report, disclosing 3 Dallas City Council contributions made in May.

Please let me know if you have any questions,

Catherine Crane, Esq.
 Manager, Political Compliance
 Aristotle
 OFFICE (202) 543-8345 x1286
 205 Pennsylvania Avenue, SE
 Washington, DC 20003

A R I S T O T L E
TECHNOLOGY

2017 JUN 5 AM 9:15
 RECEIVED
 CITY SECRETARY
 DALLAS, TEXAS

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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED

2017 JUN -5 AM 9:16

Office Use Only

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

12FE4M5

ADDRESS (number and street) 1445 Ross Avenue Suite 1400 Dallas TX 75202-2703

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, July 15, October 15, January 31, July 31, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 05 / 01 / 2017 through 05 / 31 / 2017

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 Plott, Todd, Mr.

Signature of Treasurer Plott, Todd, Mr. Date 06 / 01 / 2017

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

Table with 7 columns and 1 row for Office Use Only.

FEC FORM 3X Rev. 05/2016

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

MM / DD / YYYY
05 / 01 / 2017

To:

MM / DD / YYYY
05 / 31 / 2017

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, YYYYYY 2017		123816.44
(b) Cash on Hand at Beginning of Reporting Period.....	130232.98	
(c) Total Receipts (from Line 19).....	17151.62	74592.16
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	147384.60	198408.60
7. Total Disbursements (from Line 31).....	12000.00	63024.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	135384.60	135384.60
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

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Report Covering the Period: From: MM / DD / YYYY 05 / 01 / 2017 To: MM / DD / YYYY 05 / 31 / 2017

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).....	13894.94	40216.29
(ii) Unitemized	3256.68	34375.87
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	17151.62	74592.16
(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).....▶	17151.62	74592.16
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)).....▶	17151.62	74592.16
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	17151.62	74592.16

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

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	7500.00	58500.00
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	24.00
(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	24.00
29. Other Disbursements (Including Non-Federal Donations)	4500.00	4500.00
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)) ..	12000.00	63024.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	12000.00	63024.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	17151.62	74592.16
34. Total Contribution Refunds (from Line 28(d))	0.00	24.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	17151.62	74568.16
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 53
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <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. CASTRO, DAWN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15408 Fox Meadow Ln
 City Frisco State TX Zip Code 75035-3671
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Tenet Patient Financial Services Occupation (for Individual) VP, CLIENT DELIVERY
 Receipt For:
 Primary General
 Other (specify) Aggregate Year-to-Date **429.00**

Date of Receipt
 05 / 27 / 2017
 Transaction ID : **A670131EF31FF4C45A62**
 Amount of Each Receipt this Period
 78.00
 Memo Item
 Payroll Deduction: \$39.00/Bi-Weekly

B. KARNUTA, DANIEL, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 981 Patrician Ct
 City Fairview State TX Zip Code 75069-8781
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Tenet Patient Financial Services Occupation (for Individual) SVP, CFO
 Receipt For:
 Primary General
 Other (specify) Aggregate Year-to-Date **440.00**

Date of Receipt
 05 / 27 / 2017
 Transaction ID : **A579814437788452B9E2**
 Amount of Each Receipt this Period
 80.00
 Memo Item
 Payroll Deduction: \$40.00/Bi-Weekly

C. 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 **1056.00**

Date of Receipt
 05 / 27 / 2017
 Transaction ID : **A2271348F844E4EC3A49**
 Amount of Each Receipt this Period
 192.00
 Memo Item
 Payroll Deduction: \$96.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... **350.00**
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 53
	<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. PUTHOFF, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3910 Boden Ln
 City Spring State TX Zip Code 77386-2076
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOUSTON NORTHWEST MEDICAL Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 429.00

Date of Receipt 05 / 27 / 2017
 Transaction ID : A1367640AF2484105996
 Amount of Each Receipt this Period 78.00
 Memo Item
 Payroll Deduction: \$39.00/Bi-Weekly

B. ADKINS, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 710 Cypress Creek Pkwy
 City Houston State TX Zip Code 77090-3402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOUSTON NORTHWEST MEDICAL Occupation (for Individual) COO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 429.00

Date of Receipt 05 / 27 / 2017
 Transaction ID : A07F94E5287524BBA8E4
 Amount of Each Receipt this Period 78.00
 Memo Item
 Payroll Deduction: \$39.00/Bi-Weekly

C. CHANDLER, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1625 Medical Center Dr
 City El Paso State TX Zip Code 79902-5005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PROVIDENCE SIERRA CAMPUS Occupation (for Individual) MBA LEADERSHIP PRG ASSOC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 384.00

Date of Receipt 05 / 27 / 2017
 Transaction ID : AEBABE837CBFE4FBE960
 Amount of Each Receipt this Period 192.00
 Memo Item
 Payroll Deduction: \$96.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... 348.00
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 53
	<input checked="" type="checkbox"/> 11a 13 <input type="checkbox"/> 11b 14 <input type="checkbox"/> 11c 15 <input type="checkbox"/> 12 16 <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
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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 ▼
1056.00

Date of Receipt
MM / DD / YYYY
05 / 27 / 2017

Transaction ID : **A72B30222BAF147AA9D7**

Amount of Each Receipt this Period
192.00

Memo Item
Payroll Deduction: \$96.00/Bi-Weekly

B. FINNEY, MICHELE, M.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10010 W Villa Lindo Dr

City Peoria	State AZ	Zip Code 85383-9214
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)
TENET PRACTICE RESOURCES

Occupation (for Individual)
CEO, Market/Sys

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
418.00

Date of Receipt
MM / DD / YYYY
05 / 27 / 2017

Transaction ID : **A97F2B0ED15204C0195D**

Amount of Each Receipt this Period
76.00

Memo Item
Payroll Deduction: \$38.00/Bi-Weekly

C. 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 ▼
1056.00

Date of Receipt
MM / DD / YYYY
05 / 27 / 2017

Transaction ID : **A67E86701DC724D4A9D1**

Amount of Each Receipt this Period
192.00

Memo Item
Payroll Deduction: \$96.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	460.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 9 OF 53
Use separate schedule(s) for each category of the Detailed Summary Page
11a 11b 11c 12
13 14 15 16 17

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MICHAELS, MATTHEW, C.
Mailing Address 3507 Munstead Trl
City Frisco State TX Zip Code 75033-1166
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) Tenet Patient Financial Services Occupation (for Individual) SVP, President, Revenue Cycle Manag
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 429.00

Date of Receipt 05 / 27 / 2017
Transaction ID : A6BE1E31BA67F40DBAB7
Amount of Each Receipt this Period 78.00
Memo Item
Payroll Deduction: \$39.00/Bi-Weekly

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ZERINGUE, NORMA, A.
Mailing Address 5757 Southwestern Blvd
City Dallas State TX Zip Code 75209-3437
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) Tenet Patient Financial Services Occupation (for Individual) SVP, STRATEGY
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 429.00

Date of Receipt 05 / 27 / 2017
Transaction ID : A0C605D901C154D10AC2
Amount of Each Receipt this Period 78.00
Memo Item
Payroll Deduction: \$39.00/Bi-Weekly

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
CLARK, JEREMY,
Mailing Address 111 S Port Royal Dr Apt 19
City Hilton Head State SC Zip Code 29928-5556
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) HILTON HEAD HOSPITAL Occupation (for Individual) MARKET CEO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 440.00

Date of Receipt 05 / 27 / 2017
Transaction ID : A4E3776F732004671880
Amount of Each Receipt this Period 80.00
Memo Item
Payroll Deduction: \$40.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional) 236.00
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 OF 53
	<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	

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. KELLIS, DANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 215 E Quincy St
 City San Antonio State TX Zip Code 78215-2039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BAPTIST HEALTH SYSTEM Occupation (for Individual) CMO Market/Sys
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 429.00

Date of Receipt
 05 / 27 / 2017
 Transaction ID : A2CBAC795F86A435199E
 Amount of Each Receipt this Period
 78.00
 Memo Item
 Payroll Deduction: \$39.00/Bi-Weekly

B. MALLET, CONRAD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19386 Cumberland Way
 City Detroit State MI Zip Code 48203-1456
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DMC-Harper University Hospital Occupation (for Individual) CAO - Detroit Market
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 423.17

Date of Receipt
 05 / 27 / 2017
 Transaction ID : ACD576149BF1D4F2196B
 Amount of Each Receipt this Period
 76.94
 Memo Item
 Payroll Deduction: \$38.47/Bi-Weekly

C. JORDAN, VICTOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 314 Vailwood Ct
 City Bloomfield Hills State MI Zip Code 48302-1573
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DMC-Harper University Hospital Occupation (for Individual) CFO, REGION
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 429.00

Date of Receipt
 05 / 27 / 2017
 Transaction ID : A0A08485BE2744C10912
 Amount of Each Receipt this Period
 78.00
 Memo Item
 Payroll Deduction: \$39.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional) **232.94**
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 11 OF 53
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <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)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. MESCO, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7365 NW 54th St

City Lauderhill	State FL	Zip Code 33319-6346
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Tenet Florida Service Center	Occupation (for Individual) Director, Reg Reimbursement
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 275.00

