

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

HealthSouth Corporation Political Action Committee

ADDRESS (number and street)

3660 Grandview Parkway, Suite 200

Check if different  
than previously  
reported. (ACC)

Birmingham

AL

35243

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00414649

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15  
Quarterly Report (Q1)
- ☐ July 15  
Quarterly Report (Q2)
- ☐ October 15  
Quarterly Report (Q3)
- ☐ January 31  
Year-End Report (YE)
- ☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)
- ☐ Termination Report  
(TER)

(b) Monthly  
Report  
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)  
(Non-Election  
Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)  
(Non-Election  
Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☒ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

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

in the  
State of(d) 30-Day  
POST-Election  
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

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

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
09 01 2017

through

M M M / D D D / Y Y Y Y Y Y  
09 30 2017

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Fay, Edmund, M., ,

Type or Print Name of Treasurer

Signature of Treasurer

Fay, Edmund, M., ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
10 19 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.

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

HealthSouth Corporation Political Action Committee

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
09 / 01 / 2017 To: M M / D D / Y Y Y Y Y Y  
09 / 30 / 2017

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2017</span>		<span style="border: 1px solid black; padding: 2px;">15528.58</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">31038.92</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">4500.84</span>	<span style="border: 1px solid black; padding: 2px;">52707.64</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">35539.76</span>	<span style="border: 1px solid black; padding: 2px;">68236.22</span>
7. Total Disbursements (from Line 31).....	<span style="border: 1px solid black; padding: 2px;">18500.00</span>	<span style="border: 1px solid black; padding: 2px;">51196.46</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<span style="border: 1px solid black; padding: 2px;">17039.76</span>	<span style="border: 1px solid black; padding: 2px;">17039.76</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	

☒ 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

HealthSouth Corporation Political Action Committee

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y Y  
 09 / 01 / 2017

To:

 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 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).....

3409.84

34528.64

(ii) Unitemized .....

1091.00

18179.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

4500.84

52707.64

(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) .....

4500.84

52707.64

## 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)) .....

4500.84

52707.64

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

4500.84

52707.64

# **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.....	18500.00	48500.00
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	805.00
(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	805.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	1891.46
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)) ..	18500.00	51196.46
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	18500.00	51196.46

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	4500.84	52707.64
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	805.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	4500.84	51902.64
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: PAGE 6 OF 43  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HealthSouth Corporation Political Action Committee**

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

**A. Adams, Steven, Charles, ,**

Mailing Address 37 Louanis Drive

City  
Reading

State  
MA

Zip Code  
01867

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional Marketing Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 14 / 2017

**Transaction ID : SA11AI.27806**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

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

**B. Adams, Steven, Charles, ,**

Mailing Address 37 Louanis Drive

City  
Reading

State  
MA

Zip Code  
01867

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional Marketing Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 20 / 2017

**Transaction ID : SA11AI.27909**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

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

**C. Alwine, Steven, L., ,**

Mailing Address 635 Marlow Drive

City  
York

State  
PA

Zip Code  
17402

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Hospital Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 14 / 2017

**Transaction ID : SA11AI.27807**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Payroll Deduction (\$10, 2 weeks)

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

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

50.00

# **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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HealthSouth Corporation Political Action Committee**

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

**A. Alwine, Steven, L., ,**

Mailing Address 635 Marlow Drive

City  
York

State  
PA

Zip Code  
17402

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Hospital Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

MM / DD / YYYY  
09 / 20 / 2017

**Transaction ID : SA11AI.27910**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Payroll Deduction (\$10, 2 weeks)

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

**B. Bennett, Tony, , ,**

Mailing Address 3108 Preserve Rookery Boulevard

City

Panama City Beach

State

FL

Zip Code

32408

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Hospital Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

MM / DD / YYYY  
09 / 14 / 2017

**Transaction ID : SA11AI.27813**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

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

**C. Bennett, Tony, , ,**

Mailing Address 3108 Preserve Rookery Boulevard

City

Panama City Beach

State

FL

Zip Code

32408

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Hospital Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

380.00

Date of Receipt

MM / DD / YYYY  
09 / 20 / 2017

**Transaction ID : SA11AI.27916**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

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

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

50.00

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HealthSouth Corporation Political Action Committee**

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

**A. Berry, David, , ,**

Mailing Address 175 Central Street

City

North Reading

State

MA

Zip Code

01864

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

HealthSouth Corporation

Occupation (for Individual)

Regional Managed Care Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 14 / 2017

**Transaction ID : SA11AI.27814**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

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

**B. Berry, David, , ,**

Mailing Address 175 Central Street

City

North Reading

State

MA

Zip Code

01864

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

HealthSouth Corporation

Occupation (for Individual)

Regional Managed Care Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 20 / 2017

**Transaction ID : SA11AI.27917**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

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

**C. Bitner, Gretchin, P., ,**

Mailing Address 20421 Anchor Circle

City

Huntington Beach

State

CA

Zip Code

92646

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

HealthSouth Corporation

Occupation (for Individual)

Therapy Operations Director

Receipt For:

☐ Primary  
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 14 / 2017

**Transaction ID : SA11AI.27815**

Amount of Each Receipt this Period

15.00

☐ Memo Item

Payroll Deduction (\$15, 2 weeks)

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

55.00

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



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

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FOR LINE NUMBER:  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**HealthSouth Corporation Political Action Committee**

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

**A. Bitner, Gretchin, P., ,**

Mailing Address 20421 Anchor Circle

City

Huntington Beach

State

CA

Zip Code

92646

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

HealthSouth Corporation

Occupation (for Individual)

Therapy Operations Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

MM / DD / YYYY  
09 / 20 / 2017

**Transaction ID : SA11AI.27918**

Amount of Each Receipt this Period

15.00

☐ Memo Item

Payroll Deduction (\$15, 2 weeks)

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

**B. Braz, Marcus, John, ,**

Mailing Address 8291 Deerbrook Circle

City

Sarasota

State

FL

Zip Code

34238

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

HealthSouth Corporation

Occupation (for Individual)

Hospital Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

MM / DD / YYYY  
09 / 14 / 2017

**Transaction ID : SA11AI.27816**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Payroll Deduction (\$25, 2 weeks)

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

**C. Braz, Marcus, John, ,**

Mailing Address 8291 Deerbrook Circle

City

Sarasota

State

FL

Zip Code

34238

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

HealthSouth Corporation

Occupation (for Individual)

Hospital Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

475.00

Date of Receipt

MM / DD / YYYY  
09 / 20 / 2017

**Transaction ID : SA11AI.27919**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Payroll Deduction (\$25, 2 weeks)

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

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

65.00

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 43

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HealthSouth Corporation Political Action Committee**

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

A. Brewer, Jennifer, , ,

Mailing Address 5030 Iroquois Drive

City  
Frisco

State  
TX

Zip Code  
75034

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Hospital Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 14 / 2017

Transaction ID : SA11AI.27817

Amount of Each Receipt this Period

20.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

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

B. Brewer, Jennifer, , ,

Mailing Address 5030 Iroquois Drive

City  
Frisco

State  
TX

Zip Code  
75034

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Hospital Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 20 / 2017

Transaction ID : SA11AI.27920

Amount of Each Receipt this Period

20.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

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

C. Brown, Jr., Frank, , ,

Mailing Address 24507 Old Windmill Trail

City  
Hockley

State  
TX

Zip Code  
77447

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 14 / 2017

Transaction ID : SA11AI.27818

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction (\$40, 2 weeks)

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

80.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 43

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HealthSouth Corporation Political Action Committee**

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

A. Brown, Jr., Frank, , ,

Mailing Address 24507 Old Windmill Trail

City  
Hockley

State  
TX

Zip Code  
77447

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

760.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 20 / 2017

Transaction ID : SA11AI.27921

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction (\$40, 2 weeks)

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

B. Brown, Terrence, , ,

Mailing Address 5217 Meadow Garden Lane

City  
Birmingham

State  
AL

Zip Code  
35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Healthsouth Corporation

Occupation (for Individual)  
Regional Operations Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 14 / 2017

Transaction ID : SA11AI.27819

Amount of Each Receipt this Period

19.00

☐ Memo Item

Payroll Deduction (\$19, 2 weeks)

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

C. Brown, Terrence, , ,

Mailing Address 5217 Meadow Garden Lane

City  
Birmingham

State  
AL

Zip Code  
35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Healthsouth Corporation

Occupation (for Individual)  
Regional Operations Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

361.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 20 / 2017

Transaction ID : SA11AI.27922

Amount of Each Receipt this Period

19.00

☐ Memo Item

Payroll Deduction (\$19, 2 weeks)

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

78.00

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  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HealthSouth Corporation Political Action Committee**

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

**A. Buck, Phylis, A., ,**

Mailing Address PO Box 6939

City  
Texarkana

State  
TX

Zip Code  
75505

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

HealthSouth Corporation

Occupation (for Individual)

Hospital Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

09 / 14 / 2017

Transaction ID : SA11AI.27820

Amount of Each Receipt this Period

15.00

☐ Memo Item

Payroll Deduction (\$15, 2 weeks)

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

**B. Buck, Phylis, A., ,**

Mailing Address PO Box 6939

City  
Texarkana

State  
TX

Zip Code  
75505

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

HealthSouth Corporation

Occupation (for Individual)

Hospital Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

09 / 20 / 2017

Transaction ID : SA11AI.27923

Amount of Each Receipt this Period

15.00

☐ Memo Item

Payroll Deduction (\$15, 2 weeks)

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

**c. Byrd, Charles, Richard, , III**

Mailing Address 3609 Ridgcrest Road

City  
Birmingham

State  
AL

Zip Code  
35223

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

HealthSouth Corporation

Occupation (for Individual)

National Real Estate Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

432.00

Date of Receipt

09 / 14 / 2017

Transaction ID : SA11AI.27822

Amount of Each Receipt this Period

24.00

☐ Memo Item

Payroll Deduction (\$24, 2 weeks)

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

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

54.00

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 13 OF 43

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HealthSouth Corporation Political Action Committee**

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

**A. Byrd, Charles, Richard, , III**

Mailing Address 3609 Ridgecrest Road

City  
Birmingham

State  
AL

Zip Code  
35223

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
National Real Estate Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 20 / 2017

Transaction ID : SA11AI.27925

Amount of Each Receipt this Period

24.00

☐ Memo Item

Payroll Deduction (\$24, 2 weeks)

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

**B. Conn, Kevin, R., ,**

Mailing Address 6192 NW 88th Avenue

City  
Parkland

State  
FL

Zip Code  
33067

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional Operations Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 14 / 2017

Transaction ID : SA11AI.27825

Amount of Each Receipt this Period

20.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

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

**C. Conn, Kevin, R., ,**

Mailing Address 6192 NW 88th Avenue

City  
Parkland

State  
FL

Zip Code  
33067

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional Operations Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 20 / 2017

Transaction ID : SA11AI.27929

Amount of Each Receipt this Period

20.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

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

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

64.00

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**HealthSouth Corporation Political Action Committee**