Date of Receipt
 05 / 27 / 2017
 Transaction ID : A28B782C9812E4E5FA86

Amount of Each Receipt this Period
 50.00

Memo Item
 Payroll Deduction: \$25.00/Bi-Weekly

B. RODRIGUEZ, RUBEN, O, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6905 Villa Hermosa Dr

City El Paso	State TX	Zip Code 79912-2341
-----------------	-------------	------------------------

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

Name of Employer (for Individual) PROVIDENCE EAST CAMPUS	Occupation (for Individual) Director, Plant Operations
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 429.00

Date of Receipt
 05 / 27 / 2017
 Transaction ID : A123A3E77394D4E0E9CF

Amount of Each Receipt this Period
 78.00

Memo Item
 Payroll Deduction: \$39.00/Bi-Weekly

C. HURT-DEITCH, SALLY, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 712 Waltham Ct

City El Paso	State TX	Zip Code 79922-2128
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Providence Memorial Campus	Occupation (for Individual) CEO, Market/Sys
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 550.00

Date of Receipt
 05 / 27 / 2017
 Transaction ID : A454D2C9DB37C418A83C

Amount of Each Receipt this Period
 100.00

Memo Item
 Payroll Deduction: \$50.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	228.00
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 12 OF 53
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <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)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. WHEELER, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13802 Magnolia Manor Dr
 City Cypress State TX Zip Code 77429-8162
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Cypress Fairbanks Med Center Occupation (for Individual) CEO
 Receipt For:
 Primary General
 Other (specify) Aggregate Year-to-Date **385.00**

Date of Receipt
 05 / 27 / 2017
 Transaction ID : **AD613BA97C4EC494BAFA**
 Amount of Each Receipt this Period
 70.00
 Memo Item
 Payroll Deduction: \$35.00/Bi-Weekly

B. MITCHELL, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1130 22nd St S
 City Birmingham State AL Zip Code 35205-2870
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BAPTIST HEALTH SYSTEM Occupation (for Individual) Director, Government Relations
 Receipt For:
 Primary General
 Other (specify) Aggregate Year-to-Date **429.00**

Date of Receipt
 05 / 27 / 2017
 Transaction ID : **A6358504CDEFF495598E**
 Amount of Each Receipt this Period
 78.00
 Memo Item
 Payroll Deduction: \$39.00/Bi-Weekly

C. 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 **1068.00**

Date of Receipt
 05 / 27 / 2017
 Transaction ID : **A08239D9880C74744AAA**
 Amount of Each Receipt this Period
 200.00
 Memo Item
 Payroll Deduction: \$100.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	348.00
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 13 OF 53
	<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	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. RANGEL JR, ARTURO, , ,			Date of Receipt MM / DD / YYYY 05 / 27 / 2017		
Mailing Address 2101 Pease St			Transaction ID : AB6348C913AAF4152A7F		
City Harlingen	State TX	Zip Code 78550-8307	Amount of Each Receipt this Period 78.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item Payroll Deduction: \$39.00/Bi-Weekly		
Name of Employer (for Individual) VALLEY BAPTIST MARKET		Occupation (for Individual) Market VP, Lean-Qual-Perfrm	Aggregate Year-to-Date ▼ 429.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. HALTER, MICHAEL, , ,			Date of Receipt MM / DD / YYYY 05 / 27 / 2017		
Mailing Address 141 Rodney Cir			Transaction ID : ACA67C90900254BF196D		
City Bryn Mawr	State PA	Zip Code 19010-3727	Amount of Each Receipt this Period 78.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item Payroll Deduction: \$39.00/Bi-Weekly		
Name of Employer (for Individual) HAHNEMANN HOSPITAL		Occupation (for Individual) CEO	Aggregate Year-to-Date ▼ 429.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. LISA, MARK, P, ,			Date of Receipt MM / DD / YYYY 05 / 27 / 2017		
Mailing Address 179 Niblick Rd # 129			Transaction ID : AC5674040AE1E40378B4		
City Paso Robles	State CA	Zip Code 93446-4845	Amount of Each Receipt this Period 78.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item Payroll Deduction: \$39.00/Bi-Weekly		
Name of Employer (for Individual) TWIN CITIES COMMUNITY HOSPITAL		Occupation (for Individual) CEO	Aggregate Year-to-Date ▼ 429.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

SUBTOTAL of Receipts This Page (optional).....▶	234.00
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 14 OF 53
	<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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. MOLINARO, FRANK, , ,			Date of Receipt MM / DD / YYYY 05 / 27 / 2017 Transaction ID : A4D82A34D8CA943C0B84		
Mailing Address 6783 W Greenbriar Dr			Amount of Each Receipt this Period 78.00		
City Glendale	State AZ	Zip Code 85308-8441	<input type="checkbox"/> Memo Item Payroll Deduction: \$39.00/Bi-Weekly		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 429.00		
Name of Employer (for Individual) ABRAZO ARROWHEAD CAMPUS		Occupation (for Individual) CEO			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. BEITER, AMY, , ,			Date of Receipt MM / DD / YYYY 05 / 13 / 2017 Transaction ID : AEB6C8F0C72A64BCD961		
Mailing Address 1601 W Saint Marys Rd			Amount of Each Receipt this Period 39.00		
City Tucson	State AZ	Zip Code 85745-2623	<input type="checkbox"/> Memo Item Payroll Deduction: \$39.00/Bi-Weekly		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 390.00		
Name of Employer (for Individual) Carondelet St Marys Hospital		Occupation (for Individual) CEO			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. CLEARY, MARY, , ,			Date of Receipt MM / DD / YYYY 05 / 27 / 2017 Transaction ID : A1F22F95AC0FA430BB9C		
Mailing Address 940 Bonnie Brae Pl			Amount of Each Receipt this Period 78.00		
City River Forest	State IL	Zip Code 60305-1512	<input type="checkbox"/> Memo Item Payroll Deduction: \$39.00/Bi-Weekly		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 429.00		
Name of Employer (for Individual) MacNeal Hospital		Occupation (for Individual) CFO			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					

SUBTOTAL of Receipts This Page (optional).....	195.00
TOTAL This Period (last page this line number only).....	[]

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 15 OF 53
Use separate schedule(s) for each category of the Detailed Summary Page
[] 11a [] 11b [] 11c [] 12
[] 13 [] 14 [] 15 [] 16 [] 17

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

A. MACLAUCHLAN, STEVEN, , ,
Mailing Address 123 Summer St
City Worcester State MA Zip Code 01608-1216
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) St. Vincent Hospital Occupation (for Individual) CEO
Receipt For: [] Primary [] General [] Other (specify)
Aggregate Year-to-Date 429.00

Date of Receipt 05 / 27 / 2017
Transaction ID : A1ADF3CAEE4B74B07842
Amount of Each Receipt this Period 78.00
Memo Item
Payroll Deduction: \$39.00/Bi-Weekly

B. ARCHER, DAVID, L, ,
Mailing Address 2594 Hocksett Cv
City Germantown State TN Zip Code 38139-6655
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) St. Francis Hospital Occupation (for Individual) MARKET CEO
Receipt For: [] Primary [] General [] Other (specify)
Aggregate Year-to-Date 1056.00

Date of Receipt 05 / 27 / 2017
Transaction ID : AAE5C04CAF4F40C0BEC
Amount of Each Receipt this Period 192.00
Memo Item
Payroll Deduction: \$96.00/Bi-Weekly

C. CLAYTON, KENT, G, ,
Mailing Address 125 Branch
City Irvine State CA Zip Code 92618-1149
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) LOS ALAMITOS MEDICAL CENTER Occupation (for Individual) CEO
Receipt For: [] Primary [] General [] Other (specify)
Aggregate Year-to-Date 418.00

Date of Receipt 05 / 27 / 2017
Transaction ID : A97E0DCF5675344E385F
Amount of Each Receipt this Period 76.00
Memo Item
Payroll Deduction: \$38.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional) 346.00
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 16 OF 53
	<input checked="" type="checkbox"/> 11a 13 <input type="checkbox"/> 11b 14 <input type="checkbox"/> 11c 15 <input type="checkbox"/> 12 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. MENTON, TIMOTHY, , ,		Date of Receipt
Mailing Address 3700 South St		MM / DD / YYYY 05 / 27 / 2017
City Lakewood	State CA	Zip Code 90712-1419
FEC ID number of contributing federal political committee. C		Transaction ID : A78186FEAE87946F6B90
Name of Employer (for Individual) LAKEWOOD REGIONAL MEDICAL CENTER		Occupation (for Individual) CEO
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period 192.00
Aggregate Year-to-Date ▼ 1056.00		<input type="checkbox"/> Memo Item Payroll Deduction: \$96.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. GRAH, JOHN, A, ,		Date of Receipt
Mailing Address 7933 Cornell Ave		MM / DD / YYYY 05 / 27 / 2017
City Saint Louis	State MO	Zip Code 63130-3704
FEC ID number of contributing federal political committee. C		Transaction ID : A56A5FR3FR07242E8A9B
Name of Employer (for Individual) LAKEWOOD REGIONAL MEDICAL CENTER		Occupation (for Individual) CEO
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period 78.00
Aggregate Year-to-Date ▼ 429.00		<input type="checkbox"/> Memo Item Payroll Deduction: \$39.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. BREWER, DOUGLAS, , ,		Date of Receipt
Mailing Address 641 North Ave NE Apt 1407		MM / DD / YYYY 05 / 27 / 2017
City Atlanta	State GA	Zip Code 30308-2893
FEC ID number of contributing federal political committee. C		Transaction ID : A6A91C3C4B7B846A2839
Name of Employer (for Individual) BROOKWOOD MEDICAL CENTER		Occupation (for Individual) ASSOCIATE ADMINISTRATOR
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Amount of Each Receipt this Period 78.00
Aggregate Year-to-Date ▼ 429.00		<input type="checkbox"/> Memo Item Payroll Deduction: \$39.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	348.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 17 OF 53
Use separate schedule(s) for each category of the Detailed Summary Page
11a 11b 11c 12
13 14 15 16 17