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

**A. Darby, John, P., ,**

Mailing Address 3115 Overhill Road

City  
Birmingham

State  
AL

Zip Code  
35223

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 14 / 2017

Transaction ID : SA11AI.27827

Amount of Each Receipt this Period

100.00

☐ Memo Item

Payroll Deduction (\$100, 2 weeks)

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

**B. Darby, John, P., ,**

Mailing Address 3115 Overhill Road

City  
Birmingham

State  
AL

Zip Code  
35223

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

09 / 20 / 2017

Transaction ID : SA11AI.27931

Amount of Each Receipt this Period

100.00

☐ Memo Item

Payroll Deduction (\$100, 2 weeks)

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

**C. Dedecker, Troy, , ,**

Mailing Address 5507 Falmouth

City  
Fairway

State  
KS

Zip Code  
66205

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 14 / 2017

Transaction ID : SA11AI.27829

Amount of Each Receipt this Period

50.00

☐ Memo Item

Payroll Deduction (\$50, 2 weeks)

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

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

250.00

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

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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)

**HealthSouth Corporation Political Action Committee**

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

**A. Dedecker, Troy, , ,**

Mailing Address 5507 Falmouth

City  
Fairway

State  
KS

Zip Code  
66205

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 20 / 2017

**Transaction ID : SA11AI.27933**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Payroll Deduction (\$50, 2 weeks)

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

**B. Devaney, Catherine, V., ,**

Mailing Address 19 Buckingham Drive

City  
Bow

State  
NH

Zip Code  
03304

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Hospital Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 14 / 2017

**Transaction ID : SA11AI.27830**

Amount of Each Receipt this Period

15.00

☐ Memo Item

Payroll Deduction (\$15, 2 weeks)

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

**C. Devaney, Catherine, V., ,**

Mailing Address 19 Buckingham Drive

City  
Bow

State  
NH

Zip Code  
03304

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Hospital Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 20 / 2017

**Transaction ID : SA11AI.27934**

Amount of Each Receipt this Period

15.00

☐ Memo Item

Payroll Deduction (\$15, 2 weeks)

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

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

80.00



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

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)

**HealthSouth Corporation Political Action Committee**

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

**A. Fay, Edmund, M., ,**

Mailing Address 527 Valley Road

City  
Birmingham

State  
AL

Zip Code  
35206

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Senior Vice President and Treasurer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1494.00

Date of Receipt

09 / 14 / 2017

Transaction ID : SA11AI.27834

Amount of Each Receipt this Period

83.00

☐ Memo Item

Payroll Deduction (\$83, 2 weeks)

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

**B. Fay, Edmund, M., ,**

Mailing Address 527 Valley Road

City  
Birmingham

State  
AL

Zip Code  
35206

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Senior Vice President and Treasurer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1577.00

Date of Receipt

09 / 20 / 2017

Transaction ID : SA11AI.27938

Amount of Each Receipt this Period

83.00

☐ Memo Item

Payroll Deduction (\$83, 2 weeks)

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

**C. Gray, Jerry, , ,**

Mailing Address 7130 East Saddleback Street  
Apt. 56

City  
Mesa

State  
AZ

Zip Code  
85207

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2258.00

Date of Receipt

09 / 14 / 2017

Transaction ID : SA11AI.27838

Amount of Each Receipt this Period

56.00

☐ Memo Item

Payroll Deduction (\$56, 2 weeks)

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

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

222.00



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

Use separate schedule(s)  
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**HealthSouth Corporation Political Action Committee**

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

A. Gray, Jerry, , ,

Mailing Address 7130 East Saddleback Street  
Apt. 56

City  
Mesa

State  
AZ

Zip Code  
85207

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2314.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 20 / 2017

Transaction ID : SA11AI.27942

Amount of Each Receipt this Period

56.00

☐ Memo Item

Payroll Deduction (\$56, 2 weeks)

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

B. Hardin, Nicholas, David, ,

Mailing Address 24014 Clover Trails

City  
Katy

State  
TX

Zip Code  
77494

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Hospital Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 14 / 2017

Transaction ID : SA11AI.27843

Amount of Each Receipt this Period

19.00

☐ Memo Item

Payroll Deduction (\$19, 2 weeks)

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

C. Hardin, Nicholas, David, ,

Mailing Address 24014 Clover Trails

City  
Katy

State  
TX

Zip Code  
77494

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Hospital Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

361.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 20 / 2017

Transaction ID : SA11AI.27947

Amount of Each Receipt this Period

19.00

☐ Memo Item

Payroll Deduction (\$19, 2 weeks)

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

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

94.00

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

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HealthSouth Corporation Political Action Committee**

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

**A. House, William, Bernard, , III**

Mailing Address 1739 Lake Cyrus Club Drive

City  
Hoover

State  
AL

Zip Code  
35244

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 14 / 2017

Transaction ID : SA11AI.27847

Amount of Each Receipt this Period

35.00

☐ Memo Item

Payroll Deduction (\$35, 2 weeks)

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

**B. House, William, Bernard, , III**

Mailing Address 1739 Lake Cyrus Club Drive

City  
Hoover

State  
AL

Zip Code  
35244

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

555.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 20 / 2017

Transaction ID : SA11AI.27951

Amount of Each Receipt this Period

35.00

☐ Memo Item

Payroll Deduction (\$35, 2 weeks)

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

**C. Hunter, Justin, , ,**

Mailing Address 5221 42nd Street NW

City  
Washington

State  
DC

Zip Code  
20015

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Public Policy, Legislation & Regulatio

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 14 / 2017

Transaction ID : SA11AI.27848

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction (\$40, 2 weeks)