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

A. ADAMS, TIM, , ,
Mailing Address 808 Pyrenees Dr
City Southlake State TX Zip Code 76092-1319
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) Tenet Healthcare Occupation (for Individual) SVP, Ops Integration
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 1056.00

Date of Receipt 05 / 27 / 2017
Transaction ID : AE8F856474F9F49D9B01
Amount of Each Receipt this Period 192.00
Memo Item
Payroll Deduction: \$96.00/Bi-Weekly

B. JOHNSTON, RICKY, , ,
Mailing Address 401 N Church St
City McKinney State TX Zip Code 75069-3854
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) Tenet Healthcare Occupation (for Individual) VP, Ops And Technology
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 495.00

Date of Receipt 05 / 27 / 2017
Transaction ID : ABCBB1DDE9CA448B2AE:
Amount of Each Receipt this Period 90.00
Memo Item
Payroll Deduction: \$45.00/Bi-Weekly

C. RUFF, GARY, K, ,
Mailing Address 1724 Byron Nelson Pkwy
City Southlake State TX Zip Code 76092-9637
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) Tenet Healthcare Occupation (for Individual) SVP, Physician Resources
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 1056.00

Date of Receipt 05 / 27 / 2017
Transaction ID : A0FFA3A91B5184371852
Amount of Each Receipt this Period 192.00
Memo Item
Payroll Deduction: \$96.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional) 474.00
TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 18 OF 53
Use separate schedule(s) for each category of the Detailed Summary Page
11a 11b 11c 12 13 14 15 16 17

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name ZHANG, HUILING, . . .
Mailing Address 3516 Rankin St
City Dallas State TX Zip Code 75205-1209
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) Tenet Healthcare Occupation (for Individual) VP, Strategic Analytics
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 429.00

Date of Receipt 05 / 27 / 2017
Transaction ID : AE395CCD6C1EA4F75BDC
Amount of Each Receipt this Period 78.00
Memo Item
Payroll Deduction: \$39.00/Bi-Weekly

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name LEE, DEBRA, . . .
Mailing Address 1445 Ross Ave Ste 1400
City Dallas State TX Zip Code 75202-2703
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) Tenet Healthcare Occupation (for Individual) VP, FINANCE PHYS DEVLPMT
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 429.00

Date of Receipt 05 / 27 / 2017
Transaction ID : AA6E92BC50C6B454491C
Amount of Each Receipt this Period 78.00
Memo Item
Payroll Deduction: \$39.00/Bi-Weekly

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name ROBERTS, MARK, . . .
Mailing Address 13047 W Estero Ln
City Litchfield Park State AZ Zip Code 85340-5576
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) Tenet Healthcare Occupation (for Individual) SR SPEC, INPAT/CASE MGMT
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 429.00

Date of Receipt 05 / 27 / 2017
Transaction ID : A3121D87AE6AD46CC8B7
Amount of Each Receipt this Period 78.00
Memo Item
Payroll Deduction: \$39.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional) 234.00
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 19 OF 53
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <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)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. BANDY, HAROLD, , ,		Date of Receipt MM / DD / YYYY 05 / 27 / 2017
Mailing Address 9004 Old Smyrna Rd		Transaction ID : A4439C14491044F94833
City Brentwood	State TN	Zip Code 37027-6058
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 88.00
Name of Employer (for Individual) Tenet Healthcare	Occupation (for Individual) Sr Director, IS Architecture	<input type="checkbox"/> Memo Item Payroll Deduction: \$39.00/Bi-Weekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 942.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. WALDMANN, DANIEL, , ,		Date of Receipt MM / DD / YYYY 05 / 27 / 2017
Mailing Address 1111 N Montclair Ave		Transaction ID : A5A56239F671C404A8DD
City Dallas	State TX	Zip Code 75208-3520
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 192.00
Name of Employer (for Individual) Tenet Healthcare	Occupation (for Individual) SVP, Public Affairs	<input type="checkbox"/> Memo Item Payroll Deduction: \$96.00/Bi-Weekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1056.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. DIPPEL, JULIE, K, ,		Date of Receipt MM / DD / YYYY 05 / 27 / 2017
Mailing Address 3706 Ash Glen Dr		Transaction ID : AEE73B5D175774B60B98
City Spring	State TX	Zip Code 77388-4154
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer (for Individual) Tenet Healthcare	Occupation (for Individual) Director, Org Learning & Dev	<input type="checkbox"/> Memo Item Payroll Deduction: \$10.00/Bi-Weekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 610.00	

SUBTOTAL of Receipts This Page (optional).....	290.00
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 20 OF 53
	<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. CHICK, WESLEY, . . .

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6401 Fitzgerald Dr # 1400

City Plano State TX Zip Code 75074-9002

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

Name of Employer (for Individual) Tenet Healthcare Occupation (for Individual) Sr Director, Managed Care

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 429.00

Date of Receipt 05 / 27 / 2017
 Transaction ID : A852A44EC342643D780B
 Amount of Each Receipt this Period 78.00
 Memo Item
 Payroll Deduction: \$39.00/Bi-Weekly

B. BORDOFSKE, DAVID, W, . . .

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5001 Ashland Belle Ln

City Frisco State TX Zip Code 75035-7682

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

Name of Employer (for Individual) Tenet Healthcare Occupation (for Individual) VP, Patient Mgmt System

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 440.00

Date of Receipt 05 / 27 / 2017
 Transaction ID : AA6F86E60E7F549F8922
 Amount of Each Receipt this Period 80.00
 Memo Item
 Payroll Deduction: \$40.00/Bi-Weekly

C. ANDREWS, AUDREY, T, . . .

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 702 Penfolds Ln

City Coppell 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 ▼ 2112.00

Date of Receipt 05 / 27 / 2017
 Transaction ID : AC85161871B684CF2B80
 Amount of Each Receipt this Period 384.00
 Memo Item
 Payroll Deduction: \$192.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... **542.00**

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 21 OF 53
	<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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. EVANS, JASON, E.,		Date of Receipt MM / DD / YYYY 05 / 27 / 2017
Mailing Address 3409 Villanova St		Transaction ID : A909F22A515AB4E6C951
City Dallas	State TX	Zip Code 75225-4843
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 78.00
Name of Employer (for Individual) Tenet Healthcare	Occupation (for Individual) CEO, Region	<input type="checkbox"/> Memo Item Payroll Deduction: \$39.00/Bi-Weekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 429.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. PITTS, KEITH, ,		Date of Receipt MM / DD / YYYY 05 / 27 / 2017
Mailing Address 4441 S Versailles Ave		Transaction ID : A2102F6DD7D3D4AC98D0
City Dallas	State TX	Zip Code 75205-3012
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 384.00
Name of Employer (for Individual) Tenet Healthcare	Occupation (for Individual) VICE CHAIRMAN	<input type="checkbox"/> Memo Item Payroll Deduction: \$192.00/Bi-Weekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2112.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. COCHRAN, WEBB, ,		Date of Receipt MM / DD / YYYY 05 / 27 / 2017
Mailing Address 3961 ST. CLAIRE CT		Transaction ID : A20204241DDBB430383D
City ATLANTA	State GA	Zip Code 30319
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 78.00
Name of Employer (for Individual) Tenet Healthcare	Occupation (for Individual) Director, Government Relations	<input type="checkbox"/> Memo Item Payroll Deduction: \$39.00/Bi-Weekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 429.00	

SUBTOTAL of Receipts This Page (optional).....▶	540.00
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 22 OF 53
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 11c <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)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A. PERRY, PHIL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8195 Landing S

City Sandy Springs State GA Zip Code 30350-2617

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

Name of Employer (for Individual) Tenet Healthcare Occupation (for Individual) Reg/Market CMO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
429.00

Date of Receipt
05 / 27 / 2017

Transaction ID : AD289613F421D48D8AC7

Amount of Each Receipt this Period
78.00

Memo Item
Payroll Deduction: \$39.00/Bi-Weekly

B. DUNN, DINA, L, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3717 Cherry Ridge Dr

City Frisco State TX Zip Code 75033-1328

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

Name of Employer (for Individual) Tenet Healthcare Occupation (for Individual) VP, HR Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
05 / 27 / 2017

Transaction ID : A52DEF043D374C6BB4D

Amount of Each Receipt this Period
50.00

Memo Item
Payroll Deduction: \$25.00/Bi-Weekly

C. RABE, DOUGLAS, E, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7746 Eagle Trl

City Dallas State TX Zip Code 75238-4115

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

Name of Employer (for Individual) Tenet Healthcare Occupation (for Individual) VP, Tax

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
429.00

Date of Receipt
05 / 27 / 2017

Transaction ID : A60E1EA40468B4BC9914

Amount of Each Receipt this Period
78.00

Memo Item
Payroll Deduction: \$39.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional) ▶ 206.00

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 23 OF 53
	<input checked="" type="checkbox"/> 11a 13 <input type="checkbox"/> 11b 14 <input type="checkbox"/> 11c 15 <input type="checkbox"/> 12 16 <input type="checkbox"/> 17	

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

A. KOURY, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 712 1/2 Narcissus Ave
 City Corona Del Mar State CA Zip Code 92625-2466
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Tenet Healthcare Occupation (for Individual) CEO, Region
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 418.00

Date of Receipt
 05 / 27 / 2017
 Transaction ID : A9655F7BE938842C8889
 Amount of Each Receipt this Period 76.00
 Memo Item
 Payroll Deduction: \$38.00/Bi-Weekly

B. SHERROD, EDLECIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1955 Market Center Blvd Apt 2418
 City Dallas State TX Zip Code 75207-3480
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Tenet Healthcare Occupation (for Individual) Manager, Public Affairs
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 289.00

Date of Receipt
 05 / 27 / 2017
 Transaction ID : A7B5C96E960E746E3B74
 Amount of Each Receipt this Period 78.00
 Memo Item
 Payroll Deduction: \$39.00/Bi-Weekly

C. FETTER, TREVOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3806 Beverly Dr
 City Dallas State TX Zip Code 75205-2808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Tenet Healthcare Occupation (for Individual) CEO & President
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 3663.00

Date of Receipt
 05 / 27 / 2017
 Transaction ID : AA447D4D7DC8849FCB52
 Amount of Each Receipt this Period 666.00
 Memo Item
 Payroll Deduction: \$333.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional) 820.00
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 24 OF 53
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <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)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. ARMIN, CRAIG, C, ,			Date of Receipt MM / DD / YYYY 05 / 27 / 2017		
Mailing Address 23510 Berdon St			Transaction ID : A22582E17FD8C473690B		
City Woodland Hills	State CA	Zip Code 91367-3004	Amount of Each Receipt this Period 80.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item Payroll Deduction: \$40.00/Bi-Weekly		
Name of Employer (for Individual) Tenet Healthcare		Occupation (for Individual) VP. GOVT PROGRAMS	Aggregate Year-to-Date ▼ 440.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. PINKALL, JASON, , ,			Date of Receipt MM / DD / YYYY 05 / 27 / 2017		
Mailing Address 6526 Anita St			Transaction ID : A1B8535127AB04C2E93B		
City Dallas	State TX	Zip Code 75214-2706	Amount of Each Receipt this Period 78.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item Payroll Deduction: \$39.00/Bi-Weekly		
Name of Employer (for Individual) Tenet Healthcare		Occupation (for Individual) SENIOR COUNSEL	Aggregate Year-to-Date ▼ 429.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. SUTHERLAND, KENNETH, F, ,			Date of Receipt MM / DD / YYYY 05 / 27 / 2017		
Mailing Address 1809 Saint Philip Ave			Transaction ID : A14D3D78B2B8F49F2BC3		
City Southlake	State TX	Zip Code 76092-1155	Amount of Each Receipt this Period 76.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item Payroll Deduction: \$38.00/Bi-Weekly		
Name of Employer (for Individual) Tenet Healthcare		Occupation (for Individual) VP, Construction & Design	Aggregate Year-to-Date ▼ 418.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

SUBTOTAL of Receipts This Page (optional).....▶	234.00
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 25 OF 53	
	<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. LINARES, MANUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6801 SW 75th Ave
 Apt 901
 City Miami State FL Zip Code 33143-2817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTH SHORE MEDICAL CENTER Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 418.00

Date of Receipt
 MM / DD / YYYY
 05 / 27 / 2017
 Transaction ID : **AB74F17BBEE604686AB0**
 Amount of Each Receipt this Period
 76.00
 Memo Item
 Payroll Deduction: \$38.00/Bi-Weekly

B. JOHNSON, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3302 Marsh Ln
 City Grapevine State TX Zip Code 76051-6828
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Tenet Healthcare Occupation (for Individual) VP, APPLIED CLINICAL INF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 418.00

Date of Receipt
 MM / DD / YYYY
 05 / 27 / 2017
 Transaction ID : **AD01BC370043A45BD84F**
 Amount of Each Receipt this Period
 76.00
 Memo Item
 Payroll Deduction: \$38.00/Bi-Weekly

C. 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 ▼ 1056.00

Date of Receipt
 MM / DD / YYYY
 05 / 27 / 2017
 Transaction ID : **AB08580D7D7E94DEA9D4**
 Amount of Each Receipt this Period
 192.00
 Memo Item
 Payroll Deduction: \$96.00/Bi-Weekly

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

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

344.00

**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 26 OF 53
	<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 of Individual (Last, First, Middle Initial) or Full Organization Name JOSEPHS, ALVIN, W, .			Date of Receipt
Mailing Address 3717 Herwol Ave			MM / DD / YYYY 05 / 27 / 2017
City Waco	State TX	Zip Code 76710-7218	Transaction ID : A664B30230EDE406FA93
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 87.00
Name of Employer (for Individual) Tenet Healthcare		Occupation (for Individual) Sr Director, Policy & Training	<input type="checkbox"/> Memo Item Payroll Deduction: \$39.00/Bi-Weekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 429.00	

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name BAILEY, CAROL, . .			Date of Receipt
Mailing Address 20 Burton Hills Blvd			MM / DD / YYYY 05 / 27 / 2017
City Nashville	State TN	Zip Code 37215-6197	Transaction ID : AA402380D3A0F48BAA2E
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 192.00
Name of Employer (for Individual) Tenet Healthcare		Occupation (for Individual) VP, Ops Reimbursement	<input type="checkbox"/> Memo Item Payroll Deduction: \$96.00/Bi-Weekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1056.00	

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name SHERMAN, STEPHANIE, S, .			Date of Receipt
Mailing Address 10481 Mateo Ct			MM / DD / YYYY 05 / 17 / 2017
City Boca Raton	State FL	Zip Code 33498-6733	Transaction ID : A83A8C5F4DFCA42D6811
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) WEST BOCA MEDICAL CENTER		Occupation (for Individual) CHIEF HR OFFICER	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....	520.00
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 OF 53	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Isaacs, William, , ,		Date of Receipt MM / DD / YYYY 05 / 17 / 2017
Mailing Address 1015 Bloomview Cir		Transaction ID : ACCCAE0CD2BA34090AA
City Rochester	State MI	Zip Code 48307-1728
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) Detroit Medical Center	Occupation (for Individual) SENIOR DIRECTOR	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. CHESTER, DON, W, ,		Date of Receipt MM / DD / YYYY 05 / 17 / 2017
Mailing Address 148 Bloomfield Dr		Transaction ID : A7F2B0942860945E6B24
City West Palm Bch	State FL	Zip Code 33405-4102
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) ST MARY'S MEDICAL CENTER	Occupation (for Individual) Adm Director, Comm - Govt Rel	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. POSTLETHWAIT, ELIZABETH, , ,		Date of Receipt MM / DD / YYYY 05 / 17 / 2017
Mailing Address 701 Princeton Ave SW		Transaction ID : A40FADB254AF6406D9C4
City Birmingham	State AL	Zip Code 35211-1303
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) BAPTIST HEALTH SYSTEM	Occupation (for Individual) CEO	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

SUBTOTAL of Receipts This Page (optional).....▶	750.00
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 28 OF 53
	(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"/> 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. Larkins, Gloria, . .
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5351 W Bloomfield Lake Rd
 City West Bloomfield State MI Zip Code 48323-2411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Detroit Receiving Hospital Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 MM / DD / YYYY
 05 / 17 / 2017
 Transaction ID : A92FD8E2494314F57815
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. ABSHIER, EARL, . .
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5000 W Oakland Park Blvd
 City Lauderdale Lakes State FL Zip Code 33313-1503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FLORIDA MEDICAL CENTER Occupation (for Individual) CEO-Chief Admin Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 MM / DD / YYYY
 05 / 17 / 2017
 Transaction ID : A2B14B1BC72434E91B5B
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. YUKELSON, RONALD, . .
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1120 Islay St
 City San Luis Obispo State CA Zip Code 93401-3708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SIERRA VISTA Occupation (for Individual) DBD-ASSOC ADMINISTRATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 MM / DD / YYYY
 05 / 17 / 2017
 Transaction ID : A5384B546CB204EAEBAE
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	750.00
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 29 OF 53
	<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. KNOX, JOHN, . .
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8327 Winecup HI
 City San Antonio State TX Zip Code 78256-2498
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BAPTIST HEALTH SYSTEM Occupation (for Individual) CEO-Chief Admin Officer
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 440.00