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

110.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

**HealthSouth Corporation Political Action Committee**

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

**A. Hunter, Justin, , ,**

Mailing Address 5221 42nd Street NW

City  
Washington

State  
DC

Zip Code  
20015

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Public Policy, Legislation & Regulator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

760.00

Date of Receipt

09 / 20 / 2017

Transaction ID : SA11AI.27952

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction (\$40, 2 weeks)

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

**B. Jacobsmeyer, Barbara, A., ,**

Mailing Address 3908 Herman's Lake Court

City  
Florissant

State  
MO

Zip Code  
63034

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1112.00

Date of Receipt

09 / 14 / 2017

Transaction ID : SA11AI.27849

Amount of Each Receipt this Period

96.00

☐ Memo Item

Payroll Deduction (\$96, 2 weeks)

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

**C. Jacobsmeyer, Barbara, A., ,**

Mailing Address 3908 Herman's Lake Court

City  
Florissant

State  
MO

Zip Code  
63034

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1208.00

Date of Receipt

09 / 20 / 2017

Transaction ID : SA11AI.27953

Amount of Each Receipt this Period

96.00

☐ Memo Item

Payroll Deduction (\$96, 2 weeks)

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

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

232.00

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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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)

**HealthSouth Corporation Political Action Committee**

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

A. Kindle, Mike, , ,

Mailing Address 828 Aberlady Place

City  
Birmingham

State  
AL

Zip Code  
35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Information Technology Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

684.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 14 / 2017

Transaction ID : SA11AI.27855

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction (\$38, 2 weeks)

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

B. Kindle, Mike, , ,

Mailing Address 828 Aberlady Place

City  
Birmingham

State  
AL

Zip Code  
35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Information Technology Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

722.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 20 / 2017

Transaction ID : SA11AI.27959

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction (\$38, 2 weeks)

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

C. Klementz, David, , ,

Mailing Address 808 Parkview Circle

City  
Birmingham

State  
AL

Zip Code  
35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Operations Senior Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1044.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 14 / 2017

Transaction ID : SA11AI.27858

Amount of Each Receipt this Period

58.00

☐ Memo Item

Payroll Deduction (\$58, 2 weeks)

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

134.00

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  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HealthSouth Corporation Political Action Committee**

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

**A. Klementz, David, , ,**

Mailing Address 808 Parkview Circle

City  
Birmingham

State  
AL

Zip Code  
35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Operations Senior Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1102.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 20 / 2017

**Transaction ID : SA11AI.27962**

Amount of Each Receipt this Period

58.00

☐ Memo Item

Payroll Deduction (\$58, 2 weeks)

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

**B. Laffey, Leah, Anne, ,**

Mailing Address 801 Elm Spring Road

City  
Pittsburgh

State  
PA

Zip Code  
15243

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Hospital Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 14 / 2017

**Transaction ID : SA11AI.27860**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

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

**C. Laffey, Leah, Anne, ,**

Mailing Address 801 Elm Spring Road

City  
Pittsburgh

State  
PA

Zip Code  
15243

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Hospital Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

292.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 20 / 2017

**Transaction ID : SA11AI.27964**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

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

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

98.00

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

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 OF 43

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

**HealthSouth Corporation Political Action Committee**

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

**A. Leasure, Stephen, D., ,**

Mailing Address 675 Shades Crest Road

City  
Hoover

State  
AL

Zip Code  
35226

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Senior Associate General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 14 / 2017

Transaction ID : SA11AI.27862

Amount of Each Receipt this Period

20.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

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

**B. Leasure, Stephen, D., ,**

Mailing Address 675 Shades Crest Road

City  
Hoover

State  
AL

Zip Code  
35226

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Senior Associate General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

09 / 20 / 2017

Transaction ID : SA11AI.27966

Amount of Each Receipt this Period

20.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

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

**C. Leech, Robert, Eugene, ,**

Mailing Address 4032 Milner Way

City  
Birmingham

State  
AL

Zip Code  
35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
National Home Health Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

540.00

Date of Receipt

09 / 14 / 2017

Transaction ID : SA11AI.27864

Amount of Each Receipt this Period

30.00

☐ Memo Item

Payroll Deduction (\$30, 2 weeks)

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

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

70.00

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

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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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)

**HealthSouth Corporation Political Action Committee**

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

**A. Leech, Robert, Eugene, ,**

Mailing Address 4032 Milner Way

City  
Birmingham

State  
AL

Zip Code  
35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
National Home Health Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 20 / 2017

Transaction ID : SA11AI.27968

Amount of Each Receipt this Period

30.00

☐ Memo Item

Payroll Deduction (\$30, 2 weeks)

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

**B. Loggins, Phillip, E., ,**

Mailing Address 5022 McLaughlin Drive

City  
Tallahassee

State  
FL

Zip Code  
32309

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional Quality/Risk Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 14 / 2017

Transaction ID : SA11AI.27865

Amount of Each Receipt this Period

15.00

☐ Memo Item

Payroll Deduction (\$15, 2 weeks)

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

**C. Loggins, Phillip, E., ,**

Mailing Address 5022 McLaughlin Drive

City  
Tallahassee

State  
FL

Zip Code  
32309

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional Quality/Risk Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 20 / 2017

Transaction ID : SA11AI.27969

Amount of Each Receipt this Period

15.00

☐ Memo Item

Payroll Deduction (\$15, 2 weeks)

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

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

60.00



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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**HealthSouth Corporation Political Action Committee**