Date of Receipt 05 / 24 / 2017
 Transaction ID : A6DA25081A70649549B0
 Amount of Each Receipt this Period 250.00
 Memo Item

B. GERGANOFF, MARTHA, . .
 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) COO
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 05 / 24 / 2017
 Transaction ID : A1A9811060A17409A812
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Stark, Charles, . .
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1528 Pumphouse Ct
 City Vestavia State AL Zip Code 35243-6002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BROOKWOOD MEDICAL CENTER Occupation (for Individual) President and CEO
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 500.00

Date of Receipt 05 / 24 / 2017
 Transaction ID : A4BB30E03E01E41ABBE0
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1000.00
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 30 OF 53
	<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. FAULIS, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6601 White Feather Rd
 City Joshua Tree State CA Zip Code 92252-6607
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) OTHER EXECUTIVES (S2K) Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 24 / 2017
 Transaction ID : A4EA85C0436EA439F93C
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. LECROY, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1220 Valley Dr
 City Atlanta State AL Zip Code 35954-8576
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Tenet Healthcare Occupation (for Individual) REG CHIEF NURSING EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 24 / 2017
 Transaction ID : A93A29CC97D7D4AF58C3
 Amount of Each Receipt this Period 500.00
 Memo Item

C. PERREIRA, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2972 Harrow Rd
 City Spring Hill State FL Zip Code 34608-4429
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Tenet Healthcare Occupation (for Individual) SR SPEC, INPAT/CASE MGMT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 209.00

Date of Receipt 05 / 27 / 2017
 Transaction ID : AC9280EAA3A4048DDAE5
 Amount of Each Receipt this Period 38.00
 Memo Item
 Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... 1538.00
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 OF 53
	<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. BIERMAN, JR., MICHAEL, J.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 Center Ct
 City Heath State TX Zip Code 75032-5999
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Tenet Healthcare Occupation (for Individual) VP, OPS FINANCE
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 209.00

Date of Receipt 05 / 27 / 2017
 Transaction ID : A2AEB2B9E6F874FE8B1F
 Amount of Each Receipt this Period 38.00
 Memo Item
 Payroll Deduction: \$19.00/Bi-Weekly

B. MCNEW, RUSTY, . .
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3141 Lovers Ln
 City Dallas State TX Zip Code 75225-7720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Tenet Healthcare Occupation (for Individual) REG CHIEF NURSING EXEC
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 209.33

Date of Receipt 05 / 27 / 2017
 Transaction ID : A34851457D3EC4036A32
 Amount of Each Receipt this Period 38.06
 Memo Item
 Payroll Deduction: \$19.03/Bi-Weekly

C. MALONEY, MICHAEL, . .
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4514 Wildwood Rd
 City Dallas State TX Zip Code 75209-1926
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Tenet Healthcare Occupation (for Individual) SVP, Acquisitions & Development
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 209.00

Date of Receipt 05 / 27 / 2017
 Transaction ID : A59E5BF116C7F4C35B74
 Amount of Each Receipt this Period 38.00
 Memo Item
 Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	114.06
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 32 OF 53
Use separate schedule(s) for each category of the Detailed Summary Page
[] 11a [] 11b [] 11c [] 12 [] 13 [] 14 [] 15 [] 16 [] 17
[X] 11a

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 of Individual (Last, First, Middle Initial) or Full Organization Name
TURNER, JOHN, , , Jr.
Mailing Address 708 Land Fall Dr
City Rock Hill State SC Zip Code 29732-9437
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) Tenet Healthcare Occupation (for Individual) Sr Director, Practice Ops
Receipt For: [] Primary [] General [] Other (specify)
Aggregate Year-to-Date 209.00

Date of Receipt 05 / 27 / 2017
Transaction ID : AB7B45B678E2240B6A50
Amount of Each Receipt this Period 38.00
Memo Item []
Payroll Deduction: \$19.00/Bi-Weekly

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HOLMAN, LORI, , ,
Mailing Address 7213 Ellis Rd
City Fort Worth State TX Zip Code 76112-4301
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) Tenet Healthcare Occupation (for Individual) Manager, Human Resources
Receipt For: [] Primary [] General [] Other (specify)
Aggregate Year-to-Date 209.00

Date of Receipt 05 / 27 / 2017
Transaction ID : A327AD09BDBC949D89BC
Amount of Each Receipt this Period 38.00
Memo Item []
Payroll Deduction: \$19.00/Bi-Weekly

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LAND, CHAD, W, ,
Mailing Address 310 Lakewood Dr
City Trophy Club State TX Zip Code 76262-5292
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) Tenet Healthcare Occupation (for Individual) Director, Audit Services
Receipt For: [] Primary [] General [] Other (specify)
Aggregate Year-to-Date 209.00

Date of Receipt 05 / 27 / 2017
Transaction ID : A095AA0955F794D1FA93
Amount of Each Receipt this Period 38.00
Memo Item []
Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional) 114.00
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 33 OF 53
	<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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Worley, Nathan, , ,			Date of Receipt MM / DD / YYYY 05 / 27 / 2017		
Mailing Address 3280 Joe Battle Blvd			Transaction ID : A06E053CE820A4BBD90C		
City El Paso	State TX	Zip Code 79938-2622	Amount of Each Receipt this Period 38.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item Payroll Deduction: \$19.00/Bi-Weekly		
Name of Employer (for Individual) The Hospitals of Providence East Campu		Occupation (for Individual) Director, Business Development	Aggregate Year-to-Date ▼ 209.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. STANHILL, KEITH, , ,			Date of Receipt MM / DD / YYYY 05 / 27 / 2017		
Mailing Address 2819 Wedgewood Dr			Transaction ID : AE1B5E1F8C0B94B16A4F		
City Paso Robles	State CA	Zip Code 93446-6359	Amount of Each Receipt this Period 38.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item Payroll Deduction: \$19.00/Bi-Weekly		
Name of Employer (for Individual) TWIN CITIES COMMUNITY HOSPITAL		Occupation (for Individual) CHIEF HR OFFICER	Aggregate Year-to-Date ▼ 209.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. TEDESCHI, ANTHONY, , ,			Date of Receipt MM / DD / YYYY 05 / 27 / 2017		
Mailing Address 115 Christina Cir			Transaction ID : AD57B19B64CDB41F389A		
City Wheaton	State IL	Zip Code 60189-3115	Amount of Each Receipt this Period 38.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item Payroll Deduction: \$19.00/Bi-Weekly		
Name of Employer (for Individual) Weiss Memorial Hospital		Occupation (for Individual) CEO, Market/Sys	Aggregate Year-to-Date ▼ 209.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

SUBTOTAL of Receipts This Page (optional).....▶	114.00
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 34 OF 53
	<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	

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. BURKE, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2242 Mann Rd

City Lansdale State PA Zip Code 19446-5858

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

Name of Employer (for Individual) HAHNEMANN HOSPITAL Occupation (for Individual) COO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
MM / DD / YYYY
05 / 27 / 2017

Transaction ID : A1CE1AA6E64A444E5872

Amount of Each Receipt this Period
20.00

Memo Item
Payroll Deduction: \$10.00/Bi-Weekly

B. STEINER, JOSEPH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11226 Pointe Ct

City Saint Louis State MO Zip Code 63127-1741

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

Name of Employer (for Individual) MacNeal Hospital Occupation (for Individual) CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
209.00

Date of Receipt
MM / DD / YYYY
05 / 27 / 2017

Transaction ID : AAC96A4FFD9DD44E0921

Amount of Each Receipt this Period
38.00

Memo Item
Payroll Deduction: \$19.00/Bi-Weekly

C. SLOAN, GARY, J, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 615 Stevens Ct

City Danville State CA Zip Code 94506-4805

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

Name of Employer (for Individual) San Ramon Regional Medical Center Occupation (for Individual) CEO

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
209.00

Date of Receipt
MM / DD / YYYY
05 / 27 / 2017

Transaction ID : A1FAEFBE9343A4D20ADA

Amount of Each Receipt this Period
38.00

Memo Item
Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ▶ 96.00

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 35 OF 53
	<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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. PATTERSON, JEFFREY, . . .		Date of Receipt MM / DD / YYYY 05 / 27 / 2017	
Mailing Address 4704 N University Dr		Transaction ID : ADDD1F44665E345ABA70	
City Nacogdoches	State TX	Zip Code 75965-2631	
Amount of Each Receipt this Period 38.00		Amount of Each Receipt this Period 38.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Payroll Deduction: \$19.00/Bi-Weekly	
Name of Employer (for Individual) NACOGDOCHES MEDICAL CENTER		Occupation (for Individual) CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 209.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. ESTRELLA, MARIO, . . .		Date of Receipt MM / DD / YYYY 05 / 27 / 2017	
Mailing Address 4920 NE Stallings Dr		Transaction ID : A34255AAF0D204A939F5	
City Nacogdoches	State TX	Zip Code 75965-1254	
Amount of Each Receipt this Period 38.00		Amount of Each Receipt this Period 38.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Payroll Deduction: \$19.00/Bi-Weekly	
Name of Employer (for Individual) NACOGDOCHES MEDICAL CENTER		Occupation (for Individual) CNO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 209.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. STOWELL, WARREN, . . .		Date of Receipt MM / DD / YYYY 05 / 27 / 2017	
Mailing Address 1445 Ross Ave Ste 1400		Transaction ID : A6EDF685CE27E4A9ABCC	
City Dallas	State TX	Zip Code 75202-2703	
Amount of Each Receipt this Period 38.00		Amount of Each Receipt this Period 38.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Payroll Deduction: \$19.00/Bi-Weekly	
Name of Employer (for Individual) Tenet Healthcare		Occupation (for Individual) VP, PRACTICE MANAGEMENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 209.00	

SUBTOTAL of Receipts This Page (optional).....	114.00
TOTAL This Period (last page this line number only).....	114.00

**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 36 OF 53
	<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 of Individual (Last, First, Middle Initial) or Full Organization Name
GRAF, ANDREAS, M, ,

Mailing Address 3975 Stockton Ln

City Dallas State TX Zip Code 75287-4921

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

Name of Employer (for Individual) Tenet Healthcare Occupation (for Individual) Manager, Travel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
209.00

Date of Receipt
MM / DD / YYYY
05 / 27 / 2017

Transaction ID : **A5BD6A4949C9B445D975**

Amount of Each Receipt this Period
38.00

Memo Item
Payroll Deduction: \$19.00/Bi-Weekly

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LEFFLER, BARRY, , ,

Mailing Address 4123 Wycliff Ave

City Dallas State TX Zip Code 75219-3005

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

Name of Employer (for Individual) Tenet Healthcare Occupation (for Individual) VP, MARKETING

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
209.00

Date of Receipt
MM / DD / YYYY
05 / 27 / 2017

Transaction ID : **A4A321E558CF8451D95F**

Amount of Each Receipt this Period
38.00

Memo Item
Payroll Deduction: \$19.00/Bi-Weekly

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
COVARRUBIAS, MARITA, , ,

Mailing Address 7115 Wildgrove Ave

City Dallas State TX Zip Code 75214-3841

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

Name of Employer (for Individual) Tenet Healthcare Occupation (for Individual) VP, ASST GENERAL COUNSEL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
209.00

Date of Receipt
MM / DD / YYYY
05 / 27 / 2017

Transaction ID : **A953AB34432E54CC1A91**

Amount of Each Receipt this Period
38.00

Memo Item
Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	114.00
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 37 OF 53
	<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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. SLAVIN, PAUL, , ,			Date of Receipt MM / DD / YYYY 05 / 27 / 2017		
Mailing Address 10912 Cortez Ct			Transaction ID : A6F9A8D05B3A2448884D		
City Frisco	State TX	Zip Code 75033-1774	Amount of Each Receipt this Period 38.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item Payroll Deduction: \$19.00/Bi-Weekly		
Name of Employer (for Individual) Tenet Healthcare		Occupation (for Individual) VP, COMP BENF & CORP HR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 209.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. HONGOLA, MICHAEL, S, ,			Date of Receipt MM / DD / YYYY 05 / 27 / 2017		
Mailing Address 6704 Westmont Dr			Transaction ID : AF6F766E321AB4C04ACE		
City Colleyville	State TX	Zip Code 76034-7263	Amount of Each Receipt this Period 38.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item Payroll Deduction: \$19.00/Bi-Weekly		
Name of Employer (for Individual) Tenet Healthcare		Occupation (for Individual) VP, Erp Systems			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 209.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. CASTANON, PAUL, A, ,			Date of Receipt MM / DD / YYYY 05 / 27 / 2017		
Mailing Address 6307 Preston Pkwy			Transaction ID : A2ACF8A502FB0474E91A		
City Dallas	State TX	Zip Code 75205-1650	Amount of Each Receipt this Period 38.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item Payroll Deduction: \$19.00/Bi-Weekly		
Name of Employer (for Individual) Tenet Healthcare		Occupation (for Individual) VP, Deputy General Counsel & Corp Se			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 209.00			

SUBTOTAL of Receipts This Page (optional).....	114.00
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 38 OF 53	
	<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. GILES, SHELLEY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3803 Stockton Ln

City Dallas	State TX	Zip Code 75287-4919
----------------	-------------	------------------------

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

Name of Employer (for Individual)
Tenet Healthcare

Occupation (for Individual)
Director, Relocation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
MM / DD / YYYY
05 / 27 / 2017

Transaction ID : **A554CCC154EB2419E964**

Amount of Each Receipt this Period
40.00

Memo Item
Payroll Deduction: \$20.00/Bi-Weekly

B. FALKE, JEREMY, D, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1701 Natural Bridge Dr

City Frisco	State TX	Zip Code 75034-4355
----------------	-------------	------------------------

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

Name of Employer (for Individual)
Tenet Healthcare

Occupation (for Individual)
VP, Talent, Cult&Perf Sys

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
209.00

Date of Receipt
MM / DD / YYYY
05 / 27 / 2017

Transaction ID : **AB41FE19449214374951**

Amount of Each Receipt this Period
38.00

Memo Item
Payroll Deduction: \$19.00/Bi-Weekly

C. PEDDY-NICOLAS, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1445 Ross Ave
Ste 1400

City Dallas	State TX	Zip Code 75202-2703
----------------	-------------	------------------------

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

Name of Employer (for Individual)
Tenet Healthcare

Occupation (for Individual)
VP, Corp Communications

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
209.00

Date of Receipt
MM / DD / YYYY
05 / 27 / 2017

Transaction ID : **A62EE7E63235E492BB6D**

Amount of Each Receipt this Period
38.00

Memo Item
Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	116.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 39 OF 53
Use separate schedule(s) for each category of the Detailed Summary Page
[X] 11a [] 11b [] 11c [] 12
[] 13 [] 14 [] 15 [] 16 [] 17

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JONES, TARA, , ,
Mailing Address 24 Surrey Ln
City Natick State MA Zip Code 01760-3337
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) Tenet Healthcare Occupation (for Individual) VP, Client Services
Receipt For: [] Primary [] General [] Other (specify)
Aggregate Year-to-Date 209.00

Date of Receipt 05 / 27 / 2017
Transaction ID : A67ED8C045AED4F69B68
Amount of Each Receipt this Period 38.00
Memo Item
Payroll Deduction: \$19.00/Bi-Weekly

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
DEONARINE, LEONARD, , ,
Mailing Address 1129 Wishing Well Ct
City Cedar Hill State TX Zip Code 75104-8255
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) Tenet Healthcare Occupation (for Individual) Director, Business Continuity
Receipt For: [] Primary [] General [] Other (specify)
Aggregate Year-to-Date 209.00

Date of Receipt 05 / 27 / 2017
Transaction ID : A9ABE487D279140CD857
Amount of Each Receipt this Period 38.00
Memo Item
Payroll Deduction: \$19.00/Bi-Weekly

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SASSANO, DAVID, , ,
Mailing Address 10847 Lochspring Dr
City Dallas State TX Zip Code 75218-1201
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) Tenet Healthcare Occupation (for Individual) Director, Reg Phy Bus Dev
Receipt For: [] Primary [] General [] Other (specify)
Aggregate Year-to-Date 209.00

Date of Receipt 05 / 27 / 2017
Transaction ID : AD4541C2B830F4D25B28
Amount of Each Receipt this Period 38.00
Memo Item
Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional) 114.00
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 40 OF 53
	<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. KRETZSCHMAR, NORMA, . . .
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1445 Ross Ave
 Ste 1400
 City Dallas State TX Zip Code 75202-2703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Tenet Healthcare Occupation (for Individual) VP, Fin Hosp Ops & Integ
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 209.00

Date of Receipt
 05 / 27 / 2017
 Transaction ID : A4BA3ED30D71642B6B78
 Amount of Each Receipt this Period
 38.00
 Memo Item
 Payroll Deduction: \$19.00/Bi-Weekly

B. KATZ, DAVID, . . .
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 363 Saint Clair St
 City Grosse Pointe State MI Zip Code 48230-1501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Tenet Healthcare Occupation (for Individual) Director, Government Relations
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 211.53

Date of Receipt
 05 / 27 / 2017
 Transaction ID : A10928B0185B340BB8C0
 Amount of Each Receipt this Period
 38.46
 Memo Item
 Payroll Deduction: \$19.23/Bi-Weekly

C. MURPHY, TYLER, . . .
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 108 Londonberry Ter
 City Southlake State TX Zip Code 76092-7321
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Tenet Healthcare Occupation (for Individual) VP & Treasurer
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 209.00

Date of Receipt
 05 / 27 / 2017
 Transaction ID : A0DBD8F6DD1904634B71
 Amount of Each Receipt this Period
 38.00
 Memo Item
 Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	114.46
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: (check only one)	PAGE 41 OF 53		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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

A. TURTON, KENDALL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 520 Madison Oak Dr
 City San Antonio State TX Zip Code 78258-3913
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) North Central Baptist Hospital Occupation (for Individual) CHIEF HR OFFICER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 209.00