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

**A. Mantegazza, Peter, M., ,**

Mailing Address 38 Madeline Drive

City  
Ridgefield

State  
CT

Zip Code  
06877

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

09 / 20 / 2017

Transaction ID : SA11AI.27970

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction (\$38, 2 weeks)

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

**B. McCallum, Robert, Warren, , III**

Mailing Address 3405 Watertown Place

City  
Vestavia Hills

State  
AL

Zip Code  
35243

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Chief Tax Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

684.00

Date of Receipt

09 / 14 / 2017

Transaction ID : SA11AI.27867

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction (\$38, 2 weeks)

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

**C. McCallum, Robert, Warren, , III**

Mailing Address 3405 Watertown Place

City  
Vestavia Hills

State  
AL

Zip Code  
35243

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Chief Tax Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

722.00

Date of Receipt

09 / 20 / 2017

Transaction ID : SA11AI.27971

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction (\$38, 2 weeks)

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

**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: PAGE 25 OF 43

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HealthSouth Corporation Political Action Committee**

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

**A. McGrath, Denise, B., ,**

Mailing Address 222 River Walk Drive

City

Melbourne Beach

State

FL

Zip Code

32951

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

HealthSouth Corporation

Occupation (for Individual)

Hospital Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

09 / 14 / 2017

Transaction ID : SA11AI.27868

Amount of Each Receipt this Period

15.00

☐ Memo Item

Payroll Deduction (\$15, 2 weeks)

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

**B. McGrath, Denise, B., ,**

Mailing Address 222 River Walk Drive

City

Melbourne Beach

State

FL

Zip Code

32951

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

HealthSouth Corporation

Occupation (for Individual)

Hospital Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

09 / 20 / 2017

Transaction ID : SA11AI.27972

Amount of Each Receipt this Period

15.00

☐ Memo Item

Payroll Deduction (\$15, 2 weeks)

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

**C. Morales, Wanda, , ,**

Mailing Address 309 Chapelwood Drive

City

Dothan

State

AL

Zip Code

36303

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

HealthSouth Corporation

Occupation (for Individual)

Quality/Risk Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

360.00

Date of Receipt

09 / 14 / 2017

Transaction ID : SA11AI.27871

Amount of Each Receipt this Period

20.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

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

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

50.00

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**HealthSouth Corporation Political Action Committee**

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

**A. Morales, Wanda, , ,**

Mailing Address 309 Chapelwood Drive

City  
Dothan

State  
AL

Zip Code  
36303

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Quality/Risk Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

09 / 20 / 2017

Transaction ID : SA11AI.27975

Amount of Each Receipt this Period

20.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

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

**B. Mowen, Ed, M., ,**

Mailing Address 8613 Highlands Drive

City  
Trussville

State  
AL

Zip Code  
35173

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

09 / 14 / 2017

Transaction ID : SA11AI.27872

Amount of Each Receipt this Period

100.00

☐ Memo Item

Payroll Deduction (\$100, 2 weeks)

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

**C. Mowen, Ed, M., ,**

Mailing Address 8613 Highlands Drive

City  
Trussville

State  
AL

Zip Code  
35173

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1900.00

Date of Receipt

09 / 20 / 2017

Transaction ID : SA11AI.27976

Amount of Each Receipt this Period

100.00

☐ Memo Item

Payroll Deduction (\$100, 2 weeks)

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

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

220.00

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**HealthSouth Corporation Political Action Committee**

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

**A. Murvin, Sandra, W., ,**

Mailing Address 2858 Canterbury Road

City  
Birmingham

State  
AL

Zip Code  
35223

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Deputy General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

770.00

Date of Receipt

09 / 14 / 2017

**Transaction ID : SA11Al.27874**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Payroll Deduction (\$50, 2 weeks)

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

**B. Murvin, Sandra, W., ,**

Mailing Address 2858 Canterbury Road

City  
Birmingham

State  
AL

Zip Code  
35223

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Deputy General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

820.00

Date of Receipt

09 / 20 / 2017

**Transaction ID : SA11Al.27978**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Payroll Deduction (\$50, 2 weeks)

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

**C. Ostaszewski, Patrici, , ,**

Mailing Address 54 Bay Way

City  
Brick

State  
NJ

Zip Code  
08723

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Hospital Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

540.00

Date of Receipt

09 / 14 / 2017

**Transaction ID : SA11Al.27875**

Amount of Each Receipt this Period

30.00

☐ Memo Item

Payroll Deduction (\$30, 2 weeks)

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

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

130.00

# **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 43

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

**HealthSouth Corporation Political Action Committee**

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

**A. Ostaszewski, Patrici, , ,**

Mailing Address 54 Bay Way

City  
Brick

State  
NJ

Zip Code  
08723

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Hospital Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

MM / DD / YYYY  
09 / 20 / 2017

**Transaction ID : SA11AI.27979**

Amount of Each Receipt this Period

30.00

☐ Memo Item

Payroll Deduction (\$30, 2 weeks)

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

**B. Poynter, William, W., ,**

Mailing Address 1202 Berwick Road

City

Birmingham

State

AL

Zip Code

35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
National Talent Acquisition Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

MM / DD / YYYY  
09 / 14 / 2017

**Transaction ID : SA11AI.27877**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Payroll Deduction (\$25, 2 weeks)

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

**C. Poynter, William, W., ,**

Mailing Address 1202 Berwick Road

City

Birmingham

State

AL

Zip Code

35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
National Talent Acquisition Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

395.00

Date of Receipt

MM / DD / YYYY  
09 / 20 / 2017

**Transaction ID : SA11AI.27981**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Payroll Deduction (\$25, 2 weeks)

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

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

80.00

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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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)