Date of Receipt
 05 / 27 / 2017
 Transaction ID : AB351FC9863964D9A8A5
 Amount of Each Receipt this Period
 38.00
 Memo Item
 Payroll Deduction: \$19.00/Bi-Weekly

B. PHILLIPS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1000 1st St N
 City Alabaster State AL Zip Code 35007-8703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Brookwood Baptist Health Occupation (for Individual) CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 05 / 27 / 2017
 Transaction ID : AB8782825E2D64D1AA3D
 Amount of Each Receipt this Period
 40.00
 Memo Item
 Payroll Deduction: \$20.00/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 ▼
 486.00

Date of Receipt
 05 / 27 / 2017
 Transaction ID : A508702DB784E4FD6A95
 Amount of Each Receipt this Period
 96.00
 Memo Item
 Payroll Deduction: \$96.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	174.00
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 42 OF 53
	<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	

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. POSTLETHWAIT, ELIZABETH, . .
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 701 Princeton Ave SW
 City Birmingham State AL Zip Code 35211-1303
 Date of Receipt 05 / 27 / 2017
 Transaction ID : A884D6255C0644AD4B3B
 Amount of Each Receipt this Period 38.00
 Memo Item
 Payroll Deduction: \$19.00/Bi-Weekly
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) BAPTIST HEALTH SYSTEM Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 459.00

B. MOREY, SCOTT, . .
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4634 N 36th St
 City Phoenix State AZ Zip Code 85018-3422
 Date of Receipt 05 / 27 / 2017
 Transaction ID : A28D4A305A9F14024BB9
 Amount of Each Receipt this Period 38.00
 Memo Item
 Payroll Deduction: \$19.00/Bi-Weekly
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) ABRAZO WEST CAMPUS Occupation (for Individual) CNO
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 209.00

C. HOLM, STAN, . .
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20996 W Cora Vis
 City Buckeye State AZ Zip Code 85396-7541
 Date of Receipt 05 / 27 / 2017
 Transaction ID : A99B42AE5E85C4833955
 Amount of Each Receipt this Period 38.00
 Memo Item
 Payroll Deduction: \$19.00/Bi-Weekly
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) ABRAZO WEST CAMPUS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 209.00

SUBTOTAL of Receipts This Page (optional) ▶ 114.00
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 43 OF 53	
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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. KING, MICHAEL, J, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2713 Stuyvesant Cir

City Modesto State CA Zip Code 95356-0337

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

Name of Employer (for Individual) GRIFFIN-SPALDING HOSPITAL Occupation (for Individual) CFO (POOL)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
209.00

Date of Receipt
MM / DD / YYYY
05 / 27 / 2017

Transaction ID : **A896FAEAD4E834FFE9D3**

Amount of Each Receipt this Period
38.00

Memo Item
Payroll Deduction: \$19.00/Bi-Weekly

B. EWALD, LUANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 232 Midland Blvd

City Royal Oak State MI Zip Code 48073-2670

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

Name of Employer (for Individual) DMC-Children's Hospital of Michigan Occupation (for Individual) DBD-ASSOC ADMINISTRATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
209.00

Date of Receipt
MM / DD / YYYY
05 / 27 / 2017

Transaction ID : **A252E6637E00041A9A67**

Amount of Each Receipt this Period
38.00

Memo Item
Payroll Deduction: \$19.00/Bi-Weekly

C. BRYAN, MARK, H, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17318 Pavaroso St

City Boca Raton State FL Zip Code 33496-3203

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

Name of Employer (for Individual) DELRAY COMMUNITY HOSPITAL Occupation (for Individual) CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
209.00

Date of Receipt
MM / DD / YYYY
05 / 27 / 2017

Transaction ID : **AC98EE6F236914342856**

Amount of Each Receipt this Period
38.00

Memo Item
Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶ 114.00

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 44 OF 53
	<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. FOWLER, KAREN, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8306 Turquoise St
 City El Paso State TX Zip Code 79904-2513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Providence Memorial Campus Occupation (for Individual) CNO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 209.00

Date of Receipt 05 / 27 / 2017
 Transaction ID : A4BEF72D5364D45608DB
 Amount of Each Receipt this Period 38.00
 Memo Item
 Payroll Deduction: \$19.00/Bi-Weekly

B. QUIAMBAO, CEZAR, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 845 Brisa Del Mar Dr
 City El Paso State TX Zip Code 79912-1513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Providence Memorial Campus Occupation (for Individual) Director, Respiratory Services
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 209.00

Date of Receipt 05 / 27 / 2017
 Transaction ID : A5E0E9B8AFFFR4C3CARE
 Amount of Each Receipt this Period 38.00
 Memo Item
 Payroll Deduction: \$19.00/Bi-Weekly

C. KNOX, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8327 Winecup HI
 City San Antonio State TX Zip Code 78256-2498
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BAPTIST HEALTH SYSTEM Occupation (for Individual) CEO-Chief Admin Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 459.00

Date of Receipt 05 / 27 / 2017
 Transaction ID : AB107164A363F47D9AEC
 Amount of Each Receipt this Period 38.00
 Memo Item
 Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	114.00
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 45 OF 53	
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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

A. JOHNSTON, GREGORY, . . .
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1130 22nd St S
 City Birmingham State AL Zip Code 35205-2870
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BAPTIST HEALTH SYSTEM Occupation (for Individual) COO, Market/Sys
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 209.00

Date of Receipt 05 / 27 / 2017
 Transaction ID : A8EE3D4BB109F4CD182A
 Amount of Each Receipt this Period 38.00
 Memo Item
 Payroll Deduction: \$19.00/Bi-Weekly

B. CARTER, RICHARD, D, . . .
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5166 Lake Crest Cir
 City Hoover State AL Zip Code 35226-5027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BAPTIST HEALTH SYSTEM Occupation (for Individual) CFO, Market/Sys
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 209.00

Date of Receipt 05 / 27 / 2017
 Transaction ID : ADC2E789C1AF44783809
 Amount of Each Receipt this Period 38.00
 Memo Item
 Payroll Deduction: \$19.00/Bi-Weekly

C. PARROTT, KEITH, . . .
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1130 22nd St S
 City Birmingham State AL Zip Code 35205-2870
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BAPTIST HEALTH SYSTEM Occupation (for Individual) CEO, Market/Sys
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 209.00

Date of Receipt 05 / 27 / 2017
 Transaction ID : A97DB498F7A974F5B936
 Amount of Each Receipt this Period 38.00
 Memo Item
 Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional) **114.00**
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 46 OF 53	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. FENN, GEORGE, , ,			Date of Receipt MM / DD / YYYY 05 / 27 / 2017	
Mailing Address 1130 22nd St S			Transaction ID : AEACAB57009C44EA78BC	
City Birmingham	State AL	Zip Code 35205-2870	Amount of Each Receipt this Period 38.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item Payroll Deduction: \$19.00/Bi-Weekly	
Name of Employer (for Individual) BAPTIST HEALTH SYSTEM		Occupation (for Individual) Chief Integration Offr		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 209.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. NEAL, VALETA, , ,			Date of Receipt MM / DD / YYYY 05 / 27 / 2017	
Mailing Address 1130 22nd St S			Transaction ID : A8A53AE10F34A40A0B42	
City Birmingham	State AL	Zip Code 35205-2870	Amount of Each Receipt this Period 38.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item Payroll Deduction: \$19.00/Bi-Weekly	
Name of Employer (for Individual) BAPTIST HEALTH SYSTEM		Occupation (for Individual) Sr Director Phy Pract Ops		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 209.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. BENZ, MARK, , ,			Date of Receipt MM / DD / YYYY 05 / 27 / 2017	
Mailing Address 1754 Forge Mountain Dr			Transaction ID : A575A1375B81C43F1985	
City Phoenixville	State PA	Zip Code 19460-4630	Amount of Each Receipt this Period 38.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item Payroll Deduction: \$19.00/Bi-Weekly	
Name of Employer (for Individual) CARONDELET ST JOSEPHS		Occupation (for Individual) CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 209.00		

SUBTOTAL of Receipts This Page (optional).....	114.00
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 47 OF 53
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <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)
TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. EADIE, REGINALD, , ,		Date of Receipt
Mailing Address 246 Keelson Dr		MM / DD / YYYY 05 / 27 / 2017
City Detroit	State MI	Zip Code 48215-3056
FEC ID number of contributing federal political committee. C		Transaction ID : AF858548D26B14216800
Name of Employer (for Individual) DMC-Harper University Hospital		Occupation (for Individual) CEO
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 211.64	Amount of Each Receipt this Period 38.48
		<input type="checkbox"/> Memo Item Payroll Deduction: \$19.24/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. JORDAN, KENNETH, E, ,		Date of Receipt
Mailing Address 17331 Almelo Ln		MM / DD / YYYY 05 / 27 / 2017
City Huntingtn Bch	State CA	Zip Code 92649-4620
FEC ID number of contributing federal political committee. C		Transaction ID : A7F25CDA130044E39B48
Name of Employer (for Individual) FOUNTAIN VALLEY REGIONAL HOSPITAL		Occupation (for Individual) CFO
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 209.00	Amount of Each Receipt this Period 38.00
		<input type="checkbox"/> Memo Item Payroll Deduction: \$19.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. SCHWARTZ, KEN, , ,		Date of Receipt
Mailing Address 3560 Dallas Pkwy		MM / DD / YYYY 05 / 27 / 2017
City Frisco	State TX	Zip Code 75034-8635
FEC ID number of contributing federal political committee. C		Transaction ID : A605B3A675D184ECCBB0
Name of Employer (for Individual) Tenet Patient Financial Services		Occupation (for Individual) SENIOR COUNSEL
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 209.00	Amount of Each Receipt this Period 38.00
		<input type="checkbox"/> Memo Item Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	114.48
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 48 OF 53
Use separate schedule(s) for each category of the Detailed Summary Page
11a 11b 11c 12
13 14 15 16 17

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

A. TYLER, CHRIS, ,
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) VP, Information Systems
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 209.00

Date of Receipt 05 / 27 / 2017
Transaction ID : A2E66C622C35A4C5EBBD
Amount of Each Receipt this Period 38.00
Memo Item
Payroll Deduction: \$19.00/Bi-Weekly

B. DALEY, DEBORAH, ,
Mailing Address PO Box 757
City Edgewood State TX Zip Code 75117-0757
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) TENET HEALTHCARE CORPORATION Occupation (for Individual) ASST - ADMINISTRATIVE
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 220.00

Date of Receipt 05 / 27 / 2017
Transaction ID : A15C850E3B0E94A77ADF
Amount of Each Receipt this Period 40.00
Memo Item
Payroll Deduction: \$20.00/Bi-Weekly

C. TURTON, JONATHAN, ,
Mailing Address 111 Dallas St
City San Antonio State TX Zip Code 78205-1201
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) Baptist Medical Center Occupation (for Individual) CEO-Chief Admin Officer
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 209.00

Date of Receipt 05 / 27 / 2017
Transaction ID : ABF31B4C0F612412CB76
Amount of Each Receipt this Period 38.00
Memo Item
Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional) 116.00
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 49 OF 53		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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

A. MASON, JENNIFER, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5411 NE 22nd Ave
 City Fort Lauderdale State FL Zip Code 33308-3224
 Date of Receipt 05 / 27 / 2017
 Transaction ID : AF7D4B26CCBF64583AD6
 Amount of Each Receipt this Period 38.00
 Memo Item
 Payroll Deduction: \$19.00/Bi-Weekly
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Tenet Patient Financial Services Occupation (for Individual) COMPLIANCE OFFICER SR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 209.00

B. PATTERSON, JANIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5572 Southern Hills Dr
 City Frisco State TX Zip Code 75034-6862
 Date of Receipt 05 / 27 / 2017
 Transaction ID : AE200DBD1D2B4457BREF
 Amount of Each Receipt this Period 38.00
 Memo Item
 Payroll Deduction: \$19.00/Bi-Weekly
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Tenet Patient Financial Services Occupation (for Individual) SVP, Revenue Cycle Management
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 209.00

C. SMITH, LISA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8524 Majestic Oak Ct
 City Montgomery State TX Zip Code 77316-3198
 Date of Receipt 05 / 27 / 2017
 Transaction ID : A427C7AF0C36745B69CF
 Amount of Each Receipt this Period 38.00
 Memo Item
 Payroll Deduction: \$19.00/Bi-Weekly
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Tenet Patient Financial Services Occupation (for Individual) Director, Mecs
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 209.00

SUBTOTAL of Receipts This Page (optional).....▶ 114.00
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 50 OF 53	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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

A. BYRD, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2000 Trans Mountain Rd

City El Paso	State TX	Zip Code 79911-3601
-----------------	-------------	------------------------

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

Name of Employer (for Individual) PROVIDENCE TRANSMTN CMPS	Occupation (for Individual) CFO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
209.00

Date of Receipt
MM / DD / YYYY
05 / 27 / 2017

Transaction ID : A45028213DA424572BEA

Amount of Each Receipt this Period
38.00

Memo Item
Payroll Deduction: \$19.00/Bi-Weekly

B. CHACKO, BENSON, P, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6308 La Posta Dr

City El Paso	State TX	Zip Code 79912-1863
-----------------	-------------	------------------------

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

Name of Employer (for Individual) PROVIDENCE SIERRA CAMPUS	Occupation (for Individual) COO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
209.00

Date of Receipt
MM / DD / YYYY
05 / 27 / 2017

Transaction ID : AF2FDC589278D4DF2821

Amount of Each Receipt this Period
38.00

Memo Item
Payroll Deduction: \$19.00/Bi-Weekly

C. VARGAS, MONICA, C, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4017 Flamingo Dr

City El Paso	State TX	Zip Code 79902-1313
-----------------	-------------	------------------------

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

Name of Employer (for Individual) PROVIDENCE SIERRA CAMPUS	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
209.00

Date of Receipt
MM / DD / YYYY
05 / 27 / 2017

Transaction ID : A2223B12092F34FDDA73

Amount of Each Receipt this Period
38.00

Memo Item
Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	114.00
TOTAL This Period (last page this line number only).....▶	13894.94

**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. Richard E Neal For Congress Committee			Date of Disbursement MM / DD / YYYY 05 / 02 / 2017		
Mailing Address 76 Magnolia Terrace			FEC Identification Number C H8MA02041 Transaction ID : B35500D4CE Amount of Each Disbursement this Period 1500.00		
City Springfield	State MA	Zip Code 01108-2533	Category/ Type		
Purpose of Disbursement Political Contribution			Memo Item <input type="checkbox"/>		
Candidate Name Neal, Richard, E., Rep.,			Disbursement For: 2018		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: MA District: 01					

Full Name (Last, First, Middle Initial) B. KATHERINE CLARK FOR CONGRESS			Date of Disbursement MM / DD / YYYY 05 / 02 / 2017		
Mailing Address PO BOX 361			FEC Identification Number C C00541888 Transaction ID : B11B3491116 Amount of Each Disbursement this Period 1000.00		
City MALDEN	State MA	Zip Code 02148	Category/ Type		
Purpose of Disbursement Political Contribution			Memo Item <input type="checkbox"/>		
Candidate Name Clark, Katherine, , ,			Disbursement For: 2018		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: MA District: 05					

Full Name (Last, First, Middle Initial) C. NEW PIONEERS PAC			Date of Disbursement MM / DD / YYYY 05 / 02 / 2017		
Mailing Address 213 Ashby St.			FEC Identification Number C C00459123 Transaction ID : B79BFC1F31 Amount of Each Disbursement this Period 5000.00		
City Alexandria	State VA	Zip Code 22305-2902	Category/ Type		
Purpose of Disbursement Political Contribution			Memo Item <input type="checkbox"/>		
Candidate Name NEW PIONEERS PAC			Disbursement For: 2017		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼			
State: District:		Other			

SUBTOTAL of Disbursements This Page (optional).....▶	7500.00
TOTAL This Period (last page this line number only).....▶	7500.00

**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)

21b 22 23 26 27
 28a 28b 28c 29 30b

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Citizens for Hughes

Mailing Address 4950 Parkside Avenue, Suite 103

Date of Disbursement

MM / DD / YYYY
05 / 02 / 2017

City
Philadelphia

State
PA

Zip Code
19131-4700

FEC Identification Number

C

Transaction ID : BAF5EBAC0

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
Political Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

Memo Item

Full Name (Last, First, Middle Initial)

B. Monica Alonzo Campaign

Mailing Address P.O. Box 4126

Date of Disbursement

MM / DD / YYYY
05 / 02 / 2017

City
Dallas

State
TX

Zip Code
75208-0126

FEC Identification Number

C

Transaction ID : B1ED8A69B2

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
General

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2017
 Primary General
 Other (specify) Other

Memo Item

Full Name (Last, First, Middle Initial)

C. Friends of Matt Wood Campaign

Mailing Address 719 Skillman

Date of Disbursement

MM / DD / YYYY
05 / 02 / 2017

City
Dallas

State
TX

Zip Code
75214-4631

FEC Identification Number

C

Transaction ID : B80C5BB004

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
General

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2017
 Primary General
 Other (specify) Other

Memo Item

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

4000.00

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)

21b 22 23 26 27
28a 28b 28c X 29 30b

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Lee Kleinman Campaign Fund

Mailing Address 11322 East Ricks Circle

Date of Disbursement

05 02 2017

City Dallas State TX Zip Code 75230-3026

FEC Identification Number

C

Transaction ID : B5B1B5E76B

Amount of Each Disbursement this Period

500.00

Office Sought: House Senate President

Disbursement For: 2017
Primary General
Other (specify) Other

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

Date of Disbursement

City State Zip Code

FEC Identification Number

C

Amount of Each Disbursement this Period

Office Sought: House Senate President

Disbursement For:
Primary General
Other (specify)

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

City State Zip Code

FEC Identification Number

C

Amount of Each Disbursement this Period

Office Sought: House Senate President

Disbursement For:
Primary General
Other (specify)

Memo Item

SUBTOTAL of Disbursements This Page (optional)

500.00

TOTAL This Period (last page this line number only)

4500.00