**HealthSouth Corporation Political Action Committee**

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

**A. Price, Andrew, L., ,**

Mailing Address 72 Nolen Street

City  
Birmingham

State  
AL

Zip Code  
35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Chief Accounting Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1230.00

Date of Receipt

09 / 14 / 2017

**Transaction ID : SA11Al.27878**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Payroll Deduction (\$50, 2 weeks)

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

**B. Price, Andrew, L., ,**

Mailing Address 72 Nolen Street

City  
Birmingham

State  
AL

Zip Code  
35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Chief Accounting Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1280.00

Date of Receipt

09 / 20 / 2017

**Transaction ID : SA11Al.27982**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Payroll Deduction (\$50, 2 weeks)

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

**C. Rosene, Robert, J., ,**

Mailing Address 9747 West Vandeventor Drive

City  
Littleton

State  
CO

Zip Code  
80128

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional Human Resources Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

09 / 14 / 2017

**Transaction ID : SA11Al.27879**

Amount of Each Receipt this Period

15.00

☐ Memo Item

Payroll Deduction (\$15, 2 weeks)

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

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

115.00

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

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NAME OF COMMITTEE (In Full)

**HealthSouth Corporation Political Action Committee**

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

**A. Rosene, Robert, J., ,**

Mailing Address 9747 West Vandeventor Drive

City  
Littleton

State  
CO

Zip Code  
80128

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional Human Resources Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

09 / 20 / 2017

Transaction ID : SA11AI.27983

Amount of Each Receipt this Period

15.00

☐ Memo Item

Payroll Deduction (\$15, 2 weeks)

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

**B. Shafer, Kathleen, A., ,**

Mailing Address 1827 Sentry Oak Court

City

Orange Park

State

FL

Zip Code

32003

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional Chief Nursing Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

09 / 14 / 2017

Transaction ID : SA11AI.27884

Amount of Each Receipt this Period

25.00

☐ Memo Item

Payroll Deduction (\$25, 2 weeks)

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

**C. Shafer, Kathleen, A., ,**

Mailing Address 1827 Sentry Oak Court

City

Orange Park

State

FL

Zip Code

32003

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional Chief Nursing Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

475.00

Date of Receipt

09 / 20 / 2017

Transaction ID : SA11AI.27988

Amount of Each Receipt this Period

25.00

☐ Memo Item

Payroll Deduction (\$25, 2 weeks)

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

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

65.00

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)

**HealthSouth Corporation Political Action Committee**

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

**A. Skripps, Michele, M., ,**

Mailing Address 122 Pine Ridge Drive

City  
Belton

State  
SC

Zip Code  
29627

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Hospital Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

09 / 14 / 2017

**Transaction ID : SA11AI.27885**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

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

**B. Skripps, Michele, M., ,**

Mailing Address 122 Pine Ridge Drive

City  
Belton

State  
SC

Zip Code  
29627

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Hospital Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

09 / 20 / 2017

**Transaction ID : SA11AI.27989**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

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

**C. Smith, Walter, C., ,**

Mailing Address 1040 Broadway Street

City  
Birmingham

State  
AL

Zip Code  
35209

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
State Regulatory Affairs Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

09 / 14 / 2017

**Transaction ID : SA11AI.27888**

Amount of Each Receipt this Period

15.00

☐ Memo Item

Payroll Deduction (\$15, 2 weeks)

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

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

55.00



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

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NAME OF COMMITTEE (In Full)

**HealthSouth Corporation Political Action Committee**

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

**A. Smith, Walter, C., ,**

Mailing Address 1040 Broadway Street

City  
Birmingham

State  
AL

Zip Code  
35209

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
State Regulatory Affairs Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 20 / 2017

**Transaction ID : SA11AI.27992**

Amount of Each Receipt this Period

15.00

☐ Memo Item

Payroll Deduction (\$15, 2 weeks)

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

**B. Taggart, Dean, , ,**

Mailing Address 704 Guardbridge Court

City  
Birmingham

State  
AL

Zip Code  
35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Inspector General

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 14 / 2017

**Transaction ID : SA11AI.27893**

Amount of Each Receipt this Period

15.00

☐ Memo Item

Payroll Deduction (\$15, 2 weeks)

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

**C. Taggart, Dean, , ,**

Mailing Address 704 Guardbridge Court

City  
Birmingham

State  
AL

Zip Code  
35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Inspector General

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 20 / 2017

**Transaction ID : SA11AI.27997**

Amount of Each Receipt this Period

15.00

☐ Memo Item

Payroll Deduction (\$15, 2 weeks)

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

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

45.00



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

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NAME OF COMMITTEE (In Full)

**HealthSouth Corporation Political Action Committee**

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

**A. Terry, Sheila, , ,**

Mailing Address 177 Wisteria Dr.

City  
Chelsea

State  
AL

Zip Code  
35043

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

09 / 14 / 2017

Transaction ID : SA11AI.27894

Amount of Each Receipt this Period

15.00

☐ Memo Item

Payroll Deduction (\$15, 2 weeks)

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

**B. Terry, Sheila, , ,**

Mailing Address 177 Wisteria Dr.

City  
Chelsea

State  
AL

Zip Code  
35043

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

09 / 20 / 2017

Transaction ID : SA11AI.27998

Amount of Each Receipt this Period

15.00

☐ Memo Item

Payroll Deduction (\$15, 2 weeks)

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

**C. Traylor, Curtis, H., ,**

Mailing Address 3307 Waters Edge

City  
Manvel

State  
TX

Zip Code  
77578

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Pharmacy Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

216.00

Date of Receipt

09 / 14 / 2017

Transaction ID : SA11AI.27895

Amount of Each Receipt this Period

12.00

☐ Memo Item

Payroll Deduction (\$12, 2 weeks)

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

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

42.00

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

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NAME OF COMMITTEE (In Full)

**HealthSouth Corporation Political Action Committee**

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

**A. Traylor, Curtis, H., ,**

Mailing Address 3307 Waters Edge

City  
Manvel

State  
TX

Zip Code  
77578

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Pharmacy Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

09 / 20 / 2017

**Transaction ID : SA11AI.27999**

Amount of Each Receipt this Period

12.00

☐ Memo Item

Payroll Deduction (\$12, 2 weeks)

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

**B. Treadway, Michael, G., ,**

Mailing Address 1884 West Holly Trail

City  
Hawkins

State  
TX

Zip Code  
75570

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

09 / 14 / 2017

**Transaction ID : SA11AI.27896**

Amount of Each Receipt this Period

30.00

☐ Memo Item

Payroll Deduction (\$30, 2 weeks)

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

**C. Treadway, Michael, G., ,**

Mailing Address 1884 West Holly Trail

City  
Hawkins

State  
TX

Zip Code  
75570

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

405.00

Date of Receipt

09 / 20 / 2017

**Transaction ID : SA11AI.28000**

Amount of Each Receipt this Period

30.00

☐ Memo Item

Payroll Deduction (\$30, 2 weeks)

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

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

72.00

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**HealthSouth Corporation Political Action Committee**

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

**A. Turman, Tracy, Penn, ,**

Mailing Address 16313 Hampton Glen Lane

City  
Chesterfield

State  
VA

Zip Code  
23832

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Hospital Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 14 / 2017

Transaction ID : SA11AI.27897

Amount of Each Receipt this Period

14.00

☐ Memo Item

Payroll Deduction (\$14, 2 weeks)

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

**B. Turman, Tracy, Penn, ,**

Mailing Address 16313 Hampton Glen Lane

City  
Chesterfield

State  
VA

Zip Code  
23832

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Hospital Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 20 / 2017

Transaction ID : SA11AI.28001

Amount of Each Receipt this Period

14.00

☐ Memo Item

Payroll Deduction (\$14, 2 weeks)

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

**C. Wilder, Linda, Masone, ,**

Mailing Address 2335 Ridge Trail

City  
Birmingham

State  
AL

Zip Code  
35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 14 / 2017

Transaction ID : SA11AI.27900

Amount of Each Receipt this Period

70.00

☐ Memo Item

Payroll Deduction (\$70, 2 weeks)

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

98.00

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

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

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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)

**HealthSouth Corporation Political Action Committee**

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

**A. Wilder, Linda, Masone, ,**

Mailing Address 2335 Ridge Trail

City  
Birmingham

State  
AL

Zip Code  
35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1330.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 20 / 2017

**Transaction ID : SA11AI.28004**

Amount of Each Receipt this Period

70.00

☐ Memo Item

Payroll Deduction (\$70, 2 weeks)

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

**B. Willey, Donn, G., ,**

Mailing Address 1932 River Woods Road

City  
Hoover

State  
AL

Zip Code  
35244

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
National Compensation Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 14 / 2017

**Transaction ID : SA11AI.27901**

Amount of Each Receipt this Period

19.00

☐ Memo Item

Payroll Deduction (\$19, 2 weeks)

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

**C. Willey, Donn, G., ,**

Mailing Address 1932 River Woods Road

City  
Hoover

State  
AL

Zip Code  
35244

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
National Compensation Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

317.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 20 / 2017

**Transaction ID : SA11AI.28005**

Amount of Each Receipt this Period

19.00

☐ Memo Item

Payroll Deduction (\$19, 2 weeks)

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

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

108.00

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

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

HealthSouth Corporation Political Action Committee

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

A. Wilson, Arthur, E., Jr.

Mailing Address 5947 South Shades Crest Rd

City  
BessemerState  
ALZip Code  
35022FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth CorporationOccupation (for Individual)  
Chief Real Estate Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 14 / 2017

Transaction ID : SA11AI.27902

Amount of Each Receipt this Period

76.92

☐ Memo Item

Payroll Deduction (\$76.92, 2 weeks)

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

B. Wilson, Arthur, E., Jr.

Mailing Address 5947 South Shades Crest Rd

City  
BessemerState  
ALZip Code  
35022FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth CorporationOccupation (for Individual)  
Chief Real Estate Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1461.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 20 / 2017

Transaction ID : SA11AI.28006

Amount of Each Receipt this Period

76.92

☐ Memo Item

Payroll Deduction (\$76.92, 2 weeks)

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

C. Wilson, John, Ryan, ,

Mailing Address 1113 Monaghan Drive

City  
BirminghamState  
ALZip Code  
35242FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth CorporationOccupation (for Individual)  
Managed Care Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 14 / 2017

Transaction ID : SA11AI.27903

Amount of Each Receipt this Period

15.00

☐ Memo Item

Payroll Deduction (\$15, 2 weeks)

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

168.84

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

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

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NAME OF COMMITTEE (In Full)

**HealthSouth Corporation Political Action Committee**

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

**A. Wilson, John, Ryan, ,**

Mailing Address 1113 Monaghan Drive

City  
Birmingham

State  
AL

Zip Code  
35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Managed Care Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.00

Date of Receipt

MM / DD / YYYY  
09 / 20 / 2017

**Transaction ID : SA11AI.28007**

Amount of Each Receipt this Period

15.00

☐ Memo Item

Payroll Deduction (\$15, 2 weeks)

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

**B. Wisner, Robert, M, ,**

Mailing Address 1020 Eagle Lake Circle

City  
Birmingham

State  
AL

Zip Code  
35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Reimbursement Senior Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

684.00

Date of Receipt

MM / DD / YYYY  
09 / 14 / 2017

**Transaction ID : SA11AI.27905**

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction (\$38, 2 weeks)

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

**C. Wisner, Robert, M, ,**

Mailing Address 1020 Eagle Lake Circle

City  
Birmingham

State  
AL

Zip Code  
35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Reimbursement Senior Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

722.00

Date of Receipt

MM / DD / YYYY  
09 / 20 / 2017

**Transaction ID : SA11AI.28009**

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction (\$38, 2 weeks)

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

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

91.00

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

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 OF 43

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HealthSouth Corporation Political Action Committee**

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

**A. Wittig, William, Forrest, ,**

Mailing Address 3969 Haddon Circle

City  
Hoover

State  
AL

Zip Code  
35226

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Operations Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 14 / 2017

**Transaction ID : SA11AI.27906**

Amount of Each Receipt this Period

15.00

☐ Memo Item

Payroll Deduction (\$15, 2 weeks)

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

**B. Wittig, William, Forrest, ,**

Mailing Address 3969 Haddon Circle

City  
Hoover

State  
AL

Zip Code  
35226

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Operations Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 20 / 2017

**Transaction ID : SA11AI.28010**

Amount of Each Receipt this Period

15.00

☐ Memo Item

Payroll Deduction (\$15, 2 weeks)

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

**C. Yeager, Russell, , ,**

Mailing Address 1348 Saddlecreek Parkway

City  
Birmingham

State  
AL

Zip Code  
35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Chief Information Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

698.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 14 / 2017

**Transaction ID : SA11AI.27907**

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction (\$40, 2 weeks)

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

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

70.00

# **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 40 OF 43

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HealthSouth Corporation Political Action Committee**

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

**A. Yeager, Russell, , ,**

Mailing Address 1348 Saddlecreek Parkway

City  
Birmingham

State  
AL

Zip Code  
35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Chief Information Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

738.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 20 / 2017

Transaction ID : SA11AI.28011

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction (\$40, 2 weeks)

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

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

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

40.00

3409.84



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 41 OF 43

<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)

**HealthSouth Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. BOB CORKER FOR SENATE**

Mailing Address 832 GEORGIA AVENUE STE 221

City  
CHATTANOOGAState  
TNZip Code  
37402

Purpose of Disbursement

Candidate Name

**CORKER, ROBERT P JR, , ,**

Office Sought:

☐ House☒ Senate☐ President

Disbursement For: 2018

☐ Primary☒ General☐ Other (specify) ▼

State: TN

District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	7			2	0	1	7		

FEC Identification Number

**C** C00407650**Transaction ID : SB23.28015**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF NEAL DUNN**

Mailing Address PO BOX 16088

City  
PANAMA CITYState  
FLZip Code  
32406

Purpose of Disbursement

Candidate Name

**DUNN, NEAL, PATRICK, , ,**

Office Sought:

☒ House☐ Senate☐ President

Disbursement For: 2018

☐ Primary☒ General☐ Other (specify) ▼

State: FL

District: 02

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	7			2	0	1	7		

FEC Identification Number

**C** C00582304**Transaction ID : SB23.28020**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MARTIN HEINRICH FOR SENATE**

Mailing Address P.O. BOX 25763

City  
ALBUQUERQUEState  
NMZip Code  
87125

Purpose of Disbursement

Candidate Name

**HEINRICH, MARTIN TREVOR, , ,**

Office Sought:

☐ House☒ Senate☐ President

Disbursement For: 2018

☐ Primary☒ General☐ Other (specify) ▼

State: NM

District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	7			2	0	1	7		

FEC Identification Number

**C** C00434563**Transaction ID : SB23.28014**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

6000.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 42 OF 43

<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)

**HealthSouth Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. PROJECT WEST POLITICAL ACTION COMMITTEE**

Mailing Address 9227 EAST LINCOLN AVENUE #200-435

City  
LONE TREEState  
COZip Code  
80124

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	7			2	0	1	7		

FEC Identification Number

**C** C00525543**Transaction ID : SB23.28016**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. STRANGE FOR SENATE**

Mailing Address PO BOX 3670

City  
MONTGOMERYState  
ALZip Code  
36109Purpose of Disbursement  
Special Election

Candidate Name

**STRANGE, LUTHER J III, , ,**

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2017

☐ Primary ☐ General  
☒ Other (specify)

State: AL

District: 00

Runoff

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	7			2	0	1	7		

FEC Identification Number

**C** C00629451**Transaction ID : SB23.28012**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. TEXANS FOR SENATOR JOHN CORNYN INC**Mailing Address 6850 AUSTIN CENTRE BLVD  
SUITE 180City  
AUSTINState  
TXZip Code  
78731

Purpose of Disbursement

Candidate Name

**CORNYN, JOHN, , ,**

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State: TX

District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	7			2	0	1	7		

FEC Identification Number

**C** C00369033**Transaction ID : SB23.28013**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

10000.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 43 OF 43

<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)

**HealthSouth Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. VERN BUCHANAN FOR CONGRESS**

Mailing Address P. O. BOX 48928

City  
SARASOTAState  
FLZip Code  
34230

Purpose of Disbursement

Candidate Name

**BUCHANAN, VERNON, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

State: FL

District: 16

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	07	/	2017

FEC Identification Number

**C** C00412759**Transaction ID : SB23.28018**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2500.00

18500.